

Inspection Report under the Long-Term Care Homes Act, 2007 Ministère de la Santé et des Soins de longue durée

Rapport d'inspection sous la Loi de 2007 sur les foyers de soins de longue durée

Health System Accountability and Performance Division Performance Improvement and Compliance Branch

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### Public Copy/Copie du public

Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	•	Type of Inspection / Genre d'inspection
Jul 15, 2013	2013_138151_0024	S-001309- 12,S-00089- 13	•

#### Licensee/Titulaire de permis

EXTENDICARE (CANADA) INC.

3000 STEELES AVENUE EAST, SUITE 700, MARKHAM, ON, L3R-9W2

Long-Term Care Home/Foyer de soins de longue durée

EXTENDICARE FALCONBRIDGE

281 FALCONBRIDGE ROAD, SUDBURY, ON, P3A-5K4

Name of Inspector(s)/Nom de l'inspecteur ou des inspecteurs

**MONIQUE BERGER (151)** 

Inspection Summary/Résumé de l'inspection



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The purpose of this inspection was to conduct a Complaint inspection.

This inspection was conducted on the following date(s): July 8,9,10,11,12, 2013

#### **INSPECTION 2013-138151-0024 COMPLAINTS**

This inspection was in relation to the the following complaints:

- 1. S-001309-12 related to IL-25483-12
- 2. S-000089-13 related to IL-26851-SU (also related to Critical Incident: S-000090-13 and related CI:2590-000007-13)

During the course of the inspection, the inspector(s) spoke with Administrator, Director of Care (DOC), Assistant Director of Care (ADOC), Manager of Environmental Services, Food Service Manager, Dietary Aides, Registered Staff, Personal Support Workers (PSW), residents and families

During the course of the inspection, the inspector(s)

- directly observed care and service delivery to residents
- reviewed resident health care records
- reviewed home's policies and procedures in regards to internal transfers for accommodations types
- reviewed home's processes for dealing with resident/family concerns/complaints
- reviewed the home's policies, procedures, protocols and programs that addressed loss of essential services
- reviewed the home's emergency plan to provide for meal service delivery during elevator breakdown

The following Inspection Protocols were used during this inspection:

**Accommodation Services - Laundry** 

**Accommodation Services - Maintenance** 

**Food Quality** 

**Personal Support Services** 

Findings of Non-Compliance were found during this inspection.



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NON-COMPLIANCE / NON - RESPECT DES EXIGENCES			
Legend	Legendé		
WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order	WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités		
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 non-respect des exigences de la Loi de 2007 sur les foyers de soins de longue durée (LFSLD) a été constaté. (Une exigence de la loi comprend les exigences qui font partie des éléments énumérés dans la définition de « exigence prévue par la présente loi », au paragraphe 2(1) de la LFSLD.		
The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.	Ce qui suit constitue un avis écrit de non- respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.		

WN #1: The Licensee has failed to comply with O.Reg 79/10, s. 26. Plan of care Specifically failed to comply with the following:

s. 26. (3) A plan of care must be based on, at a minimum, interdisciplinary assessment of the following with respect to the resident: 18. Special treatments and interventions. O. Reg. 79/10, s. 26 (3).

Findings/Faits saillants:



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1. Over the course of the five days of the inspection, Inspector 151 made multiple observations of the care and service delivery to a resident and observed that the resident was receiving a dressing to a wound. Staff interviewed confirmed the resident had a new wound. Inspector reviewed resident's most recent plan of care and did not find a reference in regards to the new wound and a need for wound care. The resident's plan of care is not inclusive of the resident's special treatments and interventions. [s. 26. (3) 18.]

### Additional Required Actions:

VPC - pursuant to the Long-Term Care Homes Act, 2007, S.O. 2007, c.8, s.152(2) the licensee is hereby requested to prepare a written plan of correction for achieving compliance to ensure that the plan of care for resident #001 is inclusive of the resident's special treatments and interventions, to be implemented voluntarily.

WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 122. Purchasing and handling of drugs

Specifically failed to comply with the following:

- s. 122. (1) Every licensee of a long-term care home shall ensure that no drug is acquired, received or stored by or in the home or kept by a resident under subsection 131 (7) unless the drug,
- (a) has been prescribed for a resident or obtained for the purposes of the emergency drug supply referred to in section 123; and O. Reg. 79/10, s. 122 (1).
- (b) has been provided by, or through an arrangement made by, the pharmacy service provider or the Government of Ontario. O. Reg. 79/10, s. 122 (1).

Findings/Faits saillants:



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1. Inspector reviewed a resident health care records and interviewed staff. Inspector noted that staff are storing in their medication cart and administrating to the resident a medication not provided for by their pharmacy provider. In addition, Inspector interviewed staff who confirmed that: "we do this a lot especially with prescription ointments and creams".

The licensee did not ensure that no drug is acquired, received or stored by or in the home or kept by a resident under subsection 131 (7) unless the drug has been provided by, or through an arrangement made by, the pharmacy service provider or the Government of Ontario. [s. 122. (1)]

### Additional Required Actions:

VPC - pursuant to the Long-Term Care Homes Act, 2007, S.O. 2007, c.8, s.152(2) the licensee is hereby requested to prepare a written plan of correction for achieving compliance to ensure that no drug is acquired, received or stored by or in the home or kept by a resident under subsection 131 (7) unless the drug has been provided by, or through an arrangement made by, the pharmacy service provider or the Government of Ontario, to be implemented voluntarily.

Issued on this 15th day of July, 2013

Signature of Inspector(s)/Signature de l'inspecteur ou des inspecteurs

monique S. Bergu - Inspector 151