

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

Division des foyers de soins de
longue durée
Inspection de 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
Aug 28, 2019	2019_626501_0018	032787-18	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 Scarborough
3830 Lawrence Avenue East SCARBOROUGH ON M1G 1R6

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

SUSAN SEMEREDY (501)

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): Off-site inspection was completed August 7, 8, 9, 19 and 20, 2019.

During the course of the inspection, the inspector(s) spoke with the home's social worker and senior manager from Central East Local Health Integrated Network (CELHIN).

During the course of the inspection the inspector reviewed admission documents sent to Extendicare Scarborough regarding applicant #001.

**The following Inspection Protocols were used during this inspection:
Admission and Discharge**

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

1 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 LTCHA, 2007 S.O. 2007, c.8, s. 44. Authorization for admission to a home

Specifically failed to comply with the following:

s. 44. (7) The appropriate placement co-ordinator shall give the licensee of each selected home copies of the assessments and information that were required to have been taken into account, under subsection 43 (6), and the licensee shall review the assessments and information and shall approve the applicant's admission to the home unless,

(a) the home lacks the physical facilities necessary to meet the applicant's care requirements; 2007, c. 8, s. 44. (7).

(b) the staff of the home lack the nursing expertise necessary to meet the applicant's care requirements; or 2007, c. 8, s. 44. (7).

(c) circumstances exist which are provided for in the regulations as being a ground for withholding approval. 2007, c. 8, s. 44. (7).

s. 44. (9) If the licensee withholds approval for admission, the licensee shall give to persons described in subsection (10) a written notice setting out,

(a) the ground or grounds on which the licensee is withholding approval; 2007, c. 8, s. 44. (9).

(b) a detailed explanation of the supporting facts, as they relate both to the home and to the applicant's condition and requirements for care; 2007, c. 8, s. 44. (9).

(c) an explanation of how the supporting facts justify the decision to withhold approval; and 2007, c. 8, s. 44. (9).

(d) contact information for the Director. 2007, c. 8, s. 44. (9).

Findings/Faits saillants :

1. The licensee has failed to ensure that the home approved the applicant's admission to the home unless the home lacked the physical facilities necessary to meet the applicant's care requirements or the staff of the home lacked the nursing expertise necessary to meet the applicant's care requirements.

Central East Local Health Integration Network (CELHIN) sent a copy of a letter that had been sent to applicant #001 to the Ministry of Long-Term Care (MLTC) indicating Extendicare Scarborough was denying admission. Review of this letter indicated it was written by the Long-Term Care (LTC) home's social worker (SW) #101 stating the home lacked the nursing expertise and physical environment to meet applicant #001's care needs.

During an interview with social worker #101, they indicated that the home could not manage the applicant's identified behaviours. As described in the letter sent to the applicant, the home's identified health support was only for those of a specified age and older. SW #101 explained that other community identified health support was available to residents but was off-site and if a resident chose not to take themselves to such a facility, the home would not be able to force them. SW #101 stated that there were incidents described in behaviour assessments that indicated the applicant was difficult to manage in previous settings. The SW did acknowledge they have the Behaviour Support Ontario (BSO) program in the home but indicated this was only for responsive behaviours related to dementia, not those related to identified health issues. The SW admitted the documentation did indicate the applicant was generally accepting of personal care and could be persuaded to comply.

The SW #101 further indicated the home did not have a locked unit and was concerned that if the applicant followed a visitor out of the home, they would be difficult to redirect. The SW admitted that wandering residents are currently managed in the home with wander-guards and having them reside on the second floor.

A copy of admission documents that were sent to the home was attained from CELHIN and reviewed. A review of a Placement Services Behavioural Assessment Tool and a discharge summary report from an identified hospital, indicated the applicant was not as described by the social worker. As well, the applicant had been receiving personal care from a CELHIN personal support worker (PSW) without issues.

During an interview with CELHIN senior manager (SM) #100, they indicated that the home did not have reasonable grounds to deny applicant #001's admission. SM #100 stated that the applicant did have a history of an identified illness but that it was manageable with medications and felt the applicant would best be suited to LTC where a stable environment would prompt the applicant to take their medications on a consistent basis. The SM described the resident as being easily re-directed and able to follow direction. As of an identified date, the applicant was accepted by another LTC home and the SM indicated this home had no issues with the admission.

Further interview with SM #100 indicated the home would be able to access community identified health outreach programs. The SM did acknowledge that an identified illness presents challenges for LTC homes but did not think it was a reason to refuse an applicant especially if they were assessed as being suitable by the placement co-ordinator.

The home failed to demonstrate how they lacked the physical facilities necessary to meet the applicant's care requirements or how the staff of the home lacked the nursing expertise necessary to meet the applicant's care requirements. [s. 44. (7)]

2. The licensee has failed to ensure that if the licensee withholds approval for admission, the licensee shall give to the applicant a written notice setting out a detailed explanation of the supporting facts, as they related both to the home and to the applicant's condition and requirements for care.

Central East Local Health Integration Network (CELHIN) sent a copy of a letter to the MLTC that had been sent to applicant #001 indicating Extedicare Scarborough was denying admission.

Review of this letter indicated it was written by the LTC home's social worker #101 indicating the home lacks the nursing expertise and physical environment to meet their care needs.

The letter described the applicant as having identified health issues and because the home's identified health support is only for those of a specified age and older, the applicant would not be eligible for such support. The letter does not indicate the resident's current symptoms or conditions that the home would not be able to manage.

The letter also indicated that due to wandering concerns, the home's team believed the applicant would best be supported in a secure unit. The letter does not indicate what type of wandering the applicant was currently displaying that was unmanageable by the home.

During a telephone interview, social worker #101 acknowledged that the letter written to the applicant did not include a description of supporting facts related to the applicant's condition.

The home withheld approval for admission of applicant #001 and failed to give the applicant a written notice setting out a detailed explanation of the supporting facts as they related to the home and to the applicant's condition and requirements for care. [s. 44. (9) (c)]

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 ensure that the home approved the applicant's admission to the home unless the home lacked the physical facilities necessary to meet the applicant's care requirements or the staff of the home lacked the nursing expertise necessary to meet the applicant's care requirements and shall give to the applicant a written notice setting out a detailed explanation of the supporting facts, as they related both to the home and to the applicant's condition and requirements for care, to be implemented voluntarily.

Issued on this 4th day of September, 2019

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

Original report signed by the inspector.