



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

**Rapport d'inspection
prévue le *Loi de 2007
les foyers de soins de
longue durée***

Ministry of Health and Long-Term Care

Health System Accountability and Performance Division
Performance Improvement and Compliance Branch

**Ministère de la Santé et des Soins de
longue durée**

Division de la responsabilisation et de la performance du
système de santé
Direction de l'amélioration de la performance et de la
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			<input type="checkbox"/> Licensee Copy/Copie du Titulaire <input checked="" type="checkbox"/> Public Copy/Copie Public
Date(s) of inspection/Date de l'inspection	Inspection No/ d'inspection	Type of Inspection/Genre d'Inspection	
February 15, 2011	2011_115_2904_15Feb113702	Complaint L-00132	
Licensee/Titulaire Extendicare (Canada) Inc., 3000 Steeles Ave. E., Suite 700, Markham, ON., L3R 9W2			
Long-Term Care Home/Foyer de soins de longue durée Extendicare Tecumseh, 2475 St. Alphonse Street, Tecumseh, ON., N8N 2X2			
Name of Inspector(s)/Nom de l'inspecteur(s) Terri Daly #115			
Inspection Summary/Sommaire d'inspection			
The purpose of this inspection was to conduct a complaint inspection related to care and services.			
During the course of the inspection, the inspector spoke with 1 Registered Practical Nurse, 1 Personal Support Worker, the Food Services Supervisor and 1 resident.			
During the course of the inspection, the inspector reviewed the clinical record of 1 resident, and observed lunch meal service.			
The following Inspection Protocols were used during this inspection: Continence Care and Bowel Management Inspection Protocol Personal Support Services Inspection Protocol			
<input checked="" type="checkbox"/> Findings of Non-Compliance were found during this inspection. The following action was taken:			
2 WN 2 VPC			



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NON- COMPLIANCE / (Non-respectés)

Definitions/Définitions

WN – Written Notifications/Avis écrit

VPC – Voluntary Plan of Correction/Plan de redressement volontaire

DR – Director Referral/Référageur envoyé

CO – Compliance Order/Ordres de conformité

WAO – Work and Activity Order/Ordres: travaux et activités

The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.

Le suivant constituer un avis d'écrit de l'exigence prévue le paragraphe 1 de section 152 de les foyers de soins de longue durée.

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.)

Non-respect avec les exigences sur le *Loi de 2007 les foyers de soins de longue durée* à trouvé. (Une exigence dans le loi comprend les exigences contenues dans les points énumérés dans la définition de "exigence prévue par la présente loi" au paragraphe 2(1) de la loi.

WN #1: The Licensee has failed to comply with LTCHA, 2007, S.O. 2007, c.8, s.6(1)(c)

Every licensee of a long-term care home shall ensure that there is a written plan of care for each resident that sets out, clear directions to staff and others who provide direct care to the resident. 2007, c. 8, s. 6 (1).

Findings:

On February 15, 2011 a review of the plan of care indicates that it does not set out clear directions to staff or identify goals and interventions related to the resident's incontinence.

Inspector ID #: 115

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 a written plan of care that sets out clear directions to staff providing care, is identified, to be implemented voluntarily.

WN #2: The Licensee has failed to comply with O.Reg. 79/10, s. 8(1) (b)

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,
(b) is complied with

Findings:

On February 15, 2011 a review of the homes Bladder and Bowel Management policy and procedure in relation to the resident's plan of care was conducted. The home's policy 05-04-07 indicates that residents will have individualized toileting schedules established based on their elimination pattern as assessed on admission, quarterly and with significant change in condition. The resident has had a significant change in condition however, has not been assessed, nor does the plan of care have an individualized toileting schedule identified.

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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 to ensure that the homes Bladder and Bowel Management policy and procedure for this resident is complied with, to be implemented voluntarily.

Signature of Licensee or Representative of Licensee Signature du Titulaire du représentant désigné	Signature of Health System Accountability and Performance Division representative/Signature du (de la) représentant(e) de la Division de la responsabilisation et de la performance du système de santé.
Title:	Date:

Date of Report: March 29, 2011