

**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:** March 3, 2025

**Inspection Number:** 2025-1455-0001

**Inspection Type:**

Complaint  
Critical Incident

**Licensee:** Axiom Extendicare LTC II LP, by its general partners Extendicare LTC Managing II GP Inc. and Axiom Extendicare LTC II GP Inc.

**Long Term Care Home and City:** Riverside Place, Windsor

## INSPECTION SUMMARY

The inspection occurred onsite on the following dates: February 24-27, 2025 and March 3, 2025

The following intake(s) were inspected:

- Intake: #00138472 - Complaint relating to resident plan of care
- Intake: #00139670 - Critical Incident (CI) 2972-000005-25 - relating to infection prevention and control
- Intake: #00141007 - Complaint relating to injuries of unknown etiology

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

Resident Care and Support Services  
Infection Prevention and Control  
Prevention of Abuse and Neglect  
Reporting and Complaints

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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: O. Reg. 246/22, s. 102 (2) (b)**

Infection prevention and control program

s. 102 (2) The licensee shall implement,

(b) any standard or protocol issued by the Director with respect to infection prevention and control. O. Reg. 246/22, s. 102 (2).

The licensee failed to ensure that the Infection Prevention and Control (IPAC) Standard for Long-Term Care Homes was implemented. The IPAC Standard required under section 10.4 that the hand hygiene program was to include hand hygiene support for residents, specifically (h) prior to receiving meals and snacks.

During a meal service observation, it was noted that residents were not supported to perform hand hygiene before their meal. Through review of the home's policy and during an interview with Infection Control Manager, it was confirmed that residents are to receive assistance from staff in performing hand hygiene prior to receiving their meals.

During a follow up meal observation, staff were noted to be assisting residents in completing hand hygiene before meal service.

Sources: Observations, review of Resident Hand Hygiene Policy and interview with

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Infection Control Manager.

Date Remedy Implemented: February 26, 2025