



**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 sous la  
Loi de 2007 sur les foyers de  
soins de longue durée**

**Long-Term Care Homes Division  
Long-Term Care Inspections Branch**

**Division des foyers de soins de  
longue durée  
Inspection de soins de longue durée**

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## **Public Copy/Copie du public**

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<b>Report Date(s) / Date(s) du rapport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / Registre no</b>	<b>Type of Inspection / Genre d'inspection</b>
Jun 9, 2017	2017_664602_0017	008347-17	Resident Quality Inspection

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### **Licensee/Titulaire de permis**

AON INC.  
33 HARBOUR SQUARE SUITE 825 TORONTO ON M5J 2G2

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

MOIRA PLACE LONG-TERM CARE HOME  
415 RIVER STREET WEST TWEED ON K0K 3J0

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

WENDY BROWN (602), CATHI KERR (641)

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



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**The purpose of this inspection was to conduct a Resident Quality Inspection inspection.**

**This inspection was conducted on the following date(s): May 29 - 31 and June 1 & 2, 2017**

**During the course of the inspection, the inspector(s) spoke with residents, family members, a member of the Resident Council, Personal Support Workers (PSW), Registered Practical Nurses (RPN), Registered Nurses (RN), the Dietician, the Life Enrichment Coordinator, the Assistant Director of Care (ADOC), the Director of Care (DOC) and the Administrator.**

**In addition the inspector(s) conducted a tour of the home, observed medication administration and practices, observed and reviewed infection control practices, reviewed resident health care records as well as resident council minutes and applicable home policies & procedures.**

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

**Falls Prevention  
Family Council  
Infection Prevention and Control  
Medication  
Minimizing of Restraining  
Residents' Council  
Skin and Wound Care**

**During the course of this inspection, Non-Compliances were not issued.**

**0 WN(s)  
0 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
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.	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.

Issued on this 9th day of June, 2017

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

**Original report signed by the inspector.**