

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

Public Report

Report Issue Date: May 8, 2026

Inspection Number: 2026-1619-0002

Inspection Type:

Complaint
Critical Incident

Licensee: The Corporation of Norfolk County

Long Term Care Home and City: Norview Lodge, Simcoe

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): May 5, 6, 7, 8, 2026.

The following intake(s) were inspected:

Intake: #00172391- complaint related to bed refusal for a Long-Term Care Home applicant.

Intake: #00176371- compliant related to resident care and support services and medication management.

Intake: #00175560/CI #M624-000010-26- related to continence care and resident's rights and choices.

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

- Contenance Care
- Resident Care and Support Services
- Medication Management
- Residents' Rights and Choices
- Reporting and Complaints
- Admission, Absences and Discharge

INSPECTION RESULTS

WRITTEN NOTIFICATION: Authorization for admission to a home

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

Non-compliance with: FLTCA, 2021, s. 51 (7) (b)

Authorization for admission to a home

s. 51 (7) The appropriate placement co-ordinator shall give the licensee of each selected home copies of the assessments and information that were required to have been taken into account, under subsection 50 (6), and the licensee shall review the assessments and information and shall approve the applicant's admission to the home unless,

(b) the staff of the home lack the nursing expertise necessary to meet the applicant's care requirements.

A written notice to an applicant stated that staff of the Long-Term Care home lacked the nursing expertise to meet the applicant's care requirements as it related to their responsive behaviours.

The home's staff indicated that they did have internal and external resources to support residents with responsive behaviours. They also confirmed that staff at the home had received training in supporting residents with responsive behaviours.

The applicant's assessment documented that their responsive behaviours have been resolved or that there were interventions in place to support and manage the applicants behaviours.

Sources: The applicant's placement documents and interviews with external staff as well as management within the Long-Term Care home.

WRITTEN NOTIFICATION: Dealing with complaints

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

Non-compliance with: O. Reg. 246/22, s. 108 (1) 1.

Dealing with complaints

s. 108 (1) Every licensee shall ensure that every written or verbal complaint made to the licensee or a staff member concerning the care of a resident or operation of the home is dealt with as follows:

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1. The complaint shall be investigated and resolved where possible, and a response that complies with paragraph 3 provided within 10 business days of the receipt of the complaint, and where the complaint alleges harm or risk of harm including, but not limited to, physical harm, to one or more residents, the investigation shall be commenced immediately.

An allegation was brought forward that a resident had sustained an injury at the Long-Term Care Home. The incident related to this allegation was documented in the resident's clinical chart and a staff member stated that they would have reported it to their supervisor.

The Manager of Nursing and Support Services acknowledged that an investigation of the incident should have commenced immediately and did not.

Source: Resident's clinical records and staff interviews.



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

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