

**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:** May 30, 2025

**Inspection Number:** 2025-1621-0005

**Inspection Type:**

Complaint  
Critical Incident

**Licensee:** The Corporation of the Municipality of Chatham-Kent

**Long Term Care Home and City:** Riverview Gardens, Chatham

## INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): May 26, 27, 28, 29, 30, 2025

The following intake(s) were inspected:

- Intake: #00145148 -IL-0139181-LO - complaint related to resident care and support services.
- Intake: #00147484 - IL-0140267-AH/M626-000042-25 -related to resident care and support services.
- Intake: #00147625 - M626-000044-25 - related to alleged resident to resident abuse.

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

Resident Care and Support Services  
Medication Management  
Food, Nutrition and Hydration  
Prevention of Abuse and Neglect  
Responsive Behaviours

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## 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. 6 (2)**

Plan of care

s. 6 (2) The licensee shall ensure that the care set out in the plan of care is based on an assessment of the resident and on the needs and preferences of that resident.

The licensee failed to ensure that care outlined in a resident's care plan reflected their needs. Hours that a 1:1 staff was assigned to a resident was increased, however the care plan was not updated to reflect this change.

The care plan was updated on May 28, 2025.

Sources: resident's care plan, interview with staff, and observation of resident.

Date Remedy Implemented: May 28, 2025

### WRITTEN NOTIFICATION: Plan of Care based on assessment of resident

NC #002 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

**Non-compliance with: FLTCA, 2021, s. 6 (2)**

Plan of care

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assessment of the resident and on the needs and preferences of that resident.

The licensee did not ensure that the care set out in the plan of care was based on an assessment and on the needs of a resident.

A record review of a resident's surgical report revealed that the resident sustained a fracture to their hip. When the resident returned to the home from hospital and received a Physiotherapy assessment, treatment and precautions were outlined for the opposite hip which was not injured. There was no treatment plan for resident's affected hip.

The resident received strengthening exercises and range of motion exercises as per a treatment plan for the incorrect hip. The physiotherapy assessment and treatment plan was updated to reflect hip interventions for the correct hip.

Sources: review of resident's clinical records, interviews with staff.

## WRITTEN NOTIFICATION: Resident records

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

**Non-compliance with: O. Reg. 246/22, s. 274 (b)**

Resident records

s. 274. Every licensee of a long-term care home shall ensure that,  
(b) the resident's written record is kept up to date at all times.

The licensee has failed to ensure that a resident's written record was kept up to date at all times.

A record review of a resident's surgical report revealed that the resident sustained a fracture to a hip, resulted in surgery. It was noted that several assessments upon return from hospital, indicated that the injury was sustained to the opposite, unaffected hip. These documents included skin and wound, head-to-toe and physiotherapy assessments.

Sources: review of resident's clinical records, interviews with staff.