



Ministry of Health and Long-Term Care

Ministère de la Santé et des Soins de longue durée

Inspection Report under the Long-Term Care Homes Act, 2007

Rapport d'inspection sous la Loi de 2007 sur les foyers de soins de longue durée

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

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Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Mar 17, 2014	2014_216144_0012	L-000282-14	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 TECUMSEH
2475 ST. ALPHONSE STREET, TECUMSEH, ON, N8N-2X2

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): March 11, 2014

During the course of the inspection, the inspector(s) spoke with one resident, one visitor, the Director of Care, Office Manager/Acting Administrator, the Registered Dietitian, one Registered Practical Nurse and one Personal Service Worker.

During the course of the inspection, the inspector(s) observed one dining room during the lunch meal, reviewed one infoline report, two critical incident reports, one notification of a non-trespass order and one resident clinical record.

The following Inspection Protocols were used during this inspection:



Dining Observation
Personal Support Services

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

Table with 2 columns: Legend and Legendé. Legend includes WN (Written Notification), VPC (Voluntary Plan of Correction), DR (Director Referral), CO (Compliance Order), WAO (Work and Activity Order). Legendé includes Avis écrit, Plan de redressement volontaire, Aiguillage au directeur, Ordre de conformité, Ordres : travaux et activités. The table also contains a detailed description of non-compliance with LTCHA requirements and its translation into French.



WN #1: The Licensee has failed to comply with O.Reg 79/10, s. 231. Resident records

Every licensee of a long-term care home shall ensure that,

(a) a written record is created and maintained for each resident of the home; and

(b) the resident's written record is kept up to date at all times. O. Reg. 79/10, s. 231.

Findings/Faits saillants :

1. The licensee of a long-term care home did not ensure that the resident's written record is kept up to date at all times.
2. The clinical record for one resident was reviewed for a specific time period.
3. On 13 of 68 days or 19% of the time, there is no documentation confirming a specific type of care was provided.
4. On 13 of 68 days or 19% of the time, there is no documentation confirming the resident refused the care.
5. Two staff confirmed the resident on occasion refuses this care and that both consent and refusals should be documented in the clinical record.
6. Two management personnel confirmed it is the expectation of the home that both the provision and refusal of care be documented in the resident's clinical record. [s. 231. (b)]

Issued on this 17th day of March, 2014

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

CAROLEE MILLNER