



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

**Rapport d'inspection
prévue le *Loi de 2007
les foyers de soins de
longue durée***

Ministry of Health and Long-Term Care
Health System Accountability and Performance Division
Performance Improvement and Compliance Branch

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

Division de la responsabilisation et de la performance du
système de santé
Direction de l'amélioration de la performance et de la
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			<input type="checkbox"/> Licensee Copy/Copie du Titulaire <input checked="" type="checkbox"/> Public Copy/Copie Public
Date of inspection/Date de l'inspection	Inspection No/ d'inspection	Type of Inspection/Genre d'inspection	
February 23, 2011	2011-190-2972-23Feb105155	Complaint L-00172	
Licensee/Titulaire			
Revera Long Term Care Inc., 55 Standish Court, 8 th Floor, Mississauga, ON L5R 4B2			
Long-Term Care Home/Foyer de soins de longue durée			
Riverside Place, 3181 Meadowbrook Lane, Windsor, ON N8T 0A4			
Name of Inspector/Nom de l'inspecteur			
Sandra Fysh #190			
Inspection Summary/Sommaire d'inspection			
The purpose of this inspection was to conduct a complaint inspection related to care and services.			
During the course of the inspection, the inspector spoke with the Administrator, the Director of Care, Registered Nurse, Personal Support Workers and Family.			
During the course of the inspection, the inspector reviewed the clinical records of one resident, observed the room and common area of one resident.			
The following Inspection Protocols were used during this inspection:			
<ul style="list-style-type: none">• Continence Care and Bowel Management Inspection Protocol• Skin and Wound Care Inspection Protocol			
<input checked="" type="checkbox"/> Findings of Non-Compliance were found during this inspection. The following action was taken:			
1 WN			



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NON-COMPLIANCE / (Non-respectés)

Definitions/Définitions

WN – Written Notifications/Avis écrit

VPC – Voluntary Plan of Correction/Plan de redressement volontaire

DR – Director Referral/Référance envoyée

CO – Compliance Order/Ordre de conformité

WAO – Work and Activity Order/Ordre: travaux et activités

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

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 suivant constitue un avis d'écrit de l'exigence prévue le paragraphe 1 de section 152 de les foyers de soins de longue durée.

Non-respect avec les exigences sur le *Loi de 2007 les foyers de soins de longue durée* à trouvé. (Une exigence dans le loi comprend les exigences contenues dans les points énumérés dans la définition de "exigence prévue par la présente loi" au paragraphe 2(1) de la loi.

WN #1: The Licensee has failed to comply with LTCHA,2007,S.O.2007,c.8,s.6(1)(c) Every licensee of a long-term care home shall ensure that there is a written plan of care for each resident that sets out, (c) clear directions to staff and others who provide direct care to the resident.

Findings:

1. A Head to Toe Assessment completed on January 28, 2011 identifies two pressure ulcers. The plan of care does not describe the current wounds, or provide direction to staff regarding the care and treatment being provided for these wounds.
2. The progress notes document issues related to a specific treatment. The plan of care does not outline interventions to assist with providing care for this treatment.

Inspector ID #: #190

**Signature of Licensee or Representative of Licensee
Signature du Titulaire du représentant désigné**

**Signature of Health System Accountability and Performance Division
representative/Signature du (de la) représentant(e) de la Division de la responsabilisation et de la performance du système de santé.**

Title:

Date:

Date of Report: (if different from date(s) of inspection).