

**Inspection Report under  
the Long-Term Care  
Homes Act, 2007**

**Rapport d'inspection en vertu de  
la Loi de 2007 sur les foyers de  
soins de longue durée**

**Long-Term Care Operations Division  
Long-Term Care Inspections Branch**

**Division des opérations relatives aux  
soins de longue durée  
Inspection de soins de longue durée**

Ottawa Service Area Office  
347 Preston St Suite 420  
OTTAWA ON K1S 3J4  
Telephone: (613) 569-5602  
Facsimile: (613) 569-9670

Bureau régional de services d'Ottawa  
347 rue Preston bureau 420  
OTTAWA ON K1S 3J4  
Téléphone: (613) 569-5602  
Télécopieur: (613) 569-9670

**Public Copy/Copie du rapport public**

---

<b>Report Date(s) / Date(s) du Rapport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / No de registre</b>	<b>Type of Inspection / Genre d'inspection</b>
Mar 30, 2022	2022_831211_0004	017166-21, 017167-21	Follow up

---

**Licensee/Titulaire de permis**

United Counties of Prescott and Russell  
59 Court Street Box 304 L'original ON K0B 1K0

---

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

Residence Prescott et Russell  
1020 Cartier Boulevard Hawkesbury ON K6A 1W7

---

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

JOELLE TAILLEFER (211)

---

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

---

**The purpose of this inspection was to conduct a Follow up inspection.**

**This inspection was conducted on the following date(s): March 14, 15, 16, 17, 18, 21, 2022 (onsite) and March 23, 2022 (offsite).**

**The follow-up inspection log # 017166-21 issued on October 21, 2021, with a compliance due date of December 27, 2021, was inspected related to:**  
**-CO #001 O. Reg. 79/10, s. 9. (1) 1. 2. regarding all doors are closed and locked in the basement, which is considered a non-residential area, and**  
**-CO #002 O. Reg. 79/10, s. 17. (1) (e) regarding the phone located outside from, but next to the elevators in the basement was equipped with a resident-staff communication and response system that is always available.**

**During the course of the inspection, the inspector(s) spoke with with the Administrator, the Director of Care (DOC), Environmental Services Manager, and a Registered Nursing Staff (RPN).**

**In addition, the inspector reviewed the bi-weekly audits for all doors leading to non-residential areas in the basement are kept closed and locked when they are not supervised, and that all staff members received reeducation on the importance to keep doors closed and locked when these areas are not immediately supervised to restrict resident access in the basement which is considered a nonresidential. Furthermore, in collaboration with the Environmental Services Manager, the inspector observed that all doors in the basement were locked and closed, and the phone located outside from, but next to the elevators in the basement was equipped with a resident-staff communication and response system that is always available.**

**The following Inspection Protocols were used during this inspection:  
Safe and Secure Home**

**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)**

**The following previously issued Order(s) were found to be in compliance at the time of this inspection:**

**Les Ordre(s) suivants émis antérieurement ont été trouvés en conformité lors de cette inspection:**

<b>REQUIREMENT/ EXIGENCE</b>	<b>TYPE OF ACTION/ GENRE DE MESURE</b>	<b>INSPECTION # / DE L'INSPECTION</b>	<b>NO</b>	<b>INSPECTOR ID #/ NO DE L'INSPECTEUR</b>
O.Reg 79/10 s. 17. (1)	CO #002	2021_831211_0014		211
O.Reg 79/10 s. 9. (1)	CO #001	2021_831211_0014		211

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

<p>Legend</p> <p>WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order</p>	<p>Légende</p> <p>WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités</p>
<p>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).</p> <p>The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.</p>	<p>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.</p> <p>Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.</p>

**Issued on this 1st day of April, 2022**

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

**Original report signed by the inspector.**