

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: April 21, 2026
Inspection Number: 2026-1621-0002
Inspection Type: Complaint Critical Incident Follow up
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): April 9, 13, 14, 15, 16, 17, 20, 21, 2026

The following intake(s) were inspected:

- Intake: #00173192 - Follow-up #: 1 - FLTCA, 2021 - s. 24 (1) CO#001 related to specific staff retraining, monitoring and updates.
- Intake: #00174875 - Critical Incident System report (CIS) #M626-000047-26: related to responsive behaviors.
- Intake: #00175258 - CIS #M626-000052-26: related to responsive behaviors.
- Intake: #00175332 - CIS #M626-000053-26: related to responsive behaviors.
- Intake: #00175338 - CIS #M626-000054-26: related to a fall with injury.
- Intake: #00175680 - related to a complaint regarding medication administration.

Previously Issued Compliance Order(s)

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The following previously issued Compliance Order(s) were found to be in compliance:

Order #001 from Inspection #2026-1621-0001 related to FLTCA, 2021, s. 24 (1).

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

- Medication Management
- Prevention of Abuse and Neglect
- Responsive Behaviours
- Falls Prevention and Management

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 (10) (b)

Plan of care

s. 6 (10) The licensee shall ensure that the resident is reassessed and the plan of care reviewed and revised at least every six months and at any other time when,
(b) the resident's care needs change or care set out in the plan is no longer necessary; or

Review of a resident's plan of care showed that staff were to perform specific tasks and the resident was to use specific medical equipment.

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During an interview with a Nurse Manager (NM) they confirmed that the resident experienced a change in condition, the care tasks performed by staff had changed and the resident was no longer using the equipment specified in the plan of care. The NM acknowledged that the plan of care was not updated after the resident experienced a change in condition.

During a subsequent review later in the day, the plan of care was noted to have been updated to reflect the resident's current care needs.

Sources: A resident's clinical record and interview with a NM.

Date Remedy Implemented: April 20, 2026

WRITTEN NOTIFICATION: Plan of Care

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

Non-compliance with: FLTCA, 2021, s. 6 (7)

Plan of care

s. 6 (7) The licensee shall ensure that the care set out in the plan of care is provided to the resident as specified in the plan.

Review of a resident's clinical record showed that they received specific regularly scheduled care. The resident's clinical record stated that care was to be provided at the specific scheduled times. Review of the resident's clinical record showed the specific care was not provided as specified in the plan of care on 37 occasions.

Sources: A resident's clinical record and interview with a NM.