

Inspection Report Under the Fixing Long-Term Care Act, 2021

Ministry of Long-Term Care

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

London District

130 Dufferin Avenue, 4th Floor London, ON, N6A 5R2 Telephone: (800) 663-3775

	Original Public Report
Report Issue Date: November 22, 2023	
Inspection Number: 2023-1583-0006	
Inspection Type:	
Complaint	
Critical Incident	
Licensee: The Corporations of the City of Stratford, The County of Perth and The Town of St.	
Mary's	
Long Term Care Home and City: Spruce Lodge Home for the Aged, Stratford	
Lead Inspector	Inspector Digital Signature
Ali Nasser (523)	
Additional Inspector(s)	
Samantha Perry (740)	

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): November 9, 10, 14, 15, 2023

The following intake(s) were inspected:

- Intake: #00092870, complaint related to resident care concerns.
- Intake: #00099084, complaint related to resident care concerns.
- Intake: #00099844, complaint related to staffing levels.
- Intake: #00100590, CIS #M575-000023-23, related to resident to resident physical abuse.

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

Resident Care and Support Services
Housekeeping, Laundry and Maintenance Services
Infection Prevention and Control
Responsive Behaviours
Prevention of Abuse and Neglect
Staffing, Training and Care Standards
Falls Prevention and Management



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INSPECTION RESULTS

Non-Compliance Remedied

Non-compliance was found during this inspection and was **remedied** by the licensee prior to the conclusion of the inspection. The inspector was satisfied that the non-compliance met the intent of section 154 (2) and requires no further action.

NC #001 remedied pursuant to FLTCA, 2021, s. 154 (2)

FLTCA, 2021, s. 6 (2)

The licensee has failed to ensure that the care set out in the plan of care for a resident was based on the needs of the resident.

During interviews two staff members said the resident had a fall prevention intervention that was in place. They said the resident needed that intervention. They reviewed the resident's clinical record with inspector and said the plan of care did not have any direction to use that intervention.

The Registered Nurse updated the plan of care so it was based on the needs of the resident. [523]

Date Remedy Implemented: November 14, 2023.