



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

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

**Long-Term Care Homes Division  
Long-Term Care Inspections Branch**  
**Division des foyers de soins de  
longue durée**  
**Inspection de soins de longue durée**

Sudbury Service Area Office  
159 Cedar Street Suite 403  
SUDBURY ON P3E 6A5  
Telephone: (705) 564-3130  
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**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**

Bureau régional de services de  
Sudbury  
159 rue Cedar Bureau 403  
SUDBURY ON P3E 6A5  
Téléphone: (705) 564-3130  
Télécopieur: (705) 564-3133

**Public Copy/Copie du public**

<b>Report Date(s) / Date(s) du apport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / No de registre</b>	<b>Type of Inspection / Genre d'inspection</b>
Jul 25, 2018	2018_624196_0020	006821-18	Other

**Licensee/Titulaire de permis**

CVH (No. 9) GP Inc. as general partner of CVH (No. 9) LP  
766 Hespeler Road, Suite 301 CAMBRIDGE ON N3H 5L8

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

Southbridge Pinewood  
2625 Walsh Street East THUNDER BAY ON P7E 2E5

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

LAUREN TENHUNEN (196)

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

The purpose of this inspection was to conduct an Other inspection.

This inspection was conducted on the following date(s): July 9 - 13, 16 - 19, 2018.

This inspection was conducted to follow up on compliance order (CO) #001, issued during Inspection #2018\_652625\_0001 (A2), related to plan of care. Specifically:

The licensee shall ensure that the resident, the resident's substitute decision-maker, if any, and any other persons designated by the resident or substitute decision-maker are given an opportunity to participate fully in the development and implementation of the residents' plan of care. LTCHA, 2007, c. 8, s. 6. (5).



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**The licensee was specifically ordered to:**

- (1) Review the specific monitoring activity ordered for each resident, ensuring the orders are current and clinically appropriate with respect to the medical history of each resident, the medical diagnoses of each resident, medications each resident is ordered, and any other relevant factor(s).**
- (2) Ensure there is a system in place to review and revise residents' plans of care with respect to the specific monitoring activity at least every six months and at designated times identified in the Long-Term Care Homes Act, 2007, c. 8, s. 6 (10).**
- (3) Ensure that residents, SDMs, and any other persons designated by the residents or SDMs are notified of current orders for the specific monitoring activity including the reason for the specific monitoring activity, the frequency of the specific monitoring activity, any difficulty completing the specific monitoring activity and any changes made to the specific monitoring activity.**
- (4) Ensure that residents, SDMs, and any other persons designated by the residents or SDMs are notified of changes in the health status of residents in a timely manner.**
- (5) Ensure that residents, SDMs, and any other persons designated by the residents or SDMs are notified of the administration of PRN (pro re nata or as needed) medications when appropriate (i.e. when administration is not a usual occurrence for the resident).**

**During the course of the inspection, the inspector(s) spoke with the Director of Care (DOC), Pharmacist, Registered Nurse (RN) and Registered Practical Nurses (RPNs).**

**The Inspector observed the provision of care and services to several residents, reviewed the health care records for several residents, and reviewed registered staff training content and participants.**

**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)**



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**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

**Legendé**

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.

**Issued on this 25th day of July, 2018**

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



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**Original report signed by the inspector.**