



**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**

**Health System Accountability and
Performance Division
Performance Improvement and
Compliance Branch**

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

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Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Dec 2, 2013	2013_263524_0002	L-000948-13	Complaint

Licensee/Titulaire de permis

EXTENDICARE TORONTO INC
3000 STEELES AVENUE EAST, SUITE 700, MARKHAM, ON, L3R-9W2

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

EXTENDICARE LONDON
860 WATERLOO STREET, LONDON, ON, N6A-3W6

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

INA REYNOLDS (524), BONNIE MACDONALD (135)

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): November 27, 2013.

During the course of the inspection, the inspector(s) spoke with Administrator, Director of Care, Registered Dietitian, Food Service Manager, Office Manager, Physiotherapist, Physiotherapist Assistant, Nursing Clerk, Registered Nurse, Register Practical Nurse, Personal Support Workers and 6 residents.

During the course of the inspection, the inspector(s) reviewed the residents' clinical records, the home's abuse and neglect policy, nutrition referral policy, staffing records and interviewed residents. Observed lunch service in the residents' home area.

The following Inspection Protocols were used during this inspection:

Continence Care and Bowel Management

Nutrition and Hydration

Prevention of Abuse, Neglect and Retaliation

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES	
Legend	Legendé
WN – Written Notification	WN – Avis écrit
VPC – Voluntary Plan of Correction	VPC – Plan de redressement volontaire
DR – Director Referral	DR – Aiguillage au directeur
CO – Compliance Order	CO – Ordre de conformité
WAO – Work and Activity Order	WAO – Ordres : travaux et activités



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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.)

The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.

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.

Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.

**WN #1: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 6.
Plan of care**

Specifically failed to comply with the following:

s. 6. (10) The licensee shall ensure that the resident is reassessed and the plan of care reviewed and revised at least every six months and at any other time when,

(a) a goal in the plan is met; 2007, c. 8, s. 6 (10).

(b) the resident's care needs change or care set out in the plan is no longer necessary; or 2007, c. 8, s. 6 (10).

(c) care set out in the plan has not been effective. 2007, c. 8, s. 6 (10).

Findings/Faits saillants :



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1. The licensee failed to ensure that resident was reassessed and the plan of care reviewed and revised when the resident's care needs changed related to resident's ability to feed self when the following occurred:

The resident's nutritional plan of care states resident feeds self and requires set-up help only (i.e. cut-up meat, open cartons) for eating.

During lunch it was observed the resident had difficulty eating and required extensive assistance from the Personal Support Worker to eat.

In interviews with the Personal Support Workers, they confirmed for the past two weeks the resident requires extensive assistance with eating.

Record review revealed, resident had been experiencing difficulty with eating as resident discussed with staff.

During an interview, the Administrator and Director of Care confirmed their expectations that the resident be reassessed by the Occupational Therapist and the plan of care be reviewed and revised due to the change in resident's care needs related to resident's eating ability. [s. 6. (10) (b)]

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 ensuring resident is reassessed and the plan of care reviewed and revised when the resident's care needs changed related to resident's ability to feed self, to be implemented voluntarily.



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Issued on this 2nd day of December, 2013

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

Ina Reynolds #524

Bonnie MacDonald #135