



**Ministry of Health and  
Long-Term Care**

**Ministère de la Santé et des Soins  
de longue durée**

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

**Rapport d'inspection prévue  
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**

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**Public Copy/Copie du public**

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<b>Report Date(s) / Date(s) du Rapport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / No de registre</b>	<b>Type of Inspection / Genre d'inspection</b>
Dec 6, 2018	2018_605213_0025	030654-18	Critical Incident System

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**Licensee/Titulaire de permis**

Extendicare (Canada) Inc.  
3000 Steeles Avenue East Suite 103 MARKHAM ON L3R 4T9

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

Extendicare London  
860 Waterloo Street LONDON ON N6A 3W6

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

RHONDA KUKOLY (213)

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**Inspection Summary/Résumé de l'inspection**

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**The purpose of this inspection was to conduct a Critical Incident System inspection.**

**This inspection was conducted on the following date(s): December 3, 4, 5, 2018.**

**This inspection was completed related to critical incident regarding an injury resulting in a significant change in condition.**

**This inspection was completed onsite while completing a concurrent complaint inspection #2018\_605213\_0026 regarding care concerns.**

**During the course of the inspection, the inspector(s) spoke with the Administrator, the Director of Care, the Clinical Coordinator, the Maintenance Manager, the Social Worker, Registered Nurses, Registered Practical Nurses, a Personal Support Worker and residents.**

**The Inspector also made observations and reviewed health records, education records, policies and procedures, incident reports, meeting minutes and other relevant documentation.**

**The following Inspection Protocols were used during this inspection:  
Falls Prevention  
Medication**

**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**

<p>Legend</p> <p>WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order</p>	<p>Légende</p> <p>WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités</p>
<p>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).</p> <p>The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.</p>	<p>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.</p> <p>Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.</p>



**WN #1: The Licensee has failed to comply with O.Reg 79/10, s. 131. Administration of drugs**

**Specifically failed to comply with the following:**

**s. 131. (1) Every licensee of a long-term care home shall ensure that no drug is used by or administered to a resident in the home unless the drug has been prescribed for the resident. O. Reg. 79/10, s. 131 (1).**

**Findings/Faits saillants :**

1. The licensee has failed to ensure that no drug was used by or administered to a resident in the home unless the drug was prescribed for the resident.

The home reported a Critical Incident Report on an identified date, related to an incident with a significant change in condition for a resident. The home also reported in the critical incident that a medication incident occurred the same day.

A record review of the health record for the resident was completed. The progress notes showed that the resident was administered a similar type of medication, but the wrong medication on an identified date. The physician was notified and the original order for was discontinued and an order for the administered medication was received.

In an interview with the Director of Care, and in reviewing the medication incident reported by the registered staff, it was determined that the medication ordered was not in the building at the time of the order and the registered staff mistakenly believed that the two medications were the same medication with different names. Appropriate actions were taken related to the incident and there was no harm to the resident as the two medications had the same effect.

The licensee has failed to ensure that no drug was used by or administered to a resident in the home unless the drug was prescribed for the resident when when it was not prescribed for them. [s. 131. (1)]

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**Issued on this 7th day of January, 2019**

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

**Original report signed by the inspector.**