



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

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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
Jun 19, 2019	2019_722630_0014	006020-19, 008162-19, 009066-19, 009104-19, 009293-19, 009296-19, 009323-19, 009454-19, 009483-19, 010152-19	Complaint

Licensee/Titulaire de permis

Copper Terrace Limited
284 Central Avenue LONDON ON N6B 2C8

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

Copper Terrace
91 Tecumseh Road CHATHAM ON N7M 1B3

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

AMIE GIBBS-WARD (630), CASSANDRA ALEKSIC (689), HELENE DESABRAIS (615), MELANIE NORTHEY (563)

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): May 13, 14, 15, 16, 17, 21, 22, 23, 24, 27, 28, 29 and 30, 2019.



The following Complaint intakes were completed within this inspection and were completed concurrently with Follow-Up Inspection #2019_722630_0012:

Log #008162-19 / IL-66005-LO related to Registered Nurse (RN) staffing, staffing shortages, improper resident care and medication administration;
Log #009104-19 / IL-66445-LO related to staffing shortages;
Log #009454-19 / IL-66594-LO related to staffing shortages and medication administration;
Log #009066-19 / IL-66430-AH related to RN staffing;
Log #009323-19 related to RN staffing;
Log #009293-19 / IL-66542-LO related to sufficient staffing and medication administration;
Log #009483-19 / IL-66626-LO related to RN staffing, staffing shortages and medication administration;
Log #009296-19 / IL-66556-LO related to RN staffing, staffing shortages and medication administration;
Log #010152-19 / IL-66936-LO related to staffing shortages and medication administration;
Log #006020-19 / IL-65125-LO related to allegations of improper resident care and staffing shortages.

Documentation of non-compliance related to Log #008162-19, Log #009104-19, Log #009454-19, Log #009066-19, Log #009323-19, Log #009293-19, Log #009483-19, Log #009296-19 and Log #010152-19 have been included in Follow-up Inspection Report #2019_722630_0012.

During the course of the inspection, the inspector(s) spoke with the Interim Executive Director (ED), the APANS ED Special Projects, the APANS Vice President of Best Practice and Innovation, the Director of Clinical Services (DOCS), the Associate DOCS, the Resident Assessment Instrument (RAI) Coordinator, the Behavioural Supports Ontario (BSO) Registered Practical Nurse (RPN), the BSO Personal Support Workers (PSW), Registered Nurses (RNs), RPNs, a RPN student, family members and residents.

The inspectors also observed resident rooms and common areas, observed medication storage areas, observed medication administration, observed meal and snack service, observed residents and the care provided to them, reviewed health care records and plans of care for identified residents, reviewed policies and



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procedures of the home, reviewed the written staffing plan of the home, reviewed various meeting minutes, reviewed written records of program evaluations and also reviewed the APANS Compliance Action Plan.

Inspection Managers (IMs) Neil Kikuta and Kevin Bachert were also on-site during this inspection.

The following Inspection Protocols were used during this inspection:

Medication

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)



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 19th day of June, 2019

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



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Original report signed by the inspector.