



**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  
prévus le Loi de 2007 les  
foyers de soins de longue**

Health System Accountability and Performance  
Division  
Performance Improvement and Compliance Branch  
Division de la responsabilisation et de la  
performance du système de santé  
Direction de l'amélioration de la performance et de la  
conformité

London Service Area Office  
291 King Street, 4th Floor  
LONDON, ON, N6B-1R8  
Telephone: (519) 675-7680  
Facsimile: (519) 675-7685

Bureau régional de services de London  
291, rue King, 4<sup>ième</sup> étage  
LONDON, ON, N6B-1R8  
Téléphone: (519) 675-7680  
Télécopieur: (519) 675-7685

Public Copy/Copie du public

Date(s) of Inspection/Date(s) de l'inspection	Inspection No/ No de l'inspection	Type of Inspection/Genre d'inspection
Jan 24, Feb 6, 7, 2012	2012_022190_0005	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 SOUTHWOOD LAKES  
1255 NORTH TALBOT ROAD, WINDSOR, ON, N9G-3A4

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

SANDRA FYSH (190)

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

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

During the course of the inspection, the inspector(s) spoke with the Administrator and the Director of Care.

During the course of the inspection, the inspector(s) reviewed the clinical records of one resident related to inspection log #L-001974-11.

The following Inspection Protocols were used during this inspection:

Continence Care and Bowel Management

Falls Prevention

Hospitalization and Death

Findings of Non-Compliance were found during this inspection.

**NON-COMPLIANCE / NON-RESPECT DES EXIGENCES**

Legend	Legendé
WN – Written Notification	WN – Avis écrit
VPC – Voluntary Plan of Correction	VPC – Plan de redressement volontaire
DR – Director Referral	DR – Aiguillage au directeur
CO – Compliance Order	CO – Ordre de conformité
WAO – Work and Activity Order	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. 8. Policies, etc., to be followed, and records**  
Specifically failed to comply with the following subsections:

**s. 8. (1) 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, procedure, strategy or system, the licensee is required to ensure that the plan, policy, protocol, procedure, strategy or system,**  
**(a) is in compliance with and is implemented in accordance with applicable requirements under the Act; and**  
**(b) is complied with. O. Reg. 79/10, s. 8 (1).**

**Findings/Faits saillants :**

1. A resident was assessed on admission as an extensive 1 person transfer. It was noted that this resident could transfer to a standing position using a walker and extensive assistance of one staff.

Following admission, a fall occurred resulting in a fracture. A falls risk assessment was not conducted until the resident returned from the hospital following surgery.

The home's policy regarding Falls Management states that "each resident admitted to an Extendicare Home will be assessed for fall risk. The Morse Fall Risk Assessment in the electronic database will be used to assess for falls".

**WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 52. Pain management**  
Specifically failed to comply with the following subsections:

**s. 52. (1) The pain management program must, at a minimum, provide for the following:**  
**1. Communication and assessment methods for residents who are unable to communicate their pain or who are cognitively impaired.**  
**2. Strategies to manage pain, including non-pharmacologic interventions, equipment, supplies, devices and assistive aids.**  
**3. Comfort care measures.**  
**4. Monitoring of residents' responses to, and the effectiveness of, the pain management strategies. O. Reg. 79/10, s. 52 (1).**

**Findings/Faits saillants :**

1. During an admission MDS assessment, a resident indicated pain in two areas and indicated pain on a pain scale. A further assessment of pain needs was not conducted until a pain assessment tool was conducted one month later.



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  
prévus le Loi de 2007 les  
foyers de soins de longue

Issued on this 7th day of February, 2012

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

*Andrew Fyfe*