

**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:** April 2, 2025

**Inspection Number:** 2025-1091-0002

**Inspection Type:**

Proactive Compliance Inspection

**Licensee:** CVH (No. 5) LP by its general partner, Southbridge Care Homes (a limited partnership, by its general partner, Southbridge Health Care GP Inc.)

**Long Term Care Home and City:** Country Village Homes - Woodslee, South Woodslee

## INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): March 24- 28, 31, 2025 and April 1-2, 2025

The following intake(s) were inspected:

- Intake: #00142841 - Proactive Compliance Inspection - 2025

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

Resident Care and Support Services  
Skin and Wound Prevention and Management  
Medication Management  
Food, Nutrition and Hydration  
Residents' and Family Councils  
Infection Prevention and Control  
Safe and Secure Home  
Prevention of Abuse and Neglect  
Quality Improvement

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Staffing, Training and Care Standards  
Residents' Rights and Choices  
Pain 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: O. Reg. 246/22, s. 19**

Windows

s. 19. Every licensee of a long-term care home shall ensure that every window in the home that opens to the outdoors and is accessible to residents has a screen and cannot be opened more than 15 centimetres.

On a certain date the licensee failed to ensure that windows in the activity area, dining room, and in a resident's room that opened to the outdoors and were accessible to residents had screens. A management team member was immediately notified and screens were replaced in said windows the same day.

**Source:** Observations

Date Remedy Implemented: Occurred on a specific date.

### WRITTEN NOTIFICATION: Nursing and Personal Support Services

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

**Non-compliance with: O. Reg. 246/22, s. 35 (4)**

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Nursing and personal support services

s. 35 (4) The licensee shall keep a written record relating to each evaluation under clause (3) (e) that includes the date of the evaluation, the names of the persons who participated in the evaluation, a summary of the changes made and the date that those changes were implemented.

The licensee has failed to ensure that a written record of the home's 2024 staffing plan evaluation included a summary of changes made and the date those changes were implemented.

**Sources:** Interview with a management team member and review of the home's staffing plan evaluation.

## WRITTEN NOTIFICATION: Pain Monitoring

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

**Non-compliance with: O. Reg. 246/22, s. 57 (1) 4.**

Pain management

s. 57 (1) The pain management program must, at a minimum, provide for the following:

4. Monitoring of residents' responses to, and the effectiveness of, the pain management strategies.

The licensee failed to comply with their pain management program when a resident pain monitoring was not completed.

In accordance with O. Reg. 246/22 s. 11(1)(b), the licensee is required to ensure written policies for the pain management program were complied with.

Specifically, the home's pain management program stated that a pain assessment was to be conducted once

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per shift. The resident's clinical record did not include any evidence nor support that pain assessments were completed during a specific time period and on specific dates.

**Sources:** Progress notes for the resident, clinical documentation for the resident, the home's policy on pain management, interview with a staff member.