



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

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

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

**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
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Direction de l'amélioration de la
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Report Date(s) / Date(s) du apport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Apr 14, 2015	2015_229213_0014	003747-15	Critical Incident System

Licensee/Titulaire de permis

THE CORPORATION OF THE COUNTY OF MIDDLESEX
c/o Strathmere Lodge 599 Albert Street, P.O. Box 5000 STRATHROY ON N7G 3J3

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

STRATHMERE LODGE
599 Albert Street Box 5000 STRATHROY ON N7G 3J3

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

RHONDA KUKOLY (213), HELENE DESABRAIS (615)

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 9, 2015

This inspection was completed related to Critical Incident #M627-000008-15.

During the course of the inspection, the inspector(s) spoke with the Director of Resident Care, the Nursing Coordinator, a Registered Nurse, a Registered Practical Nurse, a Personal Support Worker and a Resident.

The Inspectors also made observations; reviewed health records, policies, staff communications and other relevant documentation.

The following Inspection Protocols were used during this inspection:

**Admission and Discharge
Reporting and Complaints
Responsive Behaviours**

During the course of this inspection, Non-Compliances were issued.

1 WN(s)

1 VPC(s)

0 CO(s)

0 DR(s)

0 WAO(s)

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
<p>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).</p> <p>The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.</p>	<p>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.</p> <p>Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.</p>

WN #1: The Licensee has failed to comply with O.Reg 79/10, s. 8. Policies, etc., to be followed, and records

Specifically failed to comply with the following:

s. 8. (1) Where the Act or this Regulation requires the licensee of a long-term care home to have, institute or otherwise put in place any plan, policy, protocol, procedure, strategy or system, the licensee is required to ensure that the plan, policy, protocol, procedure, strategy or system,

(a) is in compliance with and is implemented in accordance with applicable requirements under the Act; and O. Reg. 79/10, s. 8 (1).

(b) is complied with. O. Reg. 79/10, s. 8 (1).



Findings/Faits saillants :

1. The licensee has failed to ensure that the home's Abuse policy was complied with.

Record review of health records for Resident #10 and Resident #11 and review of Critical Incident #M627-000010-15 revealed that on a particular date, an altercation occurred between these 2 residents where one of these Residents suffered an injury.

The Strathmere Lodge Abuse Policy ADA 007 Revised April 15, 2014 indicates:

"Abuse - Resident Abuse Procedure:

10. Immediately upon becoming aware of the abuse incident, the Director of Resident Care or designate will ensure that the Ministry of Health and Long Term Care (Reporting Certain Matters to the Director) is notified by initiating the on-line Mandatory Critical Incident Report "Abuse" form and on the Critical Incident Report.

11. Staff that do not have access to the home's critical incident reporting system can report using the toll-free Action Line # at 1-866-434-0144", and

"Abuse - Resident Abuse by Resident Procedure:

10. Where appropriate the on-line Mandatory Critical Incident System form will be completed. (Refer to Resident Abuse #8)."

Interview with the Director of Resident Care on April 9, 2015 revealed he is aware of the obligation to report resident to resident abuse where harm or risk of harm has occurred and he was aware of the incident that occurred between the 2 identified residents and the injury that occurred. He confirmed that he did not report this incident to the Ministry of Health and Long Term Care. [s. 8. (1) (b)]

Additional Required Actions:

VPC - pursuant to the Long-Term Care Homes Act, 2007, S.O. 2007, c.8, s.152(2) the licensee is hereby requested to prepare a written plan of correction for achieving compliance to ensure that the home's Abuse policy is complied with, to be implemented voluntarily.



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Issued on this 14th day of April, 2015

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

Original report signed by the inspector.