



**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 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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Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / No de registre	Type of Inspection / Genre d'inspection
Feb 20, 2019	2019_788721_0003	011440-18, 017320-18, 017476-18, 021101-18, 022206-18, 023861-18, 024904-18, 025026-18, 028235-18, 028335-18, 028799-18, 030375-18, 001407-19, 001534-19, 001546-19	Critical Incident System

Licensee/Titulaire de permis

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

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

Extendicare Southwood Lakes
1255 North Talbot Road WINDSOR ON N9G 3A4

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

MEAGAN MCGREGOR (721), JULIE DALESSANDRO (739)

Inspection Summary/Résumé de l'inspection

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



This inspection was conducted on the following date(s): February 11, 12, 13, 14 and 15, 2019.

The following Critical Incident (CI) reports were inspected during the course of this inspection:

CI #2842-000016-18/Log #017320-18 related to alleged resident to resident sexual abuse;

CI #2842-000021-18/Log #021101-18 related to alleged resident to resident sexual abuse;

CI #2842-000024-18/Log #023861-18 related to alleged resident to resident sexual abuse;

CI #2842-000026-18/Log #024904-18 related to alleged resident to resident sexual abuse;

CI #2842-000028-18/Log #025026-18 related to alleged resident to resident sexual abuse;

CI #2842-000030-18/Log #028235-18 related to alleged resident to resident sexual abuse;

CI #2842-000031-18/Log #028335-18 related to alleged resident to resident sexual abuse;

CI #2842-000032-18/Log #028799-18 related to alleged resident to resident sexual abuse;

CI #2842-000035-18/Log #030375-18 related to alleged resident to resident sexual abuse;

CI #2842-000014-18/Log #017476-18 related to alleged resident to resident physical abuse;

CI #2842-000023-18/Log #022206-18 related to alleged resident to resident physical abuse;

CI #2842-000004-19/Log #001407-19 related to alleged resident to resident physical abuse;

CI #2842-000005-19/Log #001546-19 related to alleged resident to resident physical abuse;

CI #2842-000006-19/Log #001534-19 related to alleged resident to resident physical abuse;

CI #2842-000010-18/Log #011440-18 related to falls prevention and management.

During the course of the inspection, the inspector(s) spoke with the Administrator, the Director of Care, the Social Worker, the Clinical Coordinator, Registered



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Practical Nurses, Personal Support Workers and several residents.

The Inspectors also observed residents and the care provided to them, reviewed clinical records and plans of care for identified residents and reviewed documentation related to the home's Falls Prevention and Management program and Responsive Behaviours program.

Inspectors Hélène Désabrais (#615) and Natalie Moroney (#610) were also present during this inspection.

This inspection was completed concurrently while in the home completing complaint inspection #2019_674610_0010.

The following Inspection Protocols were used during this inspection:

Falls Prevention

Prevention of Abuse, Neglect and Retaliation

Responsive Behaviours

During the course of this inspection, Non-Compliances were not issued.

0 WN(s)

0 VPC(s)

0 CO(s)

0 DR(s)

0 WAO(s)



NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

Legend	Légende
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.

Issued on this 20th day of February, 2019

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



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Original report signed by the inspector.