



**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**

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**Division de la responsabilisation et de la  
performance du système de santé  
Direction de l'amélioration de la  
performance et de la conformité**

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

| <b>Report Date(s) /<br/>Date(s) du Rapport</b> | <b>Inspection No /<br/>No de l'inspection</b> | <b>Log # /<br/>Registre no</b> | <b>Type of Inspection /<br/>Genre d'inspection</b> |
|--|---|--------------------------------|--|
| Sep 25, 2014                                   | 2014_260521_0042                              | 004073-14                      | Complaint  |

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

THE HOMEWOOD CORPORATION  
150 DELHI STREET, GUELPH, ON, N1E-6K9

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

THE VILLAGE OF GLENDALE CROSSING  
3030 Singleton Avenue, LONDON, ON, N6L-0B6

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

REBECCA DEWITTE (521)

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

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

**This inspection was conducted on the following date(s): September 19, 2014**

**During the course of the inspection, the inspector(s) spoke with the  
Administrator, the Director of Care, 3 Registered Practical Nurses, 1 Personal  
Support Worker, 1 Family Member**

**During the course of the inspection, the inspector(s) conducted a facility tour of  
all resident areas and common areas, observed residents and the care provided  
to them, observed snack services and reviewed clinical records**

**The following Inspection Protocols were used during this inspection:  
Dignity, Choice and Privacy  
Resident Charges**



**Findings of Non-Compliance were found during this inspection.**

| <b>NON-COMPLIANCE / NON - RESPECT DES EXIGENCES</b>   |  |
|---|--|
| Legend  | Legendé  |
| WN – Written Notification<br>VPC – Voluntary Plan of Correction<br>DR – Director Referral<br>CO – Compliance Order<br>WAO – Work and Activity Order   | WN – Avis écrit<br>VPC – Plan de redressement volontaire<br>DR – Aiguillage au directeur<br>CO – Ordre de conformité<br>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.) | 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. |
| The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.   | 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 LTCHA, 2007 S.O. 2007, c.8, s. 3. Residents' Bill of Rights**



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

**s. 3. (1) Every licensee of a long-term care home shall ensure that the following rights of residents are fully respected and promoted:**

**5. Every resident has the right to live in a safe and clean environment. 2007, c. 8, s. 3 (1).**

**s. 3. (1) Every licensee of a long-term care home shall ensure that the following rights of residents are fully respected and promoted:**

**8. Every resident has the right to be afforded privacy in treatment and in caring for his or her personal needs. 2007, c. 8, s. 3 (1).**

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**Findings/Faits saillants :**



1. The licensee failed to ensure that the following rights of residents are fully respected and promoted: 5. Every resident has the right to live in a safe and clean environment as evidenced by;

Observations of a resident in bed revealed the resident had a significant change in health status. A chair had been positioned up against the bed providing the resident with a high risk exit from the bed.

An interview with the Registered staff confirmed their knowledge that that chair had been positioned up against the bed providing the resident with a high risk exit.

The Director of Care was notified and verified the homes expectation is to provide the residents the right to live in a safe environment and the chair should not have been placed up against the bed creating a high risk exit from the bed. [s. 3. (1) 5.]

2. The licensee failed to ensure that the following rights of residents are fully respected and promoted: 8. Every resident has the right to be afforded privacy in treatment and in caring for his or her personal needs as evidenced by;

Observations in the main living room revealed the Registered staff member completing foot care on a resident in front of other residents and visitors.

An interview with the Registered staff member confirmed that they usually conduct foot care in the main living room.

An interview with the Director of Care revealed the Registered staff should not be completing foot care in the main living room and the homes expectation is that every resident has the right to be afforded privacy in treatment and in caring for his or her personal needs. [s. 3. (1) 8.]

***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 rights of a resident are fully respected and promoted, to be implemented voluntarily.***



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**Issued on this 25th day of September, 2014**

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