



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

**Rapport d'inspection
prévue le *Loi de 2007
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

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

Bureau régional de services d'Ottawa
347, rue Preston, 4^{ième} étage
Ottawa ON K1S 3J4

**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

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Licensee Copy/Copie du Titulaire Public Copy/Copie Public

Date(s) of inspection/Date de l'inspection March 16 and 17, 2011	Inspection No/ d'inspection 2011_134_2579_17Mar090623	Type of Inspection/Genre d'inspection Log # O-003023
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Licensee/Titulaire
Extendicare Northeastern Ontario Inc. [a subsidiary of Extendicare (Canada) Inc.], 3000 Steeles Avenue East, Suite 700
Markham, Ontario L3R 9W2
905-470-5588

Long-Term Care Home/Foyer de soins de longue durée
Extendicare Medex, 1865 Baseline Road Ottawa K2C3K6
613-225-0960

Name of Inspector(s)/Nom de l'inspecteur(s)
Colette Asselin # 134

Inspection Summary/Sommaire d'inspection

The purpose of this inspection was to conduct a complaint investigation related to the care and services provided to a resident.

During the course of the inspection, the inspector spoke with the Administrator, Director of Care, two Assistant Directors of Care and Dr Bajaj.

During the course of the inspection, the inspector reviewed the health care record of the resident, the Home's procedure related to Laboratory Services and Procedures # 03-20 and all correspondence related to the issue.

The following Inspection Protocol was used during this inspection:

- Hospitalization and Death

Findings of Non-Compliance were found as a result of this inspection.

2 WN – 1 CO: CO # 001
1 VPC



NON-COMPLIANCE / (Non-respecté)

Definitions/Définitions

- WN** – Written Notifications/Avis écrit
- VPC** – Voluntary Plan of Correction/Plan de redressement volontaire
- DR** – Director Referral/Régisseur envoyé
- CO** – Compliance Order/Ordres de conformité
- WAO** – Work and Activity Order/Ordres: travaux et activités

The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.

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.)

WN #1: The Licensee has failed to comply with LTCHA 2007, S.O. 2007, c. 8, s. 6

- (1) Every licensee of a long-term care home shall ensure that there is a written plan of care for each resident that sets out,
 - (c) clear directions to staff and others who provide direct care to the resident.
- (9) The licensee shall ensure that the following are documented:
 - 3. The effectiveness of the plan of care.
- (10) The licensee shall ensure that the resident is reassessed and the plan of care reviewed and revised at least every six months and at any other time when,
 - (b) the resident's care needs change or care set out in the plan is no longer necessary; or
 - (c) care set out in the plan has not been effective.
- (11) When a resident is reassessed and the plan of care reviewed and revised,
 - (a) subsections (4) and (5) apply, with necessary modifications, with respect to the reassessment and revision; and
 - (b) if the plan of care is being revised because care set out in the plan has not been effective, the licensee shall ensure that different approaches are considered in the revision of the plan of care.

Findings:

- 1. The current plan of care has no clear direction to direct staff providing care on how to deal with the resident's resistance to taking medication, food supplement and meals.
- 2. The resident's status and condition was not captured in the progress notes and no change in the plan of care was initiated to adjust goals and interventions.
- 3. At admission the resident's weight was measured. The weight goal established in plan of care at admission was not met; the plan of care was not revised to reflect different approaches to respond to needs.
- 4. The care plan did not provide clear direction as to how to treat recurrent eye infection

Inspector ID #: 134

Additional Required Action:

CO # - 001 will be served on the licensee. Refer to "Order(s) of the Inspector" form.



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WN # 2: The Licensee has failed to comply with O. Reg. 79/10 s. 134
Every licensee of a long-term care home shall ensure that,
(a) when a resident is taking any drug or combination of drugs, including psychotropic drugs, there is monitoring and documentation of the resident's response and the effectiveness of the drugs appropriate to the risk level of the drugs;

Findings:
1. The effectiveness and resident's response to the treatment was not documented after the 7-day eye treatment was finished. There is no indication that the physician was notified that the resident did not have the complete treatment on two occasions.

Inspector ID #:	134
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Additional Required Actions:
VPC – pursuant to the Long term Care home Act, 2007, S.O. 2007, c. 8, s. 152 (2) the licensee is hereby requested to prepare a written plan of correction for ensuring that when a resident is prescribed medicated eye treatment that there is monitoring and documentation of the resident's response and effectiveness of the medication, to be implemented voluntarily.

