

Ministry of Long-Term Care
Long-Term Care Operations Division
Long-Term Care Inspections Branch

Ottawa District
347 Preston Street, Suite 410
Ottawa, ON, K1S 3J4
Telephone: (877) 779-5559

Original Public Report

Report Issue Date: June 14, 2024	
Inspection Number: 2024-1093-0003	
Inspection Type: Complaint Critical Incident	
Licensee: Extendicare (Canada) Inc.	
Long Term Care Home and City: Extendicare Medex, Ottawa	
Lead Inspector Margaret Beamish (000723)	Inspector Digital Signature
Additional Inspector(s) Shevon Thompson (000731)	

INSPECTION SUMMARY

The inspection occurred onsite on the following dates: June 5, 6, 7, 13, and 14, 2024.

The following intakes were inspected:

- Intake: #00107068 - COVID-19 Outbreak
- Intake: #00110390 - Parainfluenza Outbreak
- Intake: #00114524 - Complaint with concerns regarding resident's financial arrangements
- Intake: #00115712 - Complaint with concerns regarding resident's potential for relocation

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The following Inspection Protocols were used during this inspection:

Infection Prevention and Control
Whistle-blowing Protection and Retaliation
Resident Charges and Trust Accounts

INSPECTION RESULTS

Non-Compliance Remedied

Non-compliance was found during this inspection and was remedied by the licensee prior to the conclusion of the inspection. The inspector was satisfied that the non-compliance met the intent of section 154 (2) and requires no further action.

NC #001 remedied pursuant to FLTCA, 2021, s. 154 (2)

Non-compliance with: FLTCA, 2021, s. 6 (2)

Plan of care

s. 6 (2) The licensee shall ensure that the care set out in the plan of care is based on an assessment of the resident and on the needs and preferences of that resident.

The licensee has failed to ensure that the care set out in the plan of care is based on an assessment of the resident and on the needs and preferences of that resident.

The licensee did not include the use of recreational cannabis as the resident's preference and the need for hourly monitoring were not documented in the resident's plan of care.

Sources: resident's electronic health record, interview with an RN and ADOC.

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On June 14, 2024, the Assistant Director of Care (ADOC) presented the inspector with a reviewed copy of the resident's plan of care which included the resident's preference for the use of recreational cannabis and for hourly checks on the resident.

Date Remedy Implemented: June 14, 2024
[000731]

WRITTEN NOTIFICATION: Recreational cannabis

NC #002 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 142 (1)

Recreational cannabis

s. 142 (1) Every licensee of a long-term care home shall ensure that there are written policies and procedures to govern, with respect to residents, the cultivation, acquisition, consumption, administration, possession, storage and disposal of recreational cannabis in accordance with all applicable laws, including, without being limited to, the Cannabis Act (Canada) and the Cannabis Regulations (Canada).

The licensee has failed to ensure that the home's policy, Resident Recreational Marijuana, was complied with. In accordance with O. Reg 246/22 s. 11 (1) (b), where the Act or this Regulation requires the licensee of a long-term care home to have, institute or otherwise put in place any plan, policy, protocol, program, procedure, strategy, initiative or system, the licensee is required to ensure that the plan, policy, protocol, program, procedure, strategy, initiative or system is complied with. Specifically, the licensee has failed to ensure that a smoking assessment was completed for a resident quarterly.

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Sources: home's policy, Resident Recreational Marijuana - RV_03_01-11 with last reviewed date Oct 2023, resident's electronic health record, Interview with ADOC and RN. [000731]

WRITTEN NOTIFICATION: CMOH and MOH

NC #003 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 272

CMOH and MOH

s. 272. Every licensee of a long-term care home shall ensure that all applicable directives, orders, guidance, advice or recommendations issued by the Chief Medical Officer of Health or a medical officer of health appointed under the Health Protection and Promotion Act are followed in the home.

The licensee has failed to ensure that all applicable directives, orders, guidance, advice or recommendations issued by the Chief Medical Officer of Health or a medical officer of health appointed under the Health Protection and Promotion Act are followed in the home, specifically ensuring that the alcohol based hand rub (ABHR) was not expired in four ABHR wall dispensers in different areas of the home, including a resident dining room.

Sources: Observations and Recommendations for Outbreak Prevention and Control in Institutions and Congregate Living Settings April 2024. [000723]