

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

Public Report

Report Issue Date: March 13, 2026

Inspection Number: 2026-1504-0001

Inspection Type:
Critical Incident

Licensee: Ritz Lutheran Villa

Long Term Care Home and City: West Perth Village, Mitchell

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): March 10, 11, 12 & 13, 2026, and offsite on March 11 & 13, 2026.

The following intake(s) were inspected:

-Intake #00170855 / CI #3007-000006-26, Intake #00171026 / CI #3007-000007-26, Intake #00171369 / CI #3007-000008-26 and Intake #00172717 / CI #3007-000015-26 related to falls prevention and management

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

Falls Prevention and Management

INSPECTION RESULTS

WRITTEN NOTIFICATION: Transferring and positioning techniques

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

Non-compliance with: O. Reg. 246/22, s. 40

Transferring and positioning techniques

s. 40. Every licensee of a long-term care home shall ensure that staff use safe transferring and positioning devices or techniques when assisting residents.

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A staff member did not use a safe transferring techniques when assisting a resident from the floor.

Sources: Resident clinical records, home's Zero Lift Policy & Protocols, and interviews with staff.

WRITTEN NOTIFICATION: Required programs

NC #002 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 53 (1) 1.

Required programs

s. 53 (1) Every licensee of a long-term care home shall ensure that the following interdisciplinary programs are developed and implemented in the home:

1. A falls prevention and management program to reduce the incidence of falls and the risk of injury.

The home's Falls Prevention Management policy outlined that staff were to apply fall prevention measures as identified in the resident's plan of care.

A resident's care plan indicated fall interventions which had not been implemented at the time of their fall.

Sources: Resident clinical records, the home's Fall Prevention Management policy and interviews with staff

WRITTEN NOTIFICATION: Skin and wound care

NC #003 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

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

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,

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(i) receives a skin assessment by an authorized person described in subsection (2.1), using a clinically appropriate assessment instrument that is specifically designed for skin and wound assessment,

A skin assessment was not completed for a resident who exhibited an altered area of skin integrity.

The resident's clinical records indicated that the resident was not assessed as clinically indicated.

Sources: Resident clinical records, the home's Skin and Wound Management Protocols policy and an interview with staff