Ontario

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

Ministère de la Santé et des Soins de longue durée
Division de la responsabilisation et de la performance du système de santé
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☐ **Licensee Copy/Copie du Titulaire** ☒ **Public Copy/Copie Public**

Date(s) of inspection/Date de l'inspection	**Inspection No/ d'inspection**	**Type of Inspection/Genre d'inspection**
October 18, 2010	2010-144-2842-18Oct104545	Complaint L-01213

Licensee/Titulaire
Extendicare Canada Inc., 300 Steeles Ave., Suite 700, Markham, ON L3R 9W2

Long-Term Care Home/Foyer de soins de longue durée
Extendicare Southwood Lakes, 1255 North Talbot Road, Windsor, ON N9G 3A4

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

Inspection Summary/Sommaire d'inspection

The purpose of this inspection was to conduct a complaint inspection related to the provision of care & services to the resident & staffing.

During the course of the inspection, the inspector spoke with the resident, Administrator, Director of Care, Ward Clerk, one RN & RPN & two PSW's.

During the course of the inspection, the inspector reviewed one resident clinical record, temperature records for the medication refrigerator. & the PSW work schedule.

The following Inspection Protocols were used in part or in whole during this inspection:
Continence Care & Bowel Management

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

4 WN
2 VPC

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.

WIN #1: The Licensee has failed to comply with LTCHA, 2007, S.O. s.6(1)(b).
The licensee shall ensure that there is a written plan of care for each resident that sets out,
(b) the goals the care is intended to achieve.

Findings:

1. The written plan of care for one resident does not set out the goals antibiotic treatment is intended to achieve for a sinus infection.

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Additional Required Actions:
VPC-pursuant LTCHA, 2007, S.O., c.8,s. 152(2) the licensee is hereby requested to prepare a written plan of correction for achieving compliance to be implemented voluntarily.
The written plan of correction should ensure the written plan of care sets out the goals the care is intended to achieve.

WN #2: The Licensee has failed to comply with LTCHA, 2007, S.O.c.8,s.6(4)(a)
The licensee shall ensure that the staff and others involved in the different aspects of care of the resident collaborate with each other,
(a) in the assessment of the resident so that their assessments are integrated and are consistent with and complement each other.

Findings:

1. The clinical record for one resident does not include integrated nursing & medical assessments to evaluate the effectiveness of a trial medication.

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WN #3: The Licensee has failed to comply with LTCHA, 2007, S.O.c.8,s.6(10)(b).
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,
(b) the resident's care needs change or care set out in the plan is no longer necessary.

Findings:
1. The written plan of care was not reviewed & revised when the resident's care needs changed related to an infection.

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Additional Required Actions:
VPC-pursuant LTCHA, 2007, S.O., c.8,s. 152(2) the licensee is hereby requested to prepare a written plan of correction for achieving compliance to be implemented voluntarily.
The written plan of correction should ensure the written plan of care is reviewed and revised when the resident's care needs change.

WN #4: The Licensee has failed to comply with O. Reg. 79/10,s.229(10)(1).
The licensee shall ensure that the following immunization and screening measures are in place:
(1) Each resident admitted to the home must be screened for tuberculosis within 14 days of admission unless the resident has already been screened at some time in the 90 days prior to admission and the documented results of this screening are available to the home.

Findings:
1. Tuberculosis screening for one resident was not was not completed until 16 weeks post admission to the home.

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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:** **October 20, 2010**