

**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

**Original Public Report**

<b>Report Issue Date:</b> December 3, 2024
<b>Inspection Number:</b> 2024-1626-0004
<b>Inspection Type:</b> Proactive Compliance Inspection
<b>Licensee:</b> Corporation of the City of Windsor
<b>Long Term Care Home and City:</b> Huron Lodge Long Term Care Home, Windsor

**INSPECTION SUMMARY**

The inspection occurred onsite on the following date(s): November 18, 19, 21, 22, 25, and 26, 2024.

The following intake(s) were inspected:

- Intake: #00131844- 2024 Proactive Compliance Inspection

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

- Skin and Wound Prevention and Management
- Resident Care and Support Services
- Medication Management
- Food, Nutrition and Hydration
- Residents' and Family Councils
- Infection Prevention and Control
- Safe and Secure Home
- Prevention of Abuse and Neglect
- Quality Improvement
- Staffing, Training and Care Standards
- Residents' Rights and Choices
- Pain Management

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## INSPECTION RESULTS

### WRITTEN NOTIFICATION: Skin and Wound Care

NC #001 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

**Non-compliance with: O. Reg. 246/22, s. 55 (2) (b) (iv)**

Skin and wound care

s. 55 (2) Every licensee of a long-term care home shall ensure that,

(b) a resident exhibiting altered skin integrity, including skin breakdown, pressure injuries, skin tears or wounds,

(iv) is reassessed at least weekly by an authorized person described in subsection (2.1), if clinically indicated.

#### Introduction

The licensee failed to ensure that residents, who were exhibiting altered skin integrity, had a weekly skin and wound assessment.

#### Rationale and Summary

Residents were identified as having had altered skin integrity. On review of the skin and wound assessments it was noted that the residents assessments were not completed weekly. During an interview with the Acting Director of Care (A/DOC), it was confirmed that the expectation would have been that the assessments were completed weekly and were not.

Not completing a weekly skin and wound assessment for residents who exhibited altered skin integrity placed them at risk for a potential delay in detection of a deteriorating wound.

**Sources:** Resident clinical records and interview with the A/DOC.