



Ministry of Health and  
Long-Term Care

Ministère de la Santé et des  
Soins de longue durée

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

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  
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**Public Copy/Copie du public**

Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Jan 8, 2013	2012_178102_0015	001544-12	Critical Incident System

**Licensee/Titulaire de permis**

VIGOUR LIMITED PARTNERSHIP ON BEHALF OF VIGOUR  
302 Town Centre Blvd, Suite #200, MARKHAM, ON, L3R-0E8

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

LEISUREWORLD CAREGIVING CENTRE - ALTAMONT  
92 ISLAND ROAD, SCARBOROUGH, ON, M1C-2P5

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

WENDY BERRY (102)

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



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The purpose of this inspection was to conduct a Critical Incident System inspection.

This inspection was conducted on the following date(s): December 13, 2012.

During the course of the inspection, the inspector(s) spoke with the Acting Administrator, the Director of Care, the Environmental Service Manager, registered and non registered nursing staff, several residents and several visitors.

During the course of the inspection, the inspector(s) toured resident areas of the home, reviewed several policy and procedures manuals, checked door security in several areas of the home, reviewed information related to a critical incident.

The following Inspection Protocols were used during this inspection:  
Accommodation Services - Maintenance  
Infection Prevention and Control

Findings of Non-Compliance were found during this inspection.

<b>NON-COMPLIANCE / NON - RESPECT DES EXIGENCES</b>	
<b>Legend</b>	<b>Legendé</b>
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. 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 :**



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1. During an inspection of the home on December 13, 2012 windows in more than 11 residents' bedrooms were observed to be covered over with a clear plastic-like film, which blocked access to window openable areas as well as to the window sills. Staff identified that the film had been installed over the windows to control cold air draughts.

It was confirmed through discussion with management staff that plans are not in place to repair or replace the windows or to further assess the building's structure around the window frames for air infiltration.

In one residents' bedroom, a hole was present in the film over the window. Christmas related items had been placed on the windowsill in the vicinity of the hole.

Cold air draughts are a potential risk to the comfort, safety and well being of residents. Blocking access to window openable areas through the use of window film is a potential risk to the comfort and well being of residents. [s. 15. (2) (c)]

2. Critical incident report (CIR) # 0956-000035-12 identifies that during June 2012 a toilet tipped over on its side while a resident was attempting to self transfer. The resident sustained an injury and was sent to hospital following this incident.

The toilet was located in an ensuite washroom that adjoins a 3 bed room. 2 of the residents of the room were identified by staff as able to access the toilet independently at the time of the incident.

The licensee has not ensured that the home and its equipment, which includes windows and toilets, are maintained in a safe condition and a good state of repair.

Following the CIR, it was identified that an audit of toilets was conducted and that a quarterly preventative maintenance schedule of bathroom toilets was established. [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 to ensure that windows and window frames throughout the home are maintained in a good state of repair, which includes being free of draughts. Access to window openable areas and window sills is to be maintained in all resident bedrooms., to be implemented voluntarily.***

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**WN #2: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 86. Infection prevention and control program**

**Specifically failed to comply with the following:**

- s. 86. (2) The infection prevention and control program must include,**  
**(a) daily monitoring to detect the presence of infection in residents of the long-term care home; and 2007, c. 8, s. 86. (2).**  
**(b) measures to prevent the transmission of infections. 2007, c. 8, s. 86. (2).**

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**Findings/Faits saillants :**



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1. On December 13, 2012 while conducting an inspection in resident areas of the home, the following was observed:

- unlabelled toothbrushes, hairbrushes, combs, plastic basins, kidney dishes, denture containers with and without dentures in them were located on counter tops around sinks in the majority of shared residents' rooms.
- one or more unlabelled plastic wash basins were located on the floor surface in many bedrooms and shared use washrooms throughout the home;
- unlabelled visibly soiled bedpans and urinals were located within a number of shared use toilet rooms that adjoin residents' rooms: stored on toilet tanks or between the grab bar and the wall over the toilet tank;
- urine measures were stored wedged between grab bars and the wall surfaces above toilets in the washrooms that adjoin many residents' rooms. In several washrooms, as many as 3 urine measures were observed. [s. 86. (2) (b)]

2. The majority of sit stand lifts that were observed stored in corridors were observed to have a build up on debris present on footrests. Several were also visibly soiled on contact surfaces: leg rests and/or textured rubber hand grips.

Containers for low level disinfectant wipes were attached to some of the lifts; however, 4 of 4 containers that were checked were empty.

All of the identified examples above are potential cross infection hazards to residents. [s. 86. (2) (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 to ensure that the infection prevention and control program includes measures to prevent the transmission of infections including labelling and appropriate use and storage of body contact personal hygiene items and plastic ware (basins, bedpans, urinals, etc.), to be implemented voluntarily.***



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Issued on this 8th day of January, 2013

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

A handwritten signature in black ink, appearing to read "Wendy Bay" or similar, written over a white rectangular area.