

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

Health System Accountability and Performance Division Performance Improvement and Compliance Branch

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| Report Date(s) / | Inspection No / | Log # / | Type of Inspection / Genre d'inspection |
|--------------------|--------------------|-------------|---|
| Date(s) du Rapport | No de l'inspection | Registre no | |
| Jun 19, 2013 | 2013_216144_0043 | L-000324-13 | 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

CAROLEE MILLINER (144)

Inspection Summary/Résumé de l'inspection

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

This inspection was conducted on the following date(s): June 18, 2013

During the course of the inspection, the inspector(s) spoke with one resident, the Director of Care, Clinical Coordinator, Physiotherapist, one Registered Practical Nurse and two Personal Service Workers.

During the course of the inspection, the inspector(s) reviewed one resident health record.

The following Inspection Protocols were used during this inspection: Continence Care and Bowel Management



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Findings of Non-Compliance were found during this inspection.

| 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 LTCHA, 2007 S.O. 2007, c.8, s. 6. Plan of care



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Specifically failed to comply with the following:

- 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,
- (a) the planned care for the resident; 2007, c. 8, s. 6 (1).
- (b) the goals the care is intended to achieve; and 2007, c. 8, s. 6 (1).
- (c) clear directions to staff and others who provide direct care to the resident. 2007, c. 8, s. 6 (1).
- s. 6. (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 2007, c. 8, s. 6 (11).
- (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. 2007, c. 8, s. 6 (11).

Findings/Faits saillants:

- 1. The licensee did not ensure one resident's plan of care sets out clear directions to staff and others who provide care to the resident. One resident was assessed by the Physiotherapist to evaluate safety concerns. The physiotherapist directives were not included in the written plan of care. Two staff confirmed the written plan of care does not include the Physiotherapist directives. [s. 6. (1) (c)]
- 2. The licensee did not ensure that different approaches were considered for one resident in the revision of the plan of care. The Registered Dietitian assessed one resident and documented the need to refer the resident to the physician for consideration of a prescription to manage a health condition. Three staff confirmed the referral was not completed. [s. 6. (11) (b)]



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Issued on this 19th day of June, 2013

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

CAROLEE MILLINER