

**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 conformité

**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***

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	<input type="checkbox"/> Licensee Copy/Copie du Titulaire <input checked="" type="checkbox"/> Public Copy/Copie Public
Date(s) of inspection/Date de l'inspection October 5-7, 2010	Inspection No/ d'inspection 2010_154_2590_0Oct093803
Licensee/Titulaire Extendicare Northwestern Ontario Inc. [a subsidiary of Extendicare (Canada) Inc.] 3000 Steeles Ave, Suite 700, Markham, ON L3R 9W2 Fax: 905-470-5588	
Long-Term Care Home/Foyer de soins de longue durée Extendicare Falconbridge, 281 Falconbridge, Sudbury, ON P3A 5K4 Fax: 705-566-2997	
Name of Inspector(s)/Nom de l'inspecteur(s) Gail Peplinskie #154, Anne Costeloe #177	
Inspection Summary/Sommaire d'inspection	



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The purpose of this inspection was to conduct a Mandatory Report inspection.

During the course of the inspection, the inspectors spoke with: the Administrator, the Acting Director of Care, some registered nurses and Personal Support Workers (PSW)

During the course of the inspection, the inspectors:

- reviewed a resident health care record
- reviewed home's orientation and education schedule
- walked through a resident care unit in the afternoon

The following Inspection Protocol was used during this inspection:

- Responsive Behaviours

Findings of Non-Compliance were found during this inspection. The following action was taken:

1 WN

NON- COMPLIANCE / (Non-respectés)



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Definitions/Définitions

WN – Written Notifications/Avis écrit

VPC – Voluntary Plan of Correction/Plan de redressement volontaire

DR – Director Referral/Référencement envoyé

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 constituer 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 the LTCHA, 2007, S.O. 2007, c.8, s. 6(1) 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. The plan of care for a resident does not include clear directions to staff and others who provide direct care related to socially inappropriate behaviour.
2. The plan of care for a resident does not include clear directions to staff and others who provide direct care related to managing aggressive behaviour.
3. The plan of care for a resident does not include clear directions to staff and others who provide direct care related to the number of staff required to provide personal care.
4. The plan of care for a resident does not include clear directions to staff and others who provide direct care related to risk of falls.
5. The plan of care for a resident does not include clear directions to staff and others who provide direct care related to retaliatory actions taken by other residents in response to the resident's wandering and aggressive behaviours.
6. The plan of care does not include clear directions to staff and others who provide direct care to the resident related to the resident's toileting routines and continence care.

Inspector ID #:

#154

**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.**



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<i>Fayed & Gereisee</i>	<i>Gereisee</i>
Title:	Date:

Oct. 18/10

Oct 15/10.