



**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

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

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Date(s) of inspection/Date de l'inspection	Inspection No/ d'inspection	Type of Inspection/Genre d'inspection
March 2, 2011	2011_111_2439_02Mar111529	Complaint (log# O-000107)

Licensee/Titulaire

Extendicare Central Ontario Inc. [a subsidiary of Extendicare (Canada) Inc.]
82 Park Road North
Oshawa, ON L1J 4L1

Long-Term Care Home/Foyer de soins de longue durée

Extendicare Oshawa
82 Park Road North,
Oshawa, ON L1J 4L1

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

Lynda Brown (#111)

Inspection Summary/Sommaire d'inspection

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

During the course of the inspection, the inspector spoke with: the resident, two Personal Support Workers (PSW's), one Registered Practical Nurse (RPN), the Director of Care (DOC) and the Administrator.

During the course of the inspection, the inspector: observation of resident care, reviewed resident health record

The following Inspection Protocols were used during this inspection: Reporting and Complaints, Skin and Wound Care.

Findings of Non-Compliance were found during this inspection. The following action was taken:

3 WN



NON-COMPLIANCE / (Non-respectés)

Definitions/Définitions

WN – Written Notifications/Avis écrit
 VPC – Voluntary Plan of Correction/Plan de redressement volontaire
 DR – Director Referral/Régisseur 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.

 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 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-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 O.Reg.79/10, 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 all applicable requirements under the Act;
 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, and
 (b) is complied with.

Findings:

Under O.Reg. 79/10, s.50(2)(b)(i)Every licensee of a long-term care home shall ensure that, a resident exhibiting altered skin integrity, including skin breakdown, pressure ulcers, skin tears or wounds, receives a skin assessment by a member of the registered nursing staff, using a clinically appropriate assessment instrument that is specifically designed for skin and wound assessment

The homes policy "Skin Tears-policy #03-06" indicates under procedures that the Registered Staff will:
 -assess the skin tear according to the degree of injury and using the definitions (categories); to initiate a wound care record; update the resident's plan of care with the location of the skin tear and interventions to minimize this from happening again and the frequency of the wound care.

An identified resident with skin break down did not have documentation completed according to the homes policy.

Inspector ID #: 111

WN #2: The Licensee has failed to comply with O.Reg. 79/10, s.50 (2) Every licensee of a long-term care home shall ensure that,
 (b) a resident exhibiting altered skin integrity, including skin breakdown, pressure ulcers, skin tears or wounds,

(i) receives a skin assessment by a member of the registered nursing staff, using a clinically appropriate assessment instrument that is specifically designed for skin and wound assessment

Findings:

An identified resident at risk for altered skin integrity did not receive a skin assessment using a clinically appropriate assessment instrument that is specifically designed for skin and wound assessment when skin breakdown occurred.