<p>Signature of Licensee or Representative of Licensee Signature du Titulaire du représentant désigné</p>	<p>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.</p> <p style="text-align: center;"><i>Rollette Asselin</i></p>
<p>Title: _____ Date: _____</p>	<p>Date of Report: March 31, 2011</p>



Order(s) of the Inspector

Pursuant to section 153 and/or section 154 of the
Long-Term Care Homes Act, 2007, S.O. 2007, c.8

	<input type="checkbox"/> Licensee Copy/Copie du Titulaire	<input checked="" type="checkbox"/> Public Copy/Copie Public
Name of Inspector:	Colette Asselin	Inspector ID # 134
Log #:	O-003023	
Inspection Report #:	2011_134_2579_17Mar090623	
Type of Inspection:	Complaint	
Date of Inspection:	March 16 and 17, 2011	
Licensee:	Extendicare North Eastern Ontario Inc.	
LTC Home:	Extendicare Medex	
Name of Administrator:	Pamela Nisbet	

To Extendicare Medex, you are hereby required to comply with the following order(s) by the date set out below:

Order #:	001	Order Type:	Compliance Order, Section 153 (1)(b)
Pursuant to: LTCHA, 2007, c. 8, s. 6			
<p>(1) Every licensee of a long-term care home shall ensure that there is a written plan of care for each resident that sets out,</p> <p style="padding-left: 40px;">(c) clear directions to staff and others who provide direct care to the resident.</p> <p>(9) The licensee shall ensure that the following are documented:</p> <p style="padding-left: 40px;">3. The effectiveness of the plan of care.</p> <p>(10) The licensee shall ensure that the resident is reassessed and the plan of care reviewed and revised at least every six months and at any other time when,</p> <p style="padding-left: 40px;">(b) the resident's care needs change or care set out in the plan is no longer necessary; or</p> <p style="padding-left: 40px;">(c) care set out in the plan has not been effective.</p> <p>(11) When a resident is reassessed and the plan of care reviewed and revised,</p> <p style="padding-left: 40px;">(b) if the plan of care is being revised because care set out in the plan has not been effective, the licensee shall ensure that different approaches are considered in the revision of the plan of care.</p>			



Order:

The licensee shall prepare, submit and implement a plan to ensure that plan of care provides clear direction to staff and when care is being revised because the care set out has not been effective, the licensee shall consider and initiate different interventions and or approaches in the revision of the plan.

Grounds:

1. The current plan of care has no clear direction to direct staff providing care on how to deal with the resident's resistance to taking medication, food supplement and meals.
2. The resident's status and condition was not captured in the progress notes and no change in the plan of care was initiated to adjust goals and interventions.
3. At admission the resident's weight was measured. The weight goal established in plan of care at admission was not met, the plan of care was not revised to reflect different approaches to respond to needs.
4. The care plan did not provide clear direction as to how to treat recurrent eye infection.

This order must be complied with by: April 30, 2011

REVIEW/APPEAL INFORMATION

TAKE NOTICE:

The Licensee has the right to request a review by the Director of this (these) Order(s) and to request that the Director stay this(these) Order(s) in accordance with section 163 of the *Long-Term Care Homes Act, 2007*.

The request for review by the Director must be made in writing and be served on the Director within 28 days from the day the order was served on the Licensee.

The written request for review must include,

- (a) the portions of the order in respect of which the review is requested;
- (b) any submissions that the Licensee wishes the Director to consider; and
- (c) an address for service for the Licensee.

The written request for review must be served personally, by registered mail or by fax upon:

Director
c/o Appeals Clerk
Performance Improvement and Compliance Branch
Ministry of Health and Long-Term Care
55 St. Clair Ave. West
Suite 800, 8th floor
Toronto, ON M4V 2Y2
Fax: 416-327-7603

When service is made by registered mail, it is deemed to be made on the fifth day after the day of mailing and when service is made by fax, it is deemed to be made on the first business day after the day the fax is sent. If the Licensee is not served with written notice of the Director's decision within 28 days of receipt of the Licensee's request for review, this(these) Order(s) is(are) deemed to be confirmed by the Director and the Licensee is deemed to have been served with a copy of that decision on the expiry of the 28 day period.

The Licensee has the right to appeal the Director's decision on a request for review of an Inspector's Order(s) to the Health Services Appeal and Review Board (HSARB) in accordance with section 164 of the *Long-Term Care Homes Act, 2007*. The HSARB is an independent group of members not connected with the Ministry. They are appointed by legislation to review matters concerning health care services. If the Licensee decides to request a hearing, the Licensee must, with 28 days of being served with the notice of the Director's decision, mail or deliver a written notice of appeal to both:

Health Services Appeal and Review Board and the
Attention Registrar
151 Bloor Street West

Director
c/o Appeals Clerk
Performance Improvement and Compliance Branch



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

9th Floor
Toronto, ON
M5S 2T5

55 St. Claire Avenue, West
Suite 800, 8th Floor
Toronto, ON M4V 2Y2

Fax: 416-327-7603

Upon receipt, the HSARB will acknowledge your notice of appeal and will provide instructions regarding the appeal process. The Licensee may learn more about the HSARB on the website www.hsarb.on.ca.

Issued on this 31 day of March, 2011	
Signature of Inspector:	<i>Colette Asselin</i>
Name of Inspector:	Colette Asselin
Service Area Office:	OSAO