

**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

**Original Public Report**

<b>Report Issue Date:</b> March 4, 2024	
<b>Inspection Number:</b> 2024-1091-0001	
<b>Inspection Type:</b> Complaint Critical Incident	
<b>Licensee:</b> CVH (No. 5) LP by its general partner, Southbridge Care Homes (a limited partnership, by its general partner, Southbridge Health Care GP Inc.)	
<b>Long Term Care Home and City:</b> Country Village Homes - Woodslee, South Woodslee	
<b>Lead Inspector</b> Julie D'Alessandro (739)	<b>Inspector Digital Signature</b>
<b>Additional Inspector(s)</b> Debra Churcher (670)  Renee Renaud (000817)-training Dante De Benedictis (000818)-training Morgan Holwell (000823)-training	

**INSPECTION SUMMARY**

The inspection occurred onsite on the following date(s): February 27, 28, 29, 2024.

The following intake(s) were inspected:  
Intake: #00100900 and #00107058 - Complaint related to medication management and care and support services.  
Intake: #00107705/CI #2576-000002-24 related to fall prevention and management  
Intake: #00109525/CI #2576-000006-24 related to medication management

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

Housekeeping, Laundry and Maintenance Services  
Medication Management  
Infection Prevention and Control  
Residents' Rights and Choices  
Falls Prevention and Management

## INSPECTION RESULTS

### Non-Compliance Remedied

**Non-compliance** was found during this inspection and was **remedied** by the licensee prior to the conclusion of the inspection. The inspector was satisfied that the non-compliance met the intent of section 154 (2) and requires no further action.

NC #001 remedied pursuant to FLTCA, 2021, s. 154 (2)

#### **Non-compliance with: FLTCA, 2021, s. 6 (10) (b)**

Plan of care

s. 6 (10) The licensee shall ensure that the resident is reassessed and the plan of care reviewed and revised at least every six months and at any other time when,  
(b) the resident's care needs change or care set out in the plan is no longer necessary

#### **Introduction:**

The licensee failed to ensure that a resident was reassessed and the plan of care was revised when the resident's care needs changed.

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**Rationale and Summary:**

Review of the resident plan of care stated that they ate meals in the dining room. The resident was observed eating in a different location.

Staff stated that the resident prefers to eat in the different location.

During a subsequent review of the resident's plan of care, it stated that the resident ate their meals in the different location.

**Sources:** Resident observation, plan of care, and staff interviews.

[670]

Date Remedy Implemented: February 28, 2024