

**Ministry of Long-Term Care**

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

**Hamilton District**

119 King Street West, 11th Floor  
Hamilton, ON, L8P 4Y7  
Telephone: (800) 461-7137

**Public Report**

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| <b>Report Issue Date:</b> April 17, 2025                                      |
| <b>Inspection Number:</b> 2025-1444-0003                                      |
| <b>Inspection Type:</b><br>Complaint  |
| <b>Licensee:</b> Parkview Meadows Christian Retirement Village                |
| <b>Long Term Care Home and City:</b> Gardenview Long Term Care Home, Townsend |

**INSPECTION SUMMARY**

The inspection occurred onsite on the following date(s): April 8-11, 15, 17, 2025

The following intake was inspected:

- Intake: #00138025 related to a complaint regarding Skin and Wound Prevention and Management.

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

Skin and Wound Prevention and Management

**INSPECTION RESULTS**

**WRITTEN NOTIFICATION: Required programs - Skin and Wound Program**

NC #001 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

**Non-compliance with: O. Reg. 246/22, s. 53 (1) 2.**

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Required programs

s. 53 (1) Every licensee of a long-term care home shall ensure that the following interdisciplinary programs are developed and implemented in the home:

2. A skin and wound care program to promote skin integrity, prevent the development of wounds and pressure injuries, and provide effective skin and wound care interventions.

The licensee has failed to comply with the home's skin and wound program when staff did not complete a resident's skin impairment initial assessment identified on an identified date, using Point Click Care (PCC) skin and wound application.

In accordance with O. Reg 246/22, s. 11 (1) (b), the licensee was required to ensure that written policies developed for the skin and wound program were complied with.

Specifically, the home's skin and wound policy indicated that once skin impairment was reported and identified, the nurse will complete the initial assessment by using PCC Skin and Wound care app, which did not occur for the resident.

**Sources:** Home's Skin and Wound Policy (Last reviewed September 2024), Interview with staff.

## **WRITTEN NOTIFICATION: Required programs - Pain Management Program**

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

**Non-compliance with: O. Reg. 246/22, s. 53 (1) 4.**

Required programs

s. 53 (1) Every licensee of a long-term care home shall ensure that the following interdisciplinary programs are developed and implemented in the home:

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4. A pain management program to identify pain in residents and manage pain. O. Reg. 246/22, s. 53 (1); O. Reg. 66/23, s. 10.

The licensee has failed to comply with the home's pain management policy when staff did not complete a pain assessment for a resident when a new skin impairment and pain were identified on an identified date.

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

Specifically, the home's pain management policy stipulated that residents' pain be assessed for any new pain complaints, which did not occur for the resident.

**Sources:** Home's Pain Management Policy (Last reviewed September 2024), interview with staff.

## **WRITTEN NOTIFICATION: Skin and wound care**

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

**Non-compliance with: O. Reg. 246/22, s. 55 (2) (b) (ii)**

Skin and wound care

s. 55 (2) Every licensee of a long-term care home shall ensure that,

(b) a resident exhibiting altered skin integrity, including skin breakdown, pressure injuries, skin tears or wounds,

(ii) receives immediate treatment and interventions to reduce or relieve pain, promote healing, and prevent infection, as required,

The licensee has failed to ensure that a resident, who exhibited altered skin integrity, received immediate treatment and interventions to promote healing and prevent

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infection. This occurred when staff assessed the resident on an identified date, for suspected infection, collected swabs, and only informed the physician a few days later, when the results confirmed the infection. The physician prescribed treatment two days after being notified.

**Sources:** Resident's clinical record, interview with staff.

**WRITTEN NOTIFICATION: Attending physician or RN (EC)**

NC #004 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

**Non-compliance with: O. Reg. 246/22, s. 88 (1) (b)**

Attending physician or RN (EC)

s. 88 (1) Every licensee of a long-term care home shall ensure that either a physician or a registered nurse in the extended class,

(b) attends regularly at the home to provide services, including assessments; and

The licensee has failed to ensure that either a physician or a registered nurse in the extended class attended regularly at the home to provide services, including assessments as per the home's signed agreement with attending physician, which stated that the attending physician was to visit the home at least once per week. The Director of care (DOC) confirmed that the attending physician had not been in the home as required for several months before they retired in February 2025.

**Sources:** Attending Physician Agreement (signed on June 28, 2024), interview with DOC.