

Ministry of Health and Long-Term Care

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

Rapport d'inspection prévue le Loi de 2007 les foyers de soins de longue

Health System Accountability and Performance Division Performance Improvement and Compliance Branch Division de la responsabilisation et de la performance du système de santé Direction de l'amélioration de la performance et de la conformité

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## Public Copy/Copie du public

Date(s) of inspection/Date(s) de l'inspection	Inspection No/ No de l'inspection	Type of Inspection/Genre d'inspection			
Nov 20, Dec 4, 2012	2012_140158_0026	Other			
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 KAPUSKASING 45 ONTARIO STREET, P.O. BOX 460, KAPUSKASING, ON, P5N-2Y5					
Name of Inspector(s)/Nom de l'inspecteur ou des inspecteurs					
KELLY-JEAN SCHIENBEIN (158)					
Inspection Summary/Résumé de l'inspection					

The purpose of this inspection was to conduct an Other inspection.

During the course of the inspection, the inspector(s) spoke with the Administrator/Director of Nurses, Registered staff, Personal Support Worker, housekeeping staff and residents.

During the course of the Inspection, the inspector(s) conducted a walk through of the home, reviewed several resident health care records, observed a meal service and observed staff to resident interaction.

The following Inspection Protocols were used during this inspection:

**Dining Observation** 

**Residents' Council** 

Findings of Non-Compliance were found during this inspection.

## NON-COMPLIANCE / NON-RESPECT DES EXIGENCES



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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. 87. Housekeeping Specifically failed to comply with the following subsections:

s. 87. (2) As part of the organized program of housekeeping under clause 15 (1) (a) of the Act, the licensee shall ensure that procedures are developed and implemented for,

(a) cleaning of the home, including,

- (i) resident bedrooms, including floors, carpets, furnishings, privacy curtains, contact surfaces and wall surfaces, and
  - (ii) common areas and staff areas, including floors, carpets, furnishings, contact surfaces and wall surfaces;
- (b) cleaning and disinfection of the following in accordance with manufacturer's specifications and using, at a minimum, a low level disinfectant in accordance with evidence-based practices and, if there are none, in accordance with prevailing practices:
  - (i) resident care equipment, such as whirlpools, tubs, shower chairs and lift chairs.
- (ii) supplies and devices, including personal assistance services devices, assistive aids and positioning aids, and
  - (iii) contact surfaces;
- (c) removal and safe disposal of dry and wet garbage; and
- (d) addressing incidents of lingering offensive odours. O. Reg. 79/10, s. 87 (2).

## Findings/Faits saillants:

1. The licensee did not ensure that incidents of offensive odours were addressed. On November 20, 2012, the Inspector noted that the bathroom in a shared resident's room had a lingering urine odour at 08:45hr and at 13:00hr. A lingering odour was previously noted by the Inspector during the 2011 Critical Incident Inspection and a WN was issued. Staff # S-100 identified that efforts taken thus far have not been effective in controlling the odours. The Inspector also noted that floor tiles in this bathroom as well as in the bedroom were sticky.

## 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 ensuring that the source of the lingering offensive odours in a shared resident's room is addressed, to be implemented voluntarily.

Issued on this 4th day of December, 2012



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Signature of Inspector(s)/Signature de l'insp	pecteur ou des inspect	teurs	
Lehenbeur			