

Ministry of Long-Term Care

Long-Term Care Operations Division
Long-Term Care Inspections Branch

London District

130 Dufferin Avenue, 4th Floor
London, ON, N6A 5R2
Telephone: (800) 663-3775

Public Report

Report Issue Date: March 17, 2025

Inspection Number: 2025-1256-0001

Inspection Type:

Proactive Compliance Inspection

Licensee: Revera Long Term Care Inc.

Long Term Care Home and City: Village on the Ridge, Ridgetown

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): March 10, 11, 12, 13, 14, 17, 2025

The following intake(s) were inspected: #00141105- Proactive Compliance Inspection 2025

The following **Inspection Protocols** were used during this inspection:

- Food, Nutrition and Hydration
- Medication Management
- Safe and Secure Home
- Quality Improvement
- Pain Management
- Resident Care and Support Services
- Skin and Wound Prevention and Management
- Residents' and Family Councils
- Housekeeping, Laundry and Maintenance Services
- Infection Prevention and Control
- Prevention of Abuse and Neglect

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Staffing, Training and Care Standards
Residents' Rights and Choices

INSPECTION RESULTS

Non-Compliance Remedied

Non-compliance was found during this inspection and was **remedied** by the licensee prior to the conclusion of the inspection. The inspector was satisfied that the non-compliance met the intent of section 154 (2) and requires no further action.

NC #001 remedied pursuant to FLTCA, 2021, s. 154 (2)

Non-compliance with: FLTCA, 2021, s. 19 (2) (a)

Accommodation services

s. 19 (2) Every licensee of a long-term care home shall ensure that,
(a) the home, furnishings and equipment are kept clean and sanitary;

The licensee failed to ensure that the home was kept clean and sanitary. The Inspector observed floors and baseboards in four resident rooms and the lounge to have dirt, dust and debris build up. A wall in another area of the home was observed to have a brown substance splattered and dried to the baseboard and lower aspect under the handrail. The home scheduled extra staff to clean the identified areas and the Inspector observed these areas to have been clean.

Sources: observations and staff interviews.

Date Remedy Implemented: March 12, 2025

NC #002 remedied pursuant to FLTCA, 2021, s. 154 (2)

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Non-compliance with: O. Reg. 246/22, s. 19

Windows

s. 19. Every licensee of a long-term care home shall ensure that every window in the home that opens to the outdoors and is accessible to residents has a screen and cannot be opened more than 15 centimeters.

The licensee failed to ensure that every window in the home that opened to the outdoors and was accessible to residents had a screen and could not be opened more than 15 centimeters (cm). The windows in two areas of the home were able to be opened more than 15cm. Stoppers had later been added to the windows and could not be opened to more than 15cm.

Sources: observations and staff interviews.

Date Remedy Implemented: March 11, 2025

WRITTEN NOTIFICATION: Accommodation Services

NC #003 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: FLTCA, 2021, s. 19 (2) (c)

Accommodation services

s. 19 (2) Every licensee of a long-term care home shall ensure that,
(c) the home, furnishings and equipment are maintained in a safe condition and in a good state of repair.

The licensee failed to ensure that furnishings were maintained in a safe condition and a good state of repair when the Inspector observed a resident room which had a damaged wall, missing baseboard, and pieces of the tile floor broken and missing. Another resident room and beside the front entry door had missing baseboard as well.

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Sources: observations

WRITTEN NOTIFICATION: Air Temperature

NC #004 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 24 (2) 1.

Air temperature

s. 24 (2) Every licensee of a long-term care home shall ensure that the temperature is measured and documented in writing, at a minimum in the following areas of the home:

1. At least two resident bedrooms in different parts of the home.

The licensee failed to ensure that the air temperature was measured and documented in writing in a resident room when the electronic device used to measure the temperature was not in the room.

Sources: Temperature Record and interview with the Executive Director.