

Ministry of Long-Term Care

Long-Term Care Operations Division
Long-Term Care Inspections Branch

North District

159 Cedar St, Suite 403
Sudbury, ON, P3E 6A5
Telephone: (800) 663-6965

Public Report

Report Issue Date: December 17, 2024

Inspection Number: 2024-1125-0005

Inspection Type:

Critical Incident
Follow up

Licensee: Extendicare (Canada) Inc.

Long Term Care Home and City: Extendicare Tri-Town, Haileybury

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): December 10-13, 2024.

The following intakes were inspected:

- One intake related to a resident who fell, and
- One intake for a second follow-up to a Compliance Order related to hot water temperatures.

Previously Issued Compliance Order(s)

The following previously issued Compliance Order(s) were found to be in compliance:

Order #001 from Inspection #2024-1125-0002 related to O. Reg. 246/22, s. 96 (2) (k)

The following **Inspection Protocols** were used during this inspection:

- Safe and Secure Home
- Infection Prevention and Control
- Falls Prevention and Management

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INSPECTION RESULTS

WRITTEN NOTIFICATION: Plan of care

NC #001 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: FLTCA, 2021, s. 6 (7)

Plan of care

s. 6 (7) The licensee shall ensure that the care set out in the plan of care is provided to the resident as specified in the plan.

The licensee has failed to ensure that a resident was provided the care they required when a Personal Support Worker (PSW) did not provide the correct fall intervention when the resident was in bed.

Sources: Inspector's observations, the home's policy titled "Plan of Care" updated November 2023, interview with the Assistant Director of Care (ADOC) and other staff.

WRITTEN NOTIFICATION: Falls prevention and management

NC #002 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 54 (2)

Falls prevention and management

s. 54 (2) Every licensee of a long-term care home shall ensure that when a resident has fallen, the resident is assessed and that a post-fall assessment is conducted using a clinically appropriate assessment instrument that is specifically designed for falls. O. Reg. 246/22, s. 54 (2); O. Reg. 66/23, s. 11.

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The licensee has failed to ensure that a post-fall assessment was conducted using a clinically appropriate assessment instrument for a resident after they had fallen.

Sources: A Critical Incident (CI) report, a resident's health care records, the home's policy titled "Falls Prevention and Management Program" last reviewed March 2023, interview with the Director of Care (DOC) and other staff.

NOTICE OF RE-INSPECTION FEE Pursuant to section 348 of O. Reg. 246/22 of the Fixing Long-Term Care Act, 2021, the licensee is subject to a re-inspection fee of \$500.00 to be paid within 30 days from the date of the invoice.

A re-inspection fee applies since this is, at minimum, the second follow-up inspection to determine compliance with the following Compliance Order(s) under s. 155 of the FLTCA, 2021, and/or s. 153 of the LTCHA, 2007.

Second follow-up to order #001 from 2024-1125-0002 related to hot water temps

Licensees must not pay a Re-Inspection Fee from a resident-care funding envelope provided by the Ministry [i.e., Nursing and Personal Care (NPC); Program and Support Services (PSS); and Raw Food (RF)]. By submitting a payment to the Minister of Finance, the licensee is attesting to using funds outside a resident-care funding envelope to pay the Re-Inspection Fee.