

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 sions 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

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Report Date(s) /	Inspection No /	Log # /	Type of Inspection /
Date(s) du apport	No de l'inspection	Registre no	Genre d'inspection
Sep 13, 2016	2016_291194_0019	023795-16, 025719-16	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 PETERBOROUGH 80 ALEXANDER AVENUE PETERBOROUGH ON K9J 6B4

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

CHANTAL LAFRENIERE (194)

Inspection Summary/Résumé de l'inspection



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

This inspection was conducted on the following date(s): August 22, 23 and 24, 2016

The following Logs were inspected during this inspection: Log #023795-16 and #025719-16 related to resident care.

During the course of the inspection, the inspector(s) spoke with Administrator, Residents, Registered Nurse (RN), Registered Practical Nurse (RPN), Personal Support Worker (PSW)

The inspector reviewed clinical health records of identified residents and observed staff providing care to residents.

The following Inspection Protocols were used during this inspection: Personal Support Services

During the course of this inspection, Non-Compliances were issued.

1 WN(s) 1 VPC(s) 0 CO(s) 0 DR(s) 0 WAO(s)



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NON-COMPLIANCE / NON - RESPECT DES EXIGENCES			
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. 41. Every licensee of a long-term care home shall ensure that each resident of the home has his or her desired bedtime and rest routines supported and individualized to promote comfort, rest and sleep. O. Reg. 79/10, s. 41.

Findings/Faits saillants :



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1. The Licensee failed to ensure that resident #010's desired bedtime and rest routines were supported and individualized to promote comfort, rest and sleep.

Log #023795-16 and #025710-16 involving resident #010

On an identified date a Memo from the management was provided to the night PSW staff. The memo identified residents on each unit that night staff would be responsible for getting up. Resident #010 was identified on this memo as one of the residents who were to be assisted up for the day by the night staff.

During interview with inspector on August 23, 2016 resident #010 was able to identify needs and choices clearly. Resident #010 indicated that he/she would prefer to remain in bed in the morning until 08:00 hours or whatever time was available. Resident #010 indicated to inspector he/she was up too long in the chair when the staff got the resident up at 06:00 hours. Resident #010 indicated that he/she had a condition that caused pain if he/she was in the chair for an extended length of time. Resident #010 indicated that staff assisted the resident back to bed after lunch.

Resident #010 indicated that the routine for getting up in the morning was changed a few months ago. Resident #010 indicated that he/she previously was assisted up around 08:00 hours and now he/she was assisted up at 06:00 hours. Resident #010 indicated to inspector #194 that no one had consulted the resident regarding the time he/she was assisted up in the morning and no one has asked the resident if he/she is happy with the change in routine.

The licensee failed to ensure that resident #010's bedtime and rest routines were supported and individualized to promote comfort, rest and sleep, when the morning routine of getting up was changed from 08:00 hour to 0600 hours. Resident #010's change in morning routine has meant a longer time for the resident to be in the wheelchair with the potential for increased discomfort. [s. 41.]



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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 by ensuring that each resident of the home has his or her desired bedtime and rest routines supported and individualized to promote comfort, rest and sleep., to be implemented voluntarily.

Issued on this 13th day of September, 2016

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

Original report signed by the inspector.