



**Ministry of Health and  
Long-Term Care**

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

**Ministère de la Santé et des  
Soins de longue durée**

**Rapport d'inspection 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**

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<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>
Jun 22, 2017	2017_597655_0009	007629-17	Critical Incident System

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### **Licensee/Titulaire de permis**

The Corporations of the United Counties of Leeds and Grenville, the City of Brockville,  
the Town of Gananoque and the Town of Prescott  
c/o St. Lawrence Lodge 1803 County Road 2 BROCKVILLE ON K6V 5T1

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

ST. LAWRENCE LODGE  
1803 County Road, #2 East Postal Bag #1130 BROCKVILLE ON K6V 5T1

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

MICHELLE JONES (655)

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



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**The purpose of this inspection was to conduct a Critical Incident System inspection.**

**This inspection was conducted on the following date(s): May 24, 25, 26, 30, 2017, and June 5, 6, 7, 2017.**

**Log #007629-17, related to a fall resulting in a significant change to the residents health status, was inspected.**

**NOTE: A Written Notification related to non-compliance under O.Reg. 79/10 s. 8, identified as a result of this inspection (Log # 007629-17), will be issued under Complaint Inspection # 2017\_597655\_0011 (Log #s 009900-17, 010078-17, 011312-17), concurrently inspected during this inspection.**

**During the course of the inspection, the inspector(s) spoke with Personal Support Workers (PSWs), Registered Practical Nurses (RPNs) and Registered Nurses (RNs), the Resident Assessment Instrument (RAI) Coordinator, an Assistant Director of Care (ADOC), and the Director of Care (DOC). The inspector also reviewed resident health care records and policies.**

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

**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	Legendé
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 23rd day of June, 2017

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

**Original report signed by the inspector.**