



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
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Division de la responsabilisation et de la performance du système de santé
Direction de l'amélioration de la performance et de la conformité

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Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Jul 30, 2013	2013_228172_0024	L-000464- 13, L- 000492-13 L-000498-13	Critical Incident System

Licensee/Titulaire de permis

EXTENDICARE TORONTO INC
3000 STEELES AVENUE EAST, SUITE 700, MARKHAM, ON, L3R-9W2

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

EXTENDICARE LONDON
860 WATERLOO STREET, LONDON, ON, N6A-3W6

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

JOAN WOODLEY (172)

Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct a Critical Incident System inspection.

This inspection was conducted on the following date(s): July 29, 2013

During the course of the inspection, the inspector(s) spoke with the Acting Director of Care, 1 Registered Practical Nurse and 3 Personal Support Workers.

During the course of the inspection, the inspector(s) made observations, reviewed health care records and policies.

The following Inspection Protocols were used during this inspection:



Personal Support Services
Prevention of Abuse, Neglect and Retaliation
Safe and Secure Home

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

Table with 2 columns: Legend and Legendé. Legend includes WN (Written Notification), VPC (Voluntary Plan of Correction), DR (Director Referral), CO (Compliance Order), WAO (Work and Activity Order). Legendé includes Avis écrit, Plan de redressement volontaire, Aiguillage au directeur, Ordre de conformité, Ordres : travaux et activités. The table also contains a detailed description of non-compliance with requirements under the Long-Term Care Homes Act, 2007 (LTCHA) and its translation into French under the Loi de 2007 sur les foyers de soins de longue durée (LFSLD).

WN #1: The Licensee has failed to comply with O.Reg 79/10, s. 30. General requirements



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Specifically failed to comply with the following:

s. 30. (2) The licensee shall ensure that any actions taken with respect to a resident under a program, including assessments, reassessments, interventions and the resident's responses to interventions are documented. O. Reg. 79/10, s. 30 (2).

Findings/Faits saillants :

1. The Licensee has failed to ensure any actions taken with respect to a resident under a program, including assessments, reassessments, interventions and the resident's response to interventions are documented.

Review of the progress notes revealed staff were to document on all shifts a specific detail about a resident

Care plan review revealed this intervention was not included.

Staff interview with Personal Support Workers revealed 1 knew about the intervention and the other Personal Support Worker did not.

Staff interview with the Acting Director of Care confirmed this intervention should be on the care plan. [s. 30. (2)]

WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 230. Emergency plans

Specifically failed to comply with the following:

s. 230. (6) The licensee shall ensure that the emergency plans for the home are evaluated and updated at least annually, including the updating of all emergency contact information. O. Reg. 79/10, s. 230 (6).

Findings/Faits saillants :



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1. The Licensee has failed to ensure the home's emergency plans are updated at least annually.

Review of EMER-03-09-01 policy revealed it was Implemented July 2003 and reviewed July 2003. This policy was the one in effect at the time of the incident.

The Acting Director of Care shared the home had just recently received a new policy, reference EMER-11-01-01 effective date March 2013 which will replace EMER-03-09-01. The home has not implemented it or provided training on it yet. [s. 230. (6)]

Issued on this 30th day of July, 2013

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

Joan. L. Woodley RN.