



**Ministry of Health and  
Long-Term Care**

**Inspection Report under  
the Long-Term Care  
Homes Act, 2007**

**Ministère de la Santé et des  
Soins de longue durée**

**Rapport d'inspection sous la  
Loi de 2007 sur les foyers de  
soins de longue durée**

**Health System Accountability and  
Performance Division  
Performance Improvement and  
Compliance Branch**

**Division de la responsabilisation et de la  
performance du système de santé  
Direction de l'amélioration de la  
performance et de la conformité**

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**Public Copy/Copie du public**

<b>Report Date(s) / Date(s) du Rapport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / Registre no</b>	<b>Type of Inspection / Genre d'inspection</b>
Apr 25, 2014	2014_236572_0006	O-000048- 14	Critical Incident System

**Licensee/Titulaire de permis**

**OMNI HEALTH CARE LIMITED PARTNERSHIP  
1840 LANSDOWNE STREET WEST, UNIT 12, PETERBOROUGH, ON, K9K-2M9**

**Long-Term Care Home/Foyer de soins de longue durée**

**THE VILLAGE GREEN NURSING HOME  
166 Pleasant Drive, P.O. Box 94, Selby, ON, K0K-2Z0**

**Name of Inspector(s)/Nom de l'inspecteur ou des inspecteurs  
BARBARA ROBINSON (572)**

**Inspection Summary/Résumé de l'inspection**



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**The purpose of this inspection was to conduct a Critical Incident System inspection.**

**This inspection was conducted on the following date(s): April 23, 2014**

**During the course of the inspection, the inspector(s) spoke with Personal Support Workers, Registered Practical Nurses including the RAI Coordinator, a Registered Nurse, the Life Enrichment Coordinator, the Director of Care, and the Administrator.**

**During the course of the inspection, the inspector(s) reviewed a resident's health care record, a critical incident report, internal Incident Reports and Post Fall Investigation Assessments, the Falls Prevention Program, the Resident Falls Policy CS-12.1, the Supportive Measures and Behavioural Support Manual, and Responsive Behaviour Team Notes.**

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

**Falls Prevention**

**Responsive Behaviours**

**There are no findings of Non-Compliance as a result of this inspection.**



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### NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

Legend	Legendé
WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order	WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités
Non-compliance with requirements under the Long-Term Care Homes Act, 2007 (LTCHA) was found. (A requirement under the LTCHA includes the requirements contained in the items listed in the definition of "requirement under this Act" in subsection 2(1) of the LTCHA.)	Le non-respect des exigences de la Loi de 2007 sur les foyers de soins de longue durée (LFSLD) a été constaté. (Une exigence de la loi comprend les exigences qui font partie des éléments énumérés dans la définition de « exigence prévue par la présente loi », au paragraphe 2(1) de la LFSLD.)
The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.	Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.

Issued on this 25th day of April, 2014

Signature of Inspector(s)/Signature de l'inspecteur ou des inspecteurs

*Barbara Robinson*