



**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
prévus le Loi de 2007 les
foyers de soins de longue**

**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**

Sudbury Service Area Office
159 Cedar Street, Suite 603
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Public Copy/Copie du public

Date(s) of inspection/Date(s) de l'inspection	Inspection No/ No de l'inspection	Type of Inspection/Genre d'inspection
Oct 17, 18, 19, 20, 21, 26 , Nov 14, 18, 2011	2011_050151_0011	Follow up

Licensee/Titulaire de permis

EXTENDICARE NORTHWESTERN ONTARIO INC
333 York Street, SUDBURY, ON, P3E-4S4

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

EXTENDICARE YORK
333 YORK STREET, SUDBURY, ON, P3E-5J3

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

MONIQUE BERGER (151)

Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct a Follow up inspection.

During the course of the inspection, the inspector(s) spoke with

- Administrator
- Director of Care
- Assistant Director of Care
- Nurse Manager
- Registered Staff (RNs and RPNs)
- Personal Support Workers (PSWs)
- RAI/MDS Coordinator
- Residents
- Families/visitors

During the course of the inspection, the inspector(s)

- Directly observed the delivery of care and services to residents.
- Conducted daily walk-through of the home.
- Reviewed various policies and procedures in relation to non-compliance identified in previous inspections,
- In-depth review of home's correction plan of July 2011,
- Reviewed reports identifying residents at high risk of falls,
- Reviewed head injury protocols,
- Reviewed minutes of the last three "Nurse Practice Meetings,
- Reviewed bulletins to Resident Council that identified the home's strategic plan in regards to non-compliance issues,
- Reviewed staff education initiatives for the last year.
- Reviewed resident health care records.
- Reviewed staffing patterns for RNs, RPN and PSWs.

The following Inspection Protocols were used during this inspection:

Falls Prevention

Personal Support Services

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON-RESPECT DES EXIGENCES

Legend

WN – Written Notification
VPC – Voluntary Plan of Correction
DR – Director Referral
CO – Compliance Order
WAO – Work and Activity Order

Legendé

WN – Avis écrit
VPC – Plan de redressement volontaire
DR – Aiguillage au directeur
CO – Ordre de conformité
WAO – Ordres : travaux et activités

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.



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WN #1: The Licensee has failed to comply with O.Reg 79/10, s. 36. Every licensee of a long-term care home shall ensure that staff use safe transferring and positioning devices or techniques when assisting residents. O. Reg. 79/10, s. 36.

Findings/Faits saillants :

1. Staff do not use safe transferring and positioning devices or techniques when assisting residents.
[O.Reg.79/10, s. 36]

A resident was identified in the plan of care as being high risk of falls. The plan of care directs staff to "porter using foot rests". On October 20, 2011, Inspector observed a staff member push the resident in the wheelchair forward the entire length of the corridor and into the dining room without putting on the foot rests. The resident was observed to drag her feet the entire length of the transfer.

Issued on this 18th day of November, 2011

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

Monique G. Bugen. INSPECTOR 151



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Date(s) of inspection/Date de l'inspection October 17, 18, 19, 20, 21, 26, Nov. 14, 18, 2011 MB	Inspection No/ No de l'inspection 2011_050151_0011	Type of Inspection/Genre d'inspection Follow up
Licensee/Titulaire de permis Extendicare Northwestern Ontario INC., 333 York Street, SUDBURY, ON P3E 4S4		
Long-Term Care Home/Foyer de soins de longue durée Extendicare York, 333 York Street, SUDBURY, ON P3E 4S4		
Name of Inspector(s)/Nom de l'inspecteur ou des inspecteurs Monique Berger (151)		

**THE FOLLOWING NON-COMPLIANCE AND/OR ACTION(S)/ORDER(S) HAVE BEEN COMPLIED WITH/
LES CAS DE NON-RESPECTS ET/OU LES ACTIONS ET/OU LES ORDRES SUIVANT SONT MAINTENANT
CONFORME AUX EXIGENCES:**

REQUIREMENT/ EXIGENCE	TYPE OF ACTION/ORDER #/ GENRE DE MESURE/ORDRE NO	INSPECTION # / NO DE L'INSPECTION	INSPECTOR ID #/ NO DE L'INSPECTEUR
LTCA, 2007 S.O. 2007, c. 8, s. 19 (1)	Compliance Order # 002	2011_029134_0003	134
LTCA, 2007 S.O. 2007, c. 8, s. 6	Compliance Order # 001	2011_029134_0003	134
LTCA, 2007 S.O. 2007, c. 8, s. 6.(7)	Compliance Order #001	2011_056158_0002	158
LTCA, 2007 S.O. 2007, c. 8, s. 6.(7)	Compliance Order #002	2011_056158_0002	158
LTCA, 2007 S.O. 2007, c. 8, s. 6.(7)	Compliance Order #001	2011_051106_0012	106

Issued on this 14th day of November, 2011



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le *Loi de 2007 les
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Signature of Inspector(s)/Signature de l'inspecteur ou des inspecteurs:

Monique S. Berger, Inspector 151