



**Ministry of Health and  
Long-Term Care**

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

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

**Rapport d'inspection 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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<b>Report Date(s) / Date(s) du rapport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / Registre no</b>	<b>Type of Inspection / Genre d'inspection</b>
Mar 1, 2017	2017_598570_0005	000425-17	Complaint

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**Licensee/Titulaire de permis**

EXTENDICARE (CANADA) INC.  
3000 STEELES AVENUE EAST SUITE 700 MARKHAM ON L3R 9W2

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

EXTENDICARE OSHAWA  
82 PARK ROAD NORTH OSHAWA ON L1J 4L1

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

SAMI JAROUR (570)

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**Inspection Summary/Résumé de l'inspection**

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

**This inspection was conducted on the following date(s): February 7-10, 2017**

**Complaint Log #000425-17 related to an allegation of neglect of a resident and safety concerns of the residents at the home.**

**During the course of the inspection, the inspector(s) spoke with the Administrator; the Director of Care (DOC), the Assistant Director of Care (ADOC), Registered Nurses (RN), Registered Practical Nurses (RPN), Personal Support Workers (PSW), Admission Coordinator, Resident; and Family Member.**

**Inspector also reviewed clinical health records of identified resident, licensee's complaint investigation notes, viewed Video footage of the Lobby/reception area of identified dates, observed staff to residents interactions.**

**The following Inspection Protocols were used during this inspection:  
Personal Support Services  
Prevention of Abuse, Neglect and Retaliation  
Safe and Secure Home**

**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>Legendé</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. 15. Accommodation services**
**Specifically failed to comply with the following:**

- s. 15. (2) Every licensee of a long-term care home shall ensure that,**
- (a) the home, furnishings and equipment are kept clean and sanitary; 2007, c. 8, s. 15 (2).**
  - (b) each resident's linen and personal clothing is collected, sorted, cleaned and delivered; and 2007, c. 8, s. 15 (2).**
  - (c) the home, furnishings and equipment are maintained in a safe condition and in a good state of repair. 2007, c. 8, s. 15 (2).**



**Findings/Faits saillants :**

1. The licensee failed to ensure that the home's call bell system equipment is maintained in a good state of repair.

A complaint was received by the MOHLTC regarding the safety of residents in the lobby/reception area of the home specifically in the evening hours.

On February 8, 2017, Inspector #570 activated the resident-staff communication terminal available in the lobby/reception area. The inspector noted no response from staff to the call bell system activation from the lobby. It was noted that the annunciator panel located in the unit 1 nursing station, indicated that the reception area was lit on the panel but with no audible sound noted.

RPN #110 indicated to the inspector that any activation to the call system goes to the staff pagers and indicates an active call bell alert from the area of activation.

PSW #111 indicated to the inspector that he/she did not have any signal indicating an active call bell alert from the lobby/reception area.

On February 8, 2017, the DOC indicated to the inspector that the call bell system in the home when activated sends a signal and vibrates to the group pagers, if it is not answered the signal will go to the registered staff pagers. The DOC further indicated, that the call box in the lobby/reception area should signal on the staff pagers in unit 1 but it did not and this call box did not show any activity when it was checked.

Therefore, the resident-staff communication and response system terminal available in the lobby/reception area at the home was not functioning and was not maintained in good repair. [s. 15. (2) (c)]



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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 by ensuring resident-staff communication terminals in all resident accessible areas are checked and maintained in good state of repair, to be implemented voluntarily.***

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**Issued on this 1st day of March, 2017**

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

**Original report signed by the inspector.**