Ontario

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 sous la Loi de 2007 sur les foyers de soins de longue durée

Long-Term Care Homes Division
Long-Term Care Inspections Branch

Division des foyers de soins de longue durée
Inspection de soins de longue durée

Ottawa Service Area Office
347 Preston St Suite 420
OTTAWA ON K1S 3J4
Telephone: (613) 569-5602
Facsimile: (613) 569-9670

Bureau régional de services d'Ottawa
347 rue Preston bureau 420
OTTAWA ON K1S 3J4
Téléphone: (613) 569-5602
Télécopieur: (613) 569-9670

Public Copy/Copie du public

Report Date(s) / Date(s) du apport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Oct 28, 2016	2016_330573_0023	013844-16, 029777-16	Complaint

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 LAURIER MANOR
1715 MONTREAL ROAD GLOUCESTER ON K1J 6N4

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

ANANDRAJ NATARAJAN (573)

Inspection Summary/Résumé de l'inspection

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

This inspection was conducted on the following date(s): October 19, 20, 21, 24, 25 and 26, 2016.

The purpose of this inspection was related to complaint Log # 013844-16 regarding resident care not being provided and complaint Log # 029777-16 regarding resident admission.

During the course of the inspection, the inspector(s) spoke with During the course of the inspection, the inspector(s) spoke with the Administrator, Director of Care (DOC), Assistant Director of Care (ADOC) / RAI Coordinator, Social Worker (SW), Office Manager, Registered Nurses (RN), Registered Practical Nurses (RPN's), Personal Support Workers (PSW), Family Members and a Resident.

In addition the inspector observed residents' environment and reviewed resident health care records (including care plans, assessments, progress notes, medication and treatment administration records, PSW Daily Care Flow sheet documentation).

The following Inspection Protocols were used during this inspection:
Personal Support Services
Skin and Wound Care

During the course of this inspection, Non-Compliances were issued.
- **1 WN(s)**
- **0 VPC(s)**
- **0 CO(s)**
- **0 DR(s)**
- **0 WAO(s)**

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES	
Legend WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order	Legendé 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). The following constitutes written notification of non-compliance under paragraph 1 of section 152 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. 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 LTCHA, 2007 S.O. 2007, c.8, s. 6. Plan of care

Specifically failed to comply with the following:

s. 6. (9) The licensee shall ensure that the following are documented:
1. The provision of the care set out in the plan of care. 2007, c. 8, s. 6 (9).
2. The outcomes of the care set out in the plan of care. 2007, c. 8, s. 6 (9).
3. The effectiveness of the plan of care. 2007, c. 8, s. 6 (9).

Findings/Faits saillants :

1. The licensee has failed to ensure that the provision of the care set out in the plan of care was documented, specifically in relation to resident #001's bed bath.

Resident #001 was admitted to the home on a specified date with multiple diagnoses. On a specified date, during an interview, resident #001's family member expressed concerns regarding resident #001's cleanliness and further indicated to Inspector #573 that resident #001 did not receive any bath from the staff as per the resident's hygiene requirements.

On October 19, 2016, Inspector #573 reviewed resident #001's health care record which identified that the resident was receiving a specified care. Further the written plan of care in place for two specified months in 2016, indicated that staff are to provide resident #001 with daily bed bath.

On October 19, 2016, Inspector spoke with PSW #101, who indicated that resident #001 received bed bath and stated that due to resident's medical condition, the resident was provided with bed baths on every single day. Further PSW #101 indicated the provision of the resident #001's bed bath was documented in the PSW Daily Care Flow sheet.

Inspector #573 reviewed resident #001's PSW documentation in the Daily Care Flow sheet for two specified months in 2016, in the presence of RN #102. During the nine weeks of documentation review by Inspector #573, it was documented that resident #001 received only six bed baths. There was no documentation indicating that resident #001 had refused bed bath on the days where the provision of the bed bath was not documented.

During an interview, the RN #102 indicated to Inspector #573 that PSW staff provided bed bath to resident #001 frequently and more than twice a week as related to the resident #001's hygiene requirements. Further the RN #102 indicated to the inspector that PSW staff were expected to document the resident #001's bed bath in the PSW Daily Care Flow sheet. RN #102 agreed with the inspector that the provision of resident #001's bath was not documented. (Log #013844-16) [s. 6. (9) 1.]

Issued on this 15th day of November, 2016

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

Original report signed by the inspector.