

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

Ottawa District  
347 Preston Street, Suite 410  
Ottawa, ON, K1S 3J4  
Telephone: (877) 779-5559

## Original Public Report

Report Issue Date: September 13, 2024

Inspection Number: 2024-1286-0005

Inspection Type:  
Complaint  
Critical Incident

Licensee: Land O'Lakes Community Services

Long Term Care Home and City: Pine Meadow Nursing Home, Northbrook

## INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): September 10-13, 2024

The following intake(s) were inspected:

- Intake: #00124223 - CI #2796-000007-24 - Alleged neglect of resident
- Intake: #00125251 - Complaint regarding resident's care.

The following Inspection Protocols were used during this inspection:

Infection Prevention and Control  
Reporting and Complaints  
Falls Prevention and Management

## INSPECTION RESULTS

WRITTEN NOTIFICATION: Plan of care

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

Ottawa District  
347 Preston Street, Suite 410  
Ottawa, ON, K1S 3J4  
Telephone: (877) 779-5559

NC #001 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: FLTCA, 2021, s. 6 (1) (c)

Plan of care

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,

(c) clear directions to staff and others who provide direct care to the resident; and

The licensee has failed to ensure that the written plan of care specific to mobility and falls for a resident, set out clear directions to staff and others who provide direct care to the resident.

Sources: Extendicare Chart Audit Review, Resident's current Care Plan and Kardex, resident and room observations, physician orders, interviews with Personal Support Worker (PSW), Registered Practical Nurse (RPN), and Director of Care (DOC).

## WRITTEN NOTIFICATION: Required programs

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

Non-compliance with: O. Reg. 246/22, s. 53 (1) 4.

Required programs

s. 53 (1) Every licensee of a long-term care home shall ensure that the following interdisciplinary programs are developed and implemented in the home:

4. A pain management program to identify pain in residents and manage pain. O. Reg. 246/22, s. 53 (1); O. Reg. 66/23, s. 10.

In accordance with O. Reg 246/22 s. 11 (1) (b), the licensee is required to ensure that written policies and protocols were developed for the pain management program, and ensure they were complied with.

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

Ottawa District  
347 Preston Street, Suite 410  
Ottawa, ON, K1S 3J4  
Telephone: (877) 779-5559

Specifically, staff did not comply with Pain identification and Management Policy #RC-19-01-01, when they did not initiate a Pain Assessment for a resident upon readmission from hospital in August, 2024.

Sources: Extendicare Chart Audit Review, absence of Pain Assessment, Pain identification and Management Policy #RC-19-01-01, Interview with DOC.

## WRITTEN NOTIFICATION: Falls prevention and management

NC #003 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 54 (2)

Falls prevention and management

s. 54 (2) Every licensee of a long-term care home shall ensure that when a resident has fallen, the resident is assessed and that a post-fall assessment is conducted using a clinically appropriate assessment instrument that is specifically designed for falls. O. Reg. 246/22, s. 54 (2); O. Reg. 66/23, s. 11.

The licensee has failed to ensure that when a resident fell on a specific date in July, 2024; a post-fall assessment using a clinically appropriate assessment instrument that was specifically designed for falls, was conducted.

Sources: Extendicare Chart Audit Review, Absence of the Post Falls Assessment, Interview with RPN, and DOC.