



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 prévue  
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

London Service Area Office  
130 Dufferin Avenue 4th floor  
LONDON ON N6A 5R2  
Telephone: (519) 873-1200  
Facsimile: (519) 873-1300

Bureau régional de services de  
London  
130 avenue Dufferin 4ème étage  
LONDON ON N6A 5R2  
Téléphone: (519) 873-1200  
Télécopieur: (519) 873-1300

## Public Copy/Copie du public

Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / No de registre	Type of Inspection / Genre d'inspection
Jan 14, 2019	2019_263524_0001	006374-18, 022873-18, 023190-18, 023231-18, 023868-18, 024881-18, 025018-18, 027405-18, 027779-18, 027782-18, 027783-18, 028469-18, 030305-18, 030314-18, 031844-18, 032331-18, 032446-18	Critical Incident System

### 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

INA REYNOLDS (524), AMBERLY KERR (435), AYESHA SARATHY (741),  
CASSANDRA ALEKSIC (689), MARIAN MACDONALD (137)

## Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct a Critical Incident System



inspection.

**This inspection was conducted on the following date(s): January 7, 8, 9, 10 and 11, 2019.**

**The following Follow-up intakes were completed within this inspection:**

**Log #027779-18 compliance order #001 related to duty to protect**

**Log #027782-18 compliance order #002 related to prevention of abuse and neglect policy**

**Log #027783-18 compliance order #003 related to medication administration.**

**The following Critical Incidents were completed within this inspection:**

**Log #006374-18 / CIS #2979-000013-18 related to infection prevention and control**

**Log #022873-18 / CIS #2979-000058-18 related to falls prevention and management**

**Log #023190-18 / CIS #2979-000061-18 related to responsive behaviours**

**Log #023231-18 / CIS #2979-000059-18 related to responsive behaviours**

**Log #023868-18 / CIS #2979-000064-18 related to responsive behaviours**

**Log #024881-18 / CIS #2979-000066-18 related to responsive behaviours**

**Log #025018-18 / CIS #2979-000070-18 related to responsive behaviours**

**Log #027405-18 / CIS #2979-000075-18 related to responsive behaviours**

**Log #028469-18 / CIS #2979-000080-18 related to allegations of staff to resident abuse**

**Log #030305-18 / CIS #2979-000093-18 related to allegations of staff to resident neglect**

**Log #030314-18 / CIS #2979-000094-18 related to responsive behaviours**

**Log #031844-18 / CIS #2979-000100-18 related to falls prevention and management**

**Log #032331-18 / CIS #2979-000106-18 related to falls prevention and management**

**Log #032446-18 / CIS #2979-000107-18 related to responsive behaviours.**

**During the course of the inspection, the inspector(s) spoke with the General Manager, the Director of Care, two Assistant Directors of Care, the Personal Expression Resource Team Lead, the Exercise Therapist, two Neighbourhood Coordinators, four Registered Practical Nurses, five Personal Support Workers and residents.**

**The inspector(s) also observed resident care provisions, resident and staff interactions, reviewed residents' clinical records and plans of care, the home's internal investigation notes and relevant policies and procedures of the home.**



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**Inspector Cheryl McFadden #745 was also present during this inspection.**

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

**Falls Prevention**

**Infection Prevention and Control**

**Medication**

**Prevention of Abuse, Neglect and Retaliation**

**Responsive Behaviours**

**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)**

**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. 131. (2)	CO #003	2018_606563_0013		137
LTCHA, 2007 S.O. 2007, c.8 s. 19. (1)	CO #001	2018_606563_0013		137
LTCHA, 2007 S.O. 2007, c.8 s. 20. (1)	CO #002	2018_606563_0013		137



**NON-COMPLIANCE / NON - RESPECT DES EXIGENCES**

Legend	Légende
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 14th day of January, 2019

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



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**Original report signed by the inspector.**