



**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**

**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

Report Date(s) / Date(s) du rapport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Oct 11, 2016	2016_262523_0035	017017-16, 017018-16, 023788-16, 023824-16, 023844-16	Follow up

Licensee/Titulaire de permis

Schlegel Villages Inc
325 Max Becker Drive Suite 201 KITCHENER ON N2E 4H5

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

ALI NASSER (523)

Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct a Follow up inspection.

This inspection was conducted on the following date(s): September 29 & 30,
October 3 & 4, 2016

Follow Up to CO # 003, Inspection # 2016_262523_0016, Log # 007195-16 related to
Registered Nursing coverage.

Follow Up to CO # 006, Inspection # 2016_262523_0016, Log # 007195-16 related to
policies and procedures of the home not complied with.

Follow Up to CO # 010, Inspection # 2016_262523_0016, Log # 007195-16 related to



assessment for residents exhibiting responsive behaviours.

Follow Up to CO # 013, Inspection # 2016_262523_0016, Log # 007195-16 related to Infection Prevention and Control Program.

Follow Up to CO # 005, Inspection # 2016_262523_0016, Log # 007195-16 related to not reporting immediately to the director any allegations of abuse.

Follow Up to CO # 001, Inspection # 2016_262523_0026, Log # 017014-16 related to care was not provided as it was set out in the plan of care.

Follow Up to CO # 002, Inspection # 2016_262523_0026, Log # 017014-16 related to plan of care not reviewed.

Follow Up to CO # 003, Inspection # 2016_262523_0026, Log # 017014-16 related to completing a review of the prevention of abuse policy and completing education to all staff.

Follow Up to CO # 004, Inspection # 2016_262523_0026, Log # 017014-16 related to bathing a resident at a minimum of twice a week.

Follow Up to CO # 002, Inspection # 2016_457630_0029, Log#017016-16 & 014960-16 related to documenting a response for medications given.

Follow Up to CO # 002, Inspection # 2016_457630_0029, Log#017016-16 & 014960-16 related to keeping a documented record for complaints.

During the course of the inspection, the inspector(s) spoke with three General Managers, Nurse Consultant, Neighborhood Coordinator, Education Coordinator, Director of Care, five Registered Staff, four Personal Support Workers and a family member.

The inspector(s) also observed residents and care provided to them and resident-staff interactions, observed medication pass and resident room and infection prevention and control practices. Reviewed clinical records and relevant policies and procedures.

The following Inspection Protocols were used during this inspection:

Infection Prevention and Control

Medication

Prevention of Abuse, Neglect and Retaliation

Responsive Behaviours

Sufficient Staffing



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)

The following previously issued Order(s) were found to be in compliance at the time of this inspection:

Les Ordre(s) suivants émis antérieurement ont été trouvés en conformité lors de cette inspection:

REQUIREMENT/ EXIGENCE	TYPE OF ACTION/ GENRE DE MESURE	INSPECTION # / DE L'INSPECTION	NO	INSPECTOR ID #/ NO DE L'INSPECTEUR
O.Reg 79/10 s. 101. (2)	CO #003	2016_457630_0029		523
O.Reg 79/10 s. 134.	CO #002	2016_457630_0029		523
LTCHA, 2007 S.O. 2007, c.8 s. 19.	CO #003	2016_262523_0026		523
O.Reg 79/10 s. 229. (2)	CO #013	2016_262523_0016		523



LTCHA, 2007 S.O. 2007, c.8 s. 24. (1)	CO #005	2016_262523_0016	523
O.Reg 79/10 s. 33. (1)	CO #004	2016_262523_0026	523
O.Reg 79/10 s. 54.	CO #010	2016_262523_0016	523
LTCHA, 2007 S.O. 2007, c.8 s. 6. (10)	CO #002	2016_262523_0026	523
LTCHA, 2007 S.O. 2007, c.8 s. 6. (7)	CO #001	2016_262523_0026	523
O.Reg 79/10 s. 8. (1)	CO #006	2016_262523_0016	523
LTCHA, 2007 S.O. 2007, c.8 s. 8. (3)	CO #003	2016_262523_0016	523



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).	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.

Issued on this 11th day of October, 2016

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

Original report signed by the inspector.