

Ministère de la Santé et des Soins de longue durée

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

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

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

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Public Copy/Copie du public

Report Date(s) / Date(s) du Rapport No de l'inspection

Inspection No /

Loa #/ No de registre

Type of Inspection / **Genre d'inspection**

Sep 17, 2019

2019_563670_0035 017598-19

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 Southwood Lakes 1255 North Talbot Road WINDSOR ON N9G 3A4

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

DEBRA CHURCHER (670), TERRI DALY (115)

Inspection Summary/Résumé de l'inspection



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the Long-Term Care Homes Act, 2007 Rapport d'inspection prévue sous la Loi de 2007 sur les foyers de soins de longue durée

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

This inspection was conducted on the following date(s): September 17, 2019.

The purpose of this inspection was to inspect Complaint Log# 017598-19 related to the management of complaints and alleged retaliation.

During the course of the inspection, the inspector(s) spoke with the Administrator, the Director of Care, a Social Worker, one Office Administrator and three family members.

During the course of this inspection the Inspectors observed the overall maintenance and cleanliness of the home, staff to resident interactions, reviewed relevant clinical records, reviewed relevant internal documentation and reviewed relevant policies and procedures.

The following Inspection Protocols were used during this inspection: Family Council Reporting and Complaints Residents' Council

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

- 2 WN(s)
- 2 VPC(s)
- 0 CO(s)
- 0 DR(s)
- 0 WAO(s)



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NON-COMPLIANCE / NON - RESPECT DES EXIGENCES		
Legend	Légende	
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. 57. Powers of Residents' Council

Specifically failed to comply with the following:

s. 57. (2) If the Residents' Council has advised the licensee of concerns or recommendations under either paragraph 6 or 8 of subsection (1), the licensee shall, within 10 days of receiving the advice, respond to the Residents' Council in writing. 2007, c. 8, s. 57.(2).

Findings/Faits saillants:



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1. The licensee has failed to ensure that they respond in writing within 10 days of receiving Residents' Council advice related to concerns or recommendations.

A review of the Residents' Council meeting minutes for the past six months, April 2019 to August 2019 showed that there were four concerns identified that were not responded to within 10 days of being received, and one concern that had not been responded to at all.

August 1, 2019 Resident Council Meeting Minutes under the Concern Response Review revealed:

The hallways are dirty.

They are not being mopped properly.

The handrails also need to be cleaned.

The noise continues in Tecumseh.

Response attached August 22, 2019 which was greater than 10 days.

June 5, 2019, Resident Council Meeting Minutes under the Concern Response Review revealed:

Resident are being put too bed too early because of short staffing.

There is still screaming in Tecumseh House.

How often are hand rails being cleaned?

Response attached June 17, 2019 which was greater than 10 days.

During an interview with the Resident Council representative #001 they were asked; When the Resident's Council brings forward any recommendations or concerns how does the home respond?

The Resident Council representative #001 stated that the home's council liaison/representative "usually talks to us at the next meeting".

They were also asked;

Does the home or Administrator ever respond in writing?

The Resident Council representative #001 said "Sometimes but not always and if they do it is put on the wall at the front."

A review of the home's policy Residents' Council OP-02-01-18 last updated April 2017 under procedures stated:

Administrator/Designate

11. Respond in writing within 10 days of receiving the concern or a suggestion from the Residents Council.



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An interview with the homes Residents' Council liaison/representative #105, indicated when concerns were brought forward at the meeting they completed an Extendicare Southwood Lakes Residents' Council Response form that would then be forwarded to the Administrator for completion. The Residents' Council liaison/representative #105 noted that there was no response for the August 1, 2019 Resident Council concern about the dirty hallways and handrails, and responses greater than 10 days for three other concerns from the June 5, 2019 meeting and one from the August 1, 2019 meeting.

During an interview with the Administrator #101, they indicated that these responses were not in compliance with the homes policy or the legislation and should have been responded to in writing within 10 days.

The licensee has failed to ensure that they respond in writing within 10 days of receiving Residents' Council advice related to concerns or recommendations. [s. 57. (2)]

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 if the Residents' Council has advised the licensee of concerns or recommendations under either paragraph 6 or 8 of subsection (1), the licensee shall, within 10 days of receiving the advice, respond to the Residents' Council in writing, to be implemented voluntarily.

WN #2: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 60. Powers of Family Council

Specifically failed to comply with the following:

s. 60. (2) If the Family Council has advised the licensee of concerns or recommendations under either paragraph 8 or 9 of subsection (1), the licensee shall, within 10 days of receiving the advice, respond to the Family Council in writing. 2007, c. 8, s. 60. (2).

Findings/Faits saillants:



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1. The licensee has failed to ensure that they respond in writing within 10 days of receiving Family Council advice related to concerns or recommendations.

A review of the Family Council meeting minutes for 2019 showed that there were three concerns identified, that were not responded to at all.

May 22, 2019 minutes showed:

Concerns noted in minutes:

"Discussion followed about behaviour problems of a resident.

Does our loved one have any rights, how concerned should the family members be? Write more letters?

No response of follow up was noted.

March 27, 2019

New Business noted.

9. Family Council Members concerned about the following hazards:

Leaking ceiling in Walkerville Dining Room

Strips of siding blew off one wall and concerned about water will get inside and cause more damage.

No response or follow up was noted.

During a telephone interview with a Family Council representative #106 they were asked if they recalled from the May 22, 2019 Family Council meeting if a concern had been identified related to concerns about a resident with behaviours and the rights of other residents. The Family Council representative #106 did recall this concern and stated that it was an "ongoing concern that had had not been resolved or addressed at the home level."

During a telephone interview with a Family Council representative #107 they were asked if they recalled from the March 27, 2019 Family Council meeting if a concern had been identified related to a leaking ceiling in the Walkerville dining room and siding that had blown off the side of the building, and if these concerns had been followed up in writing by the licensee within 10 days. The Family Council representative #107 indicated that they were not aware of the responsibilities of the licensee or that any follow up had been done.

A review of the home's policy Family Council OP-02-01-17 last updated April 2017 under procedures stated:



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Administrator/Designate

11. Respond in writing within 10 days of receiving the concern or suggestion from the Family Council.

An interview with the homes Family Council liaison/representative #105, indicated when concerns were brought forward at the meeting the council would complete an Extendicare Southwood Lakes Residents' Council Response form, but that the membership had changed over the last little while. A review of the minutes from March 27, 2019 and May 22, 2019 related to the concerns was reviewed, the Family Council liaison/representative #105 was asked if they felt these were things that should be followed up as a concern and they agreed that yes they should be.

The Family Council liaison/representative #105 was asked who reviewed the Family Council meeting minutes and they responded "the Administrator".

During an interview with the Administrator #101, they indicated that these responses were not in compliance with the homes policy or the legislation and should have been responded to in writing within 10 days.

The licensee has failed to ensure that they respond in writing within 10 days of receiving Family Council advice related to concerns or recommendations. [s. 60. (2)]

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 if the Family Council has advised the licensee of concerns or recommendations under either paragraph 8 or 9 of subsection (1), the licensee shall, within 10 days of receiving the advice, respond to the Family Council in writing, to be implemented voluntarily.



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Issued on this 17th day of September, 2019

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

Original report signed by the inspector.