



**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  
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| <b>Report Date(s) /<br/>Date(s) du Rapport</b> | <b>Inspection No /<br/>No de l'inspection</b> | <b>Log # /<br/>Registre no</b> | <b>Type of Inspection /<br/>Genre d'inspection</b> |
|--|---|--------------------------------|--|
| Jul 24, 2014                                   | 2014_237500_0013                              | T-650-14                       | Follow up  |

**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 ROUGE VALLEY  
551 Conlins Road, TORONTO, ON, M1B-5S1

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

NITAL SHETH (500)

**Inspection Summary/Résumé de l'inspection**

**The purpose of this inspection was to conduct a Follow up inspection.**

**This inspection was conducted on the following date(s): July 7 and 8, 2014.**

**During the course of the inspection, the inspector(s) spoke with the administrator, director of care (DOC), food service manager (FSM), registered nursing staff, personal support worker (PSW).**

**During the course of the inspection, the inspector(s) observed residents' area and reviewed residents' records, policy and procedures, and staff training records.**

**The following Inspection Protocols were used during this inspection:  
Nutrition and Hydration**



Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

|   |  |
|---|--|
| <p>Legend</p> <p>WN – Written Notification<br/> VPC – Voluntary Plan of Correction<br/> DR – Director Referral<br/> CO – Compliance Order<br/> WAO – Work and Activity Order</p>  | <p>Legendé</p> <p>WN – Avis écrit<br/> VPC – Plan de redressement volontaire<br/> DR – Aiguillage au directeur<br/> CO – Ordre de conformité<br/> WAO – Ordres : travaux et activités</p>  |
| <p>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.)</p> <p>The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.</p> | <p>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.</p> <p>Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.</p> |

WN #1: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 76. Training

Specifically failed to comply with the following:

s. 76. (4) Every licensee shall ensure that the persons who have received training under subsection (2) receive retraining in the areas mentioned in that subsection at times or at intervals provided for in the regulations. 2007, c. 8, s. 76. (4).

Findings/Faits saillants :



1. The licensee failed to ensure that the persons who have received training under subsection (2)10. policies of the licensee, that are relevant to the persons' responsibilities, specifically "Food and Fluid Intake Monitoring" receive retraining at times or at intervals provided for in the regulations.

A review of a compliance plan submitted by the licensee in order to achieve compliance with s.68 (2), for inspection #2014\_108110\_006 indicates that, the licensee will provide retraining to direct care staff on the policy on food and fluid intake monitoring, for measuring, recording, reviewing the fluid intake, identifying high risk residents and initiating referral to the dietitian when resident's fluid intake is below the estimated fluid requirements, by June 13, 2014.

A review of the staff training record revealed that only 49% of the staff received the training by July 8, 2014.

Interview with the DOC confirmed that the home is continuing to provide training to the direct care staff as not all direct care staff received training on the areas mentioned above. [s. 76. (4)]

***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 to ensure that the persons who have received training under subsection (2)10. policies of the licensee, that are relevant to the persons' responsibilities, specifically "Food and Fluid Intake Monitoring" receive retraining at times or at intervals provided for in the regulations, to be implemented voluntarily.***

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**THE FOLLOWING NON-COMPLIANCE AND/OR ACTION(S)/ORDER(S) HAVE BEEN COMPLIED WITH/  
LES CAS DE NON-RESPECTS ET/OU LES ACTIONS ET/OU LES ORDRES SUIVANT SONT MAINTENANT CONFORME AUX EXIGENCES:**

**COMPLIED NON-COMPLIANCE/ORDER(S)  
REDRESSEMENT EN CAS DE NON-RESPECT OU LES ORDRES**



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| REQUIREMENT/<br>EXIGENCE  | TYPE OF ACTION/<br>GENRE DE MESURE | INSPECTION # /<br>NO DE L'INSPECTION | INSPECTOR ID #/<br>NO DE L'INSPECTEUR |
|---------------------------|------------------------------------|--------------------------------------|---------------------------------------|
| O.Reg 79/10 s. 68.<br>(2) | CO #001                            | 2014_108110_0006                     | 500                                   |

Issued on this 24th day of July, 2014

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

Nital Sheth.