

**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**

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**Public Copy/Copie du rapport public**

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<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>
Dec 2, 2021	2021_505103_0015	014638-21, 018052- 21, 018087-21	Complaint

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**Licensee/Titulaire de permis**

Arch Long Term Care LP by its General Partner, Arch Long Term Care MGP, by its partners, Arch Long Term Care GP Inc. and Arch Capital Management Corporation  
161 Bay Street Suite 2100 Toronto ON M5J 2S1

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

Perth Community Care Centre  
101 Christie Lake Road, R. R. #4 Perth ON K7H 3C6

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

DARLENE MURPHY (103), MANON NIGHBOR (755)

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

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**The purpose of this inspection was to conduct a Complaint inspection.**

**This inspection was conducted on the following date(s): November 15-19, 22-25, 2021.**

**Log #014638-21-complaint related to staffing,  
Log #018052-21-complaint related to resident care, and  
Log #018087-21-complaint related to staffing and medication administration.**

**Note: A Written Notification and Voluntary Plan of Correction related to O. Reg 79/10, s. 131 (2) was identified in this inspection and has been issued in a concurrent inspection, #2021\_505103\_0014 dated December 2, 2021.**

**During the course of the inspection, the inspector(s) spoke with residents, Personal Support Workers, Registered Practical Nurses, Registered Nurses, and the Director of Care.**

**During the course of the inspection, the inspectors reviewed staffing contingency plans, resident health care records including plans of care and medication administration records and made observations related to the provision of resident care.**

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

**Falls Prevention**

**Medication**

**Prevention of Abuse, Neglect and Retaliation**

**Skin and Wound Care**

**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**

WN – Written Notification  
VPC – Voluntary Plan of Correction  
DR – Director Referral  
CO – Compliance Order  
WAO – Work and Activity Order

**Légende**

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).

The following constitutes written notification of non-compliance under paragraph 1 of section 152 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.

Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.

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**Issued on this 2nd day of December, 2021****Signature of Inspector(s)/Signature de l'inspecteur ou des inspecteurs**

**Original report signed by the inspector.**