



**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 sous la
Loi de 2007 sur les foyers de
soins de longue durée**

**Long-Term Care Homes Division
Long-Term Care Inspections Branch**

**Division des foyers de soins de
longue durée
Inspection de soins de longue durée**

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Public Copy/Copie du public

Report Date(s) / Date(s) du rapport	Inspection No / No de l'inspection	Log # / No de registre	Type of Inspection / Genre d'inspection
May 29, 2018	2018_737640_0012	005215-18	Complaint

Licensee/Titulaire de permis

Extendicare (Canada) Inc.
3000 Steeles Avenue East Suite 103 MARKHAM ON L3R 4T9

Long-Term Care Home/Foyer de soins de longue durée

Extendicare Brampton
7891 McLaughlin Road BRAMPTON ON L6Y 5H8

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

HEATHER PRESTON (640)

Inspection Summary/Résumé de l'inspection



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

This inspection was conducted on the following date(s): May 7, 8, 9, 10, 11, 14, 15, 16, 22 and 23, 2018

This inspection was conducted concurrently with Complaint Inspection #2018_737640_0014 and Critical Incident Inspection #2018_737640_0013.

During the course of the inspection, the Long-Term Care Homes Inspector toured the home, observed resident care, met with staff, residents and families, reviewed policy, procedure and clinical records.

During the course of the inspection, the inspector(s) spoke with Residents, Family members, Substitute Decision Makers (SDM), Personal Support Workers (PSW), Registered Practical Nurses (RPN), Registered Nurses (RN), Physiotherapy (PT), Clinical Resource Nurse, Resident Assessment Instrument (RAI) Coordinator, Wound Care Nurse, Fall Prevention Lead, Behaviour Support Ontario (BSO) Lead, Director of Care (DOC), the Administrator, ACE and the CW LHIN.

**The following Inspection Protocols were used during this inspection:
Admission and Discharge**

During the course of this inspection, Non-Compliances were issued.

1 WN(s)

1 VPC(s)

0 CO(s)

0 DR(s)

0 WAO(s)



NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

Legend	Legendé
WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order	WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités
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).	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.
The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.	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 LTCHA, 2007 S.O. 2007, c.8, s. 44. Authorization for admission to a home



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Specifically failed to comply with the following:

s. 44. (7) The appropriate placement co-ordinator shall give the licensee of each selected home copies of the assessments and information that were required to have been taken into account, under subsection 43 (6), and the licensee shall review the assessments and information and shall approve the applicant's admission to the home unless,

(a) the home lacks the physical facilities necessary to meet the applicant's care requirements; 2007, c. 8, s. 44. (7).

(b) the staff of the home lack the nursing expertise necessary to meet the applicant's care requirements; or 2007, c. 8, s. 44. (7).

(c) circumstances exist which are provided for in the regulations as being a ground for withholding approval. 2007, c. 8, s. 44. (7).

Findings/Faits saillants :



1. The licensee failed to take into account the assessments and information under subsection 43 (6), and approve an applicant's admission to the home unless: a) the home lacked the physical facilities necessary to meet the applicant's care requirements.

As a result of the complaint inspection related to refusal of admission of applicant #001, the Long-Term Care Home (LTCH) Inspector requested a copy of the home's refusal to admit letter sent to the applicant. The Director of Care (DOC), did not have a copy of the letter but did obtain a copy from their contact at the Central West Local Health Integration Network (CW LHIN).

Applicant #001 had been deemed eligible for admission to long-term care by a Placement Coordinator at the CW LHIN in November 2016, and had applied to Extencicare Brampton for admission at that time.

According to the complainant, the applicant did exhibit responsive behaviour and had other medical conditions.

On a specified date in November, 2016, the home sent a letter of refusal to admit to the applicant, stating "the home lacked the physical facilities necessary to meet the applicant's care requirements".

The DOC did not have a file or copy of the original application package and was unable to provide detailed explanation of the refusal as to how the physical facility was unable to meet the needs of the applicant.

During an interview with the DOC, the LTCH Inspector confirmed that, at the time of the application, the home had a full-time Behaviour Support Ontario (BSO) Personal Support Worker (PSW) and a fully functioning "WanderGuard" alarm system throughout the building.

The LTCH Inspector reviewed with the DOC that the home had access to High Intensity Needs (HIN) funding from the Ministry of Health and Long Term Care (MOHLTC) wherein funds could be made available for staffing needs related to the care of the applicant

The DOC acknowledged the refusal to admit applicant #001, however was not able to validate the legislative rationale for the refusal used in the letter. [s. 44. (7) (a)]



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Additional Required Actions:

VPC - pursuant to the Long-Term Care Homes Act, 2007, S.O. 2007, c.8, s.152(2) the licensee is hereby requested to prepare a written plan of correction for achieving compliance the licensee must take into account the assessments and information under subsection 43 (6), and approve an applicant's admission to the home unless: a) the home lacked the physical facilities necessary to meet the applicant's care requirements, to be implemented voluntarily.

Issued on this 27th day of June, 2018

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

Original report signed by the inspector.