

Ministry of Health and Long-Term Care
Health System Accountability and Performance Division
Performance Improvement and Compliance Branch

Toronto Service Area Office
55 St. Clair Avenue West, 8th Floor
Toronto ON M4V 2Y7

Bureau régional de services de Toronto
55, avenue St. Clair Ouest, 8^{ième} étage
Toronto, ON M4V 2Y7

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

Division de la responsabilisation et de la performance du
système de santé
Direction de l'amélioration de la performance et de la
conformité

Telephone: 416-325-9297
1-866-311-8002

Téléphone: 416-325-9297
1-866-311-8002

Facsimile: 416-327-4486

Télécopieur: 416-327-4486

☐ Licensee Copy/Copie du Titulaire ☒ Public Copy/Copie Public		
Date of inspection/Date de l'inspection	Inspection No/ d'inspection	Type of Inspection/Genre d'inspection
May 16, 17, 18, 24, 25, 26, 2011	2011_195_2460_16May154834	CIS Log # T205-11
Licensee/Titulaire Extendicare Canada Inc. 3000 Steeles Avenue East Markham, ON L3R 9W2 (905) 470-4000		
Long-Term Care Home/Foyer de soins de longue durée Extendicare Bayview 550 Cummer Avenue North York, ON M2K 2M2 (416) 226-1331 Fax: (416) 226-2745		
Name of Inspectors/Nom de l'inspecteurs Tiziana Picardo – 195		
Inspection Summary/Sommaire d'inspection		
The purpose of this inspection was to conduct a critical incident inspection. During the course of the inspection, the inspector spoke with: Personal Support Workers (PSW), Registered Staff, Physiotherapist, and Administrator. During the course of the inspection, the inspector reviewed the care plan, progress notes, assessments, and reviewed policies and procedures. The following Inspection Protocols were used in part or in whole during this inspection: Personal Support Services Critical Incident Response Responsive Behaviours ☒ Findings of Non-Compliance were found during this inspection. The following action was taken: [1] 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 LTCHA, 2007, c. 8, s. 6 (1)(c). Every licensee of a long-term care home shall ensure that there is a written plan of care for each resident that sets out,

(c) clear directions to staff and others who provide direct care to the resident.

Findings:

1. Progress notes indicate that an identified resident was physically and verbally aggressive towards residents and staff.
2. Care plan was not revised to reflect documented physical aggression, reassessment, and Minimum Data Set - Resident Assessment Protocol.

Inspector ID #: 195

Signature of Licensee or Representative of Licensee
Signature du Titulaire du représentant désigné

Signature of Health System Accountability and Performance Division
representative/Signature du (de la) représentant(e) de la Division de la
responsabilisation et de la performance du système de santé.

Title: Date:

Date of Report:

Suzana Picardo
June 6, 2011