

Ministry of Health and Long-Term Care

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

Ministère de la Santé et des Soins de longue durée

Rapport d'inspection prévue le Loi de 2007 les foyers de soins de longue

Health System Accountability and Performance Division Performance Improvement and Compliance Branch Division de la responsabilisation et de la performance du système de santé

Direction de l'amélioration de la performance et de la

conformité

London Service Area Office 291 King Street, 4th Floor LONDON, ON, N6B-1R8 Telephone: (519) 675-7680 Facsimile: (519) 675-7685

Bureau régional de services de London 291, rue King, 4iém étage LONDON, ON, N6B-1R8 Téléphone: (519) 675-7680 Télécopieur: (519) 675-7685

Date(s) of inspection/Date(s) de l'inspection	Inspection No/ No de l'inspection	Type of Inspection/Genre d'inspection
May 16, 19, 2011	2011_022190_0005	Complaint
Licensee/Titulaire de permis	497 141/46254000 110	
EXTENDICARE (CANADA) INC. 3000 STEELES AVENUE EAST, SUITE Long-Term Care Home/Foyer de soin		
EXTENDICARE SOUTHWOOD LAKES 1255 NORTH TALBOT ROAD, WINDS		
Name of Inspector(s)/Nom de l'inspe	cteur ou des inspecteurs	
SANDRA FYSH (190)		
	Inspection Summary/Résumé de l'inspe	ection

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

During the course of the inspection, the inspector(s) spoke with The Administrator, Registered Practical Nurse, two Personal Support Workers and the Resident.

During the course of the inspection, the inspector(s) Reviewed the clinical record of one resident and observed the resident's room and common areas.

The following Inspection Protocols were used in part or in whole during this inspection: **Continence Care and Bowel Management**

Personal Support Services

Findings of Non-Compliance were found during this inspection.

NON-COMP	PLIANCE / NON-RESPECT DES EXIGENCES
Definitions	Définitions
WN - Written Notification	WN = Avis écrit
VPC - Voluntary Plan of Correction	VPC Plan de redressement volontaire
DR – Director Referral CO – Compliance Order	DR – Aiguillage au directeur CO – Ordre de conformité
WAO – Work and Activity Order	WAO - Ordres - traveux et activitée
WAO - Work and Activity Order	VYAO - Ordres : travaux et activités



Ministry of Health and Long-Term Care

Inspection Report under the Long-Term Care Homes Act, 2007 Ministère de la Santé et des Soins de longue durée

Rapport d'inspection prévue le Loi de 2007 les foyers de soins de longue

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.)

The following constitutes written notification of non-compliance under paragraph 1 of section 152 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.

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 O.Reg 79/10, s. 110. Requirements relating to restraining by a physical device

Specifically failed to comply with the following subsections:

- s. 110. (2) Every licensee shall ensure that the following requirements are met where a resident is being restrained by a physical device under section 31 of the Act:
- 1. That staff only apply the physical device that has been ordered or approved by a physician or registered nurse in the extended class.
- 2. That staff apply the physical device in accordance with any instructions specified by the physician or registered nurse in the extended class.
- 3. That the resident is monitored while restrained at least every hour by a member of the registered nursing staff or by another member of staff as authorized by a member of the registered nursing staff for that purpose.
- 4. That the resident is released from the physical device and repositioned at least once every two hours. (This requirement does not apply when bed rails are being used if the resident is able to reposition himself or herself.)
- 5. That the resident is released and repositioned any other time when necessary based on the resident's condition or circumstances.
- 6. That the resident's condition is reassessed and the effectiveness of the restraining evaluated only by a physician, a registered nurse in the extended class attending the resident or a member of the registered nursing staff, at least every eight hours, and at any other time when necessary based on the resident's condition or circumstances. O. Reg. 79/10, s. 110 (2).

Findings/Faits sayants:

1. May 16, 2011 - 11:51 - The restraint record for one resident had been completed for the day when viewed at 1030 hrs.

Issued on this 19th day of May, 2011

Sandra Figur #190

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

Page 2 of 2