

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 20 2024

Inspection Number: 2024-1464-0005

Inspection Type:
Proactive Compliance Inspection

Licensee: Axiom Extendicare LTC II LP, by its general partners Extendicare LTC
Managing II GP Inc. and Axiom Extendicare LTC II GP Inc.

Long Term Care Home and City: Arbour Heights, Kingston

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): September 10-13, 16-19, 2024

The following intake was inspected:

- Intake: #00126244 that was related to a Proactive Compliance Inspection (PCI).

The following Inspection Protocols were used during this inspection:

Food, Nutrition and Hydration
Medication Management
Safe and Secure Home
Quality Improvement
Pain Management
Resident Care and Support Services
Skin and Wound Prevention and Management
Housekeeping, Laundry and Maintenance Services

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Residents' and Family Councils
Infection Prevention and Control
Prevention of Abuse and Neglect
Staffing, Training and Care Standards
Residents' Rights and Choices

INSPECTION RESULTS

Non-Compliance Remedied

Non-compliance was found during this inspection and was remedied by the licensee prior to the conclusion of the inspection. The inspector was satisfied that the non-compliance met the intent of section 154 (2) and requires no further action.

NC #001 remedied pursuant to FLTCA, 2021, s. 154 (2)

Non-compliance with: O. Reg. 246/22, s. 265 (1) 10.

Posting of information

s. 265 (1) For the purposes of clause 85 (3) (s) of the Act, every licensee of a long-term care home shall ensure that the information required to be posted in the home and communicated to residents under section 85 of the Act includes the following:

10. The current version of the visitor policy made under section 267.

The licensee failed to ensure that the current version of the visitor policy was posted in the home, specifically during the initial tour an inspector observed that there was no visitor policy posted.

Sources: observations of mandatory postings in the home; and interview with staff.

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A copy of the current visitor policy was observed posted on September 10, 2024 at 1318.

Date Remedy Implemented: September 10, 2024.

WRITTEN NOTIFICATION: Doors in a home.

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

Non-compliance with: O. Reg. 246/22, s. 12 (1) 3.

Doors in a home

s. 12 (1) Every licensee of a long-term care home shall ensure that the following rules are complied with:

3. All doors leading to non-residential areas must be equipped with locks to restrict unsupervised access to those areas by residents, and those doors must be kept closed and locked when they are not being supervised by staff.

The licensee failed to ensure that all doors leading to non-residential areas must be equipped with locks to restrict unsupervised access to those areas by residents, and those doors must be kept closed and locked when they are not being supervised by staff, specifically on September 10, 2024, a door on the 3rd floor that leads to a non-residential area that included a garbage chute, was observed unlocked when not being supervised by staff.

Sources: interviews with staff; and observation of an unlocked door on the 3rd floor.