

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: October 17, 2025

Inspection Number: 2025-1619-0006

Inspection Type:

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): October 14, 15, 17, 2025

The inspection occurred offsite on the following date(s): October 16, 2025

The following intake(s) were inspected:

- Intake #00157454 / CI #M624-000029-25 related to falls prevention and management
- Intake #00157566 / CI #M624-000030-25 related to resident care

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

Skin and Wound Prevention and Management
Falls Prevention and Management

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INSPECTION RESULTS

WRITTEN NOTIFICATION: Transferring and positioning techniques

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

Non-compliance with: O. Reg. 246/22, s. 40

Transferring and positioning techniques

s. 40. Every licensee of a long-term care home shall ensure that staff use safe transferring and positioning devices or techniques when assisting residents.

The licensee has failed to ensure that a staff member used safe transferring and positioning techniques when assisting a resident.

The resident's clinical records indicated that a staff member did not transfer the resident as per their plan of care.

Sources: Resident clinical records; Critical Incident System (CIS) report; and interviews with staff.

WRITTEN NOTIFICATION: Skin and wound care

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

Non-compliance with: O. Reg. 246/22, s. 55 (2) (b) (iv)

Skin and wound care

s. 55 (2) Every licensee of a long-term care home shall ensure that,
(b) a resident exhibiting altered skin integrity, including skin breakdown, pressure injuries, skin tears or wounds,

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(iv) is reassessed at least weekly by an authorized person described in subsection (2.1), if clinically indicated;

The licensee has failed to ensure that a resident was reassessed at least weekly when they exhibited altered skin integrity.

A resident's clinical records indicated that a weekly skin and wound assessment was not completed as scheduled, and an additional assessment initiated for the area was not fully completed as per the expectations of the home.

Sources: Resident clinical records; and interviews with staff of the home.