



Inspection Report under the Long-Term Care Homes Act, 2007

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

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

Ottawa Service Area Office
347 Preston St., 4th Floor
Ottawa ON K1S 3J4

Telephone: 613-569-5602
Facsimile: 613-569-9670

Bureau régional de services de Ottawa
347, rue Preston, 4th étage
Ottawa ON K1S 3J4

Téléphone: 613-569-5602
Télécopieur: 613-569-9670

<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 15, 2010	Inspection No/ d'inspection 2010_104_2164_14Oct111214	Type of Inspection/Genre d'inspection Complaint: O-000413
Licensee/Titulaire Extendicare Toronto Inc. [a subsidiary of Extendicare (Canada) Inc] 3000 Steeles Avenue East, Suite 700, Markham, ON, L3R 9W2 Fax: 905-470-5588		
Long-Term Care Home/Foyer de soins de longue durée Extendicare Guildwood 60 Guildwood Parkway, Scarborough, ON, M1E 1N9 Fax: 416-269-5123		
Name of Inspector(s)/Nom de l'inspecteur(s) Judy Macaulay, Inspector ID #104		

Inspection Summary/Sommaire d'inspection

The purpose of this inspection was to conduct a complaint inspection related to medication administration, continence care management, and equipment cleanliness for an identified resident.

During the course of the inspection, the inspector spoke with the Administrator, the Director of Care and Assistant Director of Care, several registered nursing staff, the RAI coordinator and the resident.

During the course of the inspection, the inspector reviewed the identified resident's chart, the Medication Administration Record, the home's policies and routines, and also observed many residents' equipment.

The following Inspection Protocol were used during this inspection:

Accommodation Services – Housekeeping
Continence Care and Bowel Management

- There are no findings of Non-Compliance as a result of this inspection.
 A finding of Non-Compliance was found during this inspection.

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. <i>J. Macaulay, LTC Inspector - Munro</i>
Title: _____ Date: _____	Date of Report: <i>Dec. 29, 2010</i>