

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

Original Public Report

Report Issue Date: December 14, 2023	
Inspection Number: 2023-1354-0004	
Inspection Type: Proactive Compliance Inspection	
Licensee: Axium Extendicare LTC II LP, by its general partners Extendicare LTC Managing II GP Inc. and Axium Extendicare LTC II GP Inc.	
Long Term Care Home and City: Elginwood, Richmond Hill	
Lead Inspector Ana Best (741722)	Inspector Digital Signature
Additional Inspector(s) Deborah Nazareth (741745)	

INSPECTION SUMMARY

<p>The inspection occurred onsite on the following date(s): November 29 and 30, December 1, 4 - 7, 2023.</p> <p>The following intake(s) were inspected:</p> <ul style="list-style-type: none"> Intake: #00102376 - related to a Proactive Compliance Inspection (PCI).

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

- Resident Care and Support Services
- Skin and Wound Prevention and Management
- Residents' and Family Councils

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

Food, Nutrition and Hydration
Medication Management
Infection Prevention and Control
Safe and Secure Home
Prevention of Abuse and Neglect
Quality Improvement
Residents' Rights and Choices
Pain Management
Falls Prevention and Management

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. 19

Windows

s. 19. Every licensee of a long-term care home shall ensure that every window in the home that opens to the outdoors and is accessible to residents has a screen and cannot be opened more than 15 centimetres (cm).

The licensee has failed to ensure that every window in the home that opens to the outdoors and is accessible to residents has a screen and cannot be opened more than 15 cm.

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

Rationale and Summary

Four residents' rooms in different home units were chosen for observation as part of a Proactive Compliance Inspection (PCI).

The Environmental Services Manager (ESM) measured the windows' opening space from the inside part of the window trim to the window sash. The windows' screens were in place. In one of the rooms, the left horizontal sliding window's opening measured 20 cm. The ESM indicated the window's stopper was missing a screw. Staff confirmed all windows' opening space should have measured no more than 15 cm.

The ESM notified the maintenance staff, and the window was fixed with in 15 minutes from the initial observation and measurement.

There was no risk to the resident as staff responded promptly with corrective measures.

Sources: Observations and interview with ESM. [741722]

Date Remedy Implemented: November 29, 2023

NC #002 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:

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

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

The licensee failed to ensure that the complete and most current version of the visitor policy was posted in the home.

Rationale and Summary

An initial tour of the LTCH was conducted as part of a PCI. The required information to be posted was in a white binder labelled "Public Information", located at the main entrance. In the visitors' policy section there was a one- page document titled "Contractor and Visitor Safety Policy". The Executive Director (ED) confirmed this document was mostly for contractors and there was another visitors' policy that was missed to be included in the binder.

The ED followed up with the inspector 15 minutes later and provided the complete visitor policy titled "LTC-Visitors". These documents were posted on the same day.

Failing to post the visitor's policy posed no risks to the residents of the home.

Sources: Observations, the home's Visitors' policy and Contractor and Visitor Safety policy, and interview with the ED. [741722]

Date Remedy Implemented: November 30, 2023