



**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**

**Health System Accountability and
Performance Division
Performance Improvement and
Compliance Branch**

**Division de la responsabilisation et de la
performance du système de santé
Direction de l'amélioration de la
performance et de la conformité**

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Report Date(s) / Date(s) du apport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Jun 24, 2015	2015_376594_0020	015686-15	Follow up

Licensee/Titulaire de permis

WEST PARRY SOUND HEALTH CENTRE
6 ALBERT STREET PARRY SOUND ON P2A 3A4

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

LAKELAND LONG TERM CARE
6 ALBERT STREET PARRY SOUND ON P2A 3A4

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

MONIKA GRAY (594)

Inspection Summary/Résumé de l'inspection



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

This inspection was conducted on the following date(s): March 04-06, 2015

**This inspection addresses both the Lakeland Long-Term Care Home #2958 and
ELDCAP #2966.**

**This inspection was conducted concurrently with Complaint Inspection
2015_376594_0006 and Critical Incident System Inspection 2015_376594_0007.**

**For findings of non-compliance please refer to Complaint Inspection
2015_376594_0006.**

**During the course of the inspection, the inspector(s) spoke with Personal Support
Workers (PSWs), Dietary staff, Housekeeping staff, Nursing Informatics Assistant,
Quality Management
Coordinator, Executive Assistant to the Director of Nursing & Personal Care,
Behavioural Restorative Team (BRT) Clinical Lead, Registered Practical Nurses
(RPNs), Registered Nurse (RN), Social Service Manager, Assistant Director of
Nursing, Director of Nursing & Personal Care and the Administrator.**

**The inspector(s) also reviewed policies, plans of care and other documentation
within the home, conducted daily walk through of the resident care areas and
observed staff to resident interactions.**

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 24th day of June, 2015

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

Original report signed by the inspector.