



**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  
prévue le Loi de 2007 les  
foyers de soins de longue**

**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

London Service Area Office  
291 King Street, 4th Floor  
LONDON, ON, N6B-1R8  
Telephone: (519) 675-7680  
Facsimile: (519) 675-7685

Bureau régional de services de London  
291, rue King, 4ièm étage  
LONDON, ON, N6B-1R8  
Téléphone: (519) 675-7680  
Télécopieur: (519) 675-7685

**Public Copy/Copie du public**

Date(s) of inspection/Date(s) de l'inspection	Inspection No/ No de l'inspection	Type of Inspection/Genre d'inspection
Sep 5, 7, 21, 2012	2012_089115_0039	Complaint

**Licensee/Titulaire de permis**

THE CORPORATION OF THE MUNICIPALITY OF CHATHAM-KENT  
519 King Street West, CHATHAM, ON, N7M-1G8

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

RIVERVIEW GARDENS  
519 KING STREET WEST, CHATHAM, ON, N7M-1G8

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

TERRI DALY (115)

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

The purpose of this inspection was to conduct a Complaint inspection.

During the course of the inspection, the inspector(s) spoke with the Administrator, the Director of Care, the Assistant Director of Care, one Registered Nurse, two Registered Practical Nurses and two Personal Care Givers.

During the course of the inspection, the inspector(s) reviewed the clinical record of one resident and policies and procedures related to Log # L-001281-12.

The following Inspection Protocols were used during this inspection:

Pain

Findings of Non-Compliance were found during this inspection.

**NON-COMPLIANCE / NON-RESPECT DES EXIGENCES**



**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  
prévue le Loi de 2007 les  
foyers de soins de longue**

**Legend**

WN – Written Notification  
VPC – Voluntary Plan of Correction  
DR – Director Referral  
CO – Compliance Order  
WAO – Work and Activity Order

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.)

The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.

**Legendé**

WN – Avis écrit  
VPC – Plan de redressement volontaire  
DR – Aiguillage au directeur  
CO – Ordre de conformité  
WAO – Ordres : travaux et activités

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.)

Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.

**WN #1: The Licensee has failed to comply with O.Reg 79/10, s. 52. Pain management**

**Specifically failed to comply with the following subsections:**

**s. 52. (2) Every licensee of a long-term care home shall ensure that when a resident's pain is not relieved by initial interventions, the resident is assessed using a clinically appropriate assessment instrument specifically designed for this purpose. O. Reg. 79/10, s. 52 (2).**

**Findings/Faits saillants :**

1. A resident has had a recent change in pain medications. Documentation indicates the resident's increased pain and PRN pain medication usage. However a clinically appropriate pain assessment was not completed.  
Staff confirmed that a recent pain assessment has not been completed.

**WN #2: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 6. Plan of care**

**Specifically failed to comply with the following subsections:**

**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 the needs and preferences of that resident. 2007, c. 8, s. 6 (2).**

**Findings/Faits saillants :**

1. Staff interviewed indicate that a resident often exhibits behaviours associated with pain. However, the resident's plan of care does not reflect these behaviours or an assessment related to the resident's needs and preferences.

**Issued on this 21st day of September, 2012**



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  
prévue le Loi de 2007 les  
foyers de soins de longue

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