



Ministry of Health and  
Long-Term Care

Ministère de la Santé et des  
Soins de longue durée

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

Rapport d'inspection sous la  
Loi de 2007 sur les foyers de  
soins de longue durée

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  
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### Public Copy/Copie du public

Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Dec 19, 2013	2013_207147_0027	H-000619- 13	Complaint

#### Licensee/Titulaire de permis

EXTENDICARE (CANADA) INC.  
3000 STEELES AVENUE EAST, SUITE 700, MARKHAM, ON, L3R-9W2

#### 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

LALEH NEWELL (147)

#### 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): November 6,7 and 8,  
2013

H-000619-13

During the course of the inspection, the inspector(s) spoke with Administrator, Director of Care (DOC), Clinical Resource Nurse, Social Worker, Resident Assessment Instrument (RAI) Coordinator, Registered staff and Personal Support Workers (PSW)

During the course of the inspection, the inspector(s) Reviewed resident clinical records, toured the home, observed care on the units, reviewed the home's policy and procedure related to Urinary Catheterization and Routine Catheter Care.

The following Inspection Protocols were used during this inspection:  
Continence Care and Bowel Management

Prevention of Abuse, Neglect and Retaliation

Findings of Non-Compliance were found during this inspection.

#### NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

Legend	Legendé
WN – Written Notification	WN – Avis écrit
VPC – Voluntary Plan of Correction	VPC – Plan de redressement volontaire
DR – Director Referral	DR – Aiguillage au directeur
CO – Compliance Order	CO – Ordre de conformité
WAO – Work and Activity Order	WAO – Ordres : travaux et activités



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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. 8. Policies, etc., to be followed, and records**

**Specifically failed to comply with the following:**

**s. 8. (1) Where the Act or this Regulation requires the licensee of a long-term care home to have, institute or otherwise put in place any plan, policy, protocol, procedure, strategy or system, the licensee is required to ensure that the plan, policy, protocol, procedure, strategy or system,**

**(a) is in compliance with and is implemented in accordance with applicable requirements under the Act; and O. Reg. 79/10, s. 8 (1).**

**(b) is complied with. O. Reg. 79/10, s. 8 (1).**

**Findings/Faits saillants :**



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1. The licensee failed to ensure where the Act or this Regulation requires the licensee of a long-term care home to have, institute or otherwise put in place any plan, policy, protocol, procedure, strategy or system, the licensee is required to ensure that the plan, policy, protocol, procedure, strategy or system is complied with.

Review of the home's policy and procedure - Urinary Catheterization, Policy number 05-04-11 last reviewed on February 2006 states that a physician's order must be received for the type, size and frequency of catheterization or change of catheter.

Interview with the registered staff and the clinical resource nurse and review of residents #101, #102 and #103 clinical records indicate that the home does not obtain physician's orders for the type and size of the catheter used for the residents. [s.8(1)b]

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**WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 221. Additional training — direct care staff**

**Specifically failed to comply with the following:**

**s. 221. (1) For the purposes of paragraph 6 of subsection 76 (7) of the Act, the following are other areas in which training shall be provided to all staff who provide direct care to residents:**

**3. Continence care and bowel management. O. Reg. 79/10, s. 221 (1).**

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**Findings/Faits saillants :**

1. The licensee failed to ensure for the purposes of paragraph 6 of subsection 76 (7) of the Act, the following are other areas in which training shall be provided to all staff who provide direct care to residents related to Continence care and bowel management.

Interview with the registered staff and clinical resource nurse and review of the home's training schedule, indicates that the home has not provided all staff who provide direct care to resident related to bladder continence care specifically including catheterization of residents. [s. 221. (1) 3.]



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Issued on this 19th day of December, 2013

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

Kate Newell