



**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) / 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>
Feb 12, 2013	2013_200148_0007	O-000032, O -000067-13	Complaint

**Licensee/Titulaire de permis**

GENESIS GARDENS INC  
438 PRESLAND ROAD, OTTAWA, ON, K1K-2B5

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

FOYER ST-VIATEUR NURSING HOME  
1003 Limoges Road South, Limoges, ON, K0A-2M0

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

AMANDA NIXON (148)

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



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

**This inspection was conducted on the following date(s): February 5 and 6th,  
2013**

**During the course of the inspection, the inspector(s) spoke with the  
Administrator, Director of Care, Registered Nurse, Registered Practical Nurse,  
Food Service Workers, Personal Support Workers and residents.**

**During the course of the inspection, the inspector(s) reviewed resident health  
care records, the home's current Fall/Winter 2012/2013 planned menu and  
related production sheets. The inspector also observed resident care, two meal  
services and room temperature in resident areas and resident rooms.**

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

**Personal Support Services**

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

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

<b>Legend</b>	<b>Legendé</b>
WN – Written Notification	WN – Avis écrit
VPC – Voluntary Plan of Correction	VPC – Plan de redressement volontaire
DR – Director Referral	DR – Aiguillage au directeur
CO – Compliance Order	CO – Ordre de conformité
WAO – Work and Activity Order	WAO – Ordres : travaux et activités



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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.

**WN #1: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 85. Satisfaction survey**

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

**s. 85. (1) Every licensee of a long-term care home shall ensure that, at least once in every year, a survey is taken of the residents and their families to measure their satisfaction with the home and the care, services, programs and goods provided at the home. 2007, c. 8, s. 85. (1).**

**Findings/Faits saillants :**

1. The licensee has failed to comply with LTCHA 2007 S.O. 2007, c.8, s.85(1), in that no survey has been taken of the residents and family to measure satisfaction with care, services, programs and goods provided by the home, at least once every year.

An interview with the home's Administrator stated that a satisfaction survey has not been completed since 2011 (no specific date could be provided).

During a Resident Quality Inspection conducted in June 2012, the LTCH Inspectors identified non-compliance with LTCHA c.8, s.85(1), a written notification was issued. At that time the home's Administrator stated that there had not been a survey in 2011 or 2012. [s. 85. (1)]



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***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 a satisfaction survey is completed at least once every year,, to be implemented voluntarily.***

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Issued on this 12th day of February, 2013

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

*Amenda Nij RD LTCH Inspector*