

**Inspection Report under
the Long-Term Care
Homes Act, 2007****Rapport d'inspection en vertu de
la Loi de 2007 sur les foyers de
soins de longue durée****Long-Term Care Operations Division
Long-Term Care Inspections Branch****Division des opérations relatives aux
soins de longue durée
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Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / No de registre	Type of Inspection / Genre d'inspection
May 25, 2021	2021_784762_0012	004972-21, 005719- 21, 006411-21	Complaint

Licensee/Titulaire de permisMarkhaven, Inc.
54 Parkway Avenue Markham ON L3P 2G4**Long-Term Care Home/Foyer de soins de longue durée**Markhaven
54 Parkway Avenue Markham ON L3P 2G4**Name of Inspector(s)/Nom de l'inspecteur ou des inspecteurs**

MOSES NEELAM (762)

Inspection Summary/Résumé de l'inspection

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

This inspection was conducted on the following date(s): May 5-7, 10, 2021

The following intake was completed in this complaint inspection:

Log related to resident plan of care, involvement of Substitute decision maker in resident care, falls, interventions for responsive behaviors, pain, toileting and transferring

Log related to resident plan of care, involvement of Substitute decision maker in resident care, falls, interventions for responsive behaviors, pain, toileting and transferring

Log in relation to infection control

During the course of the inspection, the inspector(s) spoke with The Director of Care (DOC), Registered Practical Nurses(RPNs), Housekeeping Staff and Personal Support workers (PSWs) .

During the course of this inspection the inspector observed infection prevention and control practices, resident and staff interactions, and conducted observation on resident home areas.

The following Inspection Protocols were used during this inspection:

Continence Care and Bowel Management

Dignity, Choice and Privacy

Falls Prevention

Infection Prevention and Control

Personal Support Services

Responsive Behaviours

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

2 WN(s)

1 VPC(s)

0 CO(s)

0 DR(s)

0 WAO(s)

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

<p>Legend</p> <p>WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order</p>	<p>Légende</p> <p>WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité 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 O.Reg 79/10, s. 36. Every licensee of a long-term care home shall ensure that staff use safe transferring and positioning devices or techniques when assisting residents. O. Reg. 79/10, s. 36.

Findings/Faits saillants :

1. The licensee has failed to ensure that staff use safe transferring and positioning devices or techniques when assisting resident #001.

A review of resident #001's electronic documentation indicated that the resident had been given care while on a mechanical lift. PSW #103 indicated that this was helpful for this resident. DOC #102, indicated that this practice was unsafe and required that all residents in the home be given care while the resident was not on a lift and indicated, if this was an intervention that would be used in the home, it would require an assessment by the interdisciplinary team. As there wasn't an interdisciplinary assessment, this put the resident at risk for injury.

Sources: Progress notes; Interviews with PSW #103 and DOC #102 [s. 36.]

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 staff use safe transferring and positioning devices or techniques when assisting residents, to be implemented voluntarily.

WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 8. Policies, etc., to be followed, and records

Specifically failed to comply with the following:

s. 8. (1) 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,

(a) is in compliance with and is implemented in accordance with applicable requirements under the Act; and O. Reg. 79/10, s. 8 (1).

(b) is complied with. O. Reg. 79/10, s. 8 (1).

Findings/Faits saillants :

1. The licensee failed to ensure the falls management programs policy included in the required falls prevention program was complied with, for resident #001.

O.Reg 79/10 r.48 (1) 1, requires a falls prevention and management program to reduce the incidence of falls and the risk of injury.

The Long-Term Care Home's falls prevention policy indicates that the registered staff are to fill out forms after a fall. A review of the forms for resident #001, indicated that there was missing documentation multiple dates and times. As a result, the resident was at a risk of harm for the signs and symptoms of a injury being missed.

Sources: Policy with the title Head Injury routine; interview with DOC #102 [s. 8. (1) (a),s. 8. (1) (b)]

Issued on this 26th day of May, 2021

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

Original report signed by the inspector.