

Inspection Report Under the Fixing Long-Term Care Act, 2021

Ministry of Long-Term Care

Long-Term Care Operations Division Long-Term Care Inspections Branch

Central East District

33 King Street West, 4th Floor Oshawa, ON, L1H 1A1 Telephone: (844) 231-5702

Public Report

Report Issue Date: June 25, 2025

Inspection Number: 2025-1546-0005

Inspection Type:

Critical Incident

Licensee: Regional Municipality of Durham **Long Term Care Home and City:** Fairview Lodge, Whitby

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): June 23 - 25, 2025

The following intake(s) were inspected:

- Intake: regarding a fall
- Intake: regarding a medication error

The following **Inspection Protocols** were used during this inspection:

Medication Management Infection Prevention and Control Falls Prevention and Management

INSPECTION RESULTS

WRITTEN NOTIFICATION: PLAN OF CARE

NC #001 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1. Non-compliance with: FLTCA, 2021, s. 6 (7)



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Plan of care

s. 6 (7) The licensee shall ensure that the care set out in the plan of care is provided to the resident as specified in the plan.

The licensee has failed to ensure that the care set out in the plan of care is provided to the resident #001 as specified in their plan. Resident #101's care plan identified fall's prevention and continence interventions. PSW #101 confirmed that resident #001 does not utilize the falls prevention and continence interventions as identified in the care plan.

Sources: Interview with staff, observation, review of resident #001's care plan, Cl # M522-000019-25.

WRITTEN NOTIFICATION: CONTINENCE CARE AND BOWEL MANAGEMENT

NC #002 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 56 (1) 3.

Continence care and bowel management

s. 56 (1) The continence care and bowel management program must, at a minimum, provide for the following:

3. Toileting programs, including protocols for bowel management.

The licensee has failed to maintain the continence care and bowel management program must, at a minimum, provide for the following: Toileting programs, including protocols for bowel management.

DOC confirmed the home does not have a toileting program. PSW #101 there is no toileting schedule and that residents are checked twice during their day shift. POC documentation confirmed toileting was completed three times per day.

Sources: Interview with staff, review of resident #101's plan of care, CI # M522-000019-25.



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