

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

**Rapport d'inspection en vertu de  
la Loi de 2007 sur les foyers de  
soins de longue durée**

**Long-Term Care Operations Division  
Long-Term Care Inspections Branch**

**Division des opérations relatives aux  
soins de longue durée  
Inspection de soins de longue durée**

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**Public Copy/Copie du rapport public**

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<b>Report Date(s) / Date(s) du Rapport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / No de registre</b>	<b>Type of Inspection / Genre d'inspection</b>
Aug 26, 2021	2021_631210_0021	005499-21	Follow up

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**Licensee/Titulaire de permis**

The Jewish Home for the Aged  
3560 Bathurst Street Toronto ON M6A 2E1

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

The Jewish Home for the Aged  
3560 Bathurst Street North York ON M6A 2E1

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

SLAVICA VUCKO (210)

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

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

**This inspection was conducted on the following date(s): August 17, 20, and 23, 2021.**

**The following Compliance Order (CO) was followed up:  
-Order from February 24, 2021 related to mandatory reporting**

**During the course of the inspection, the inspector(s) spoke with the acting Executive Director (ED), acting Director of Care (DOC), Facility Manager (FM), and Infection Prevention and Control (IPAC) Lead.**

**During the course of the inspection the inspector conducted observations of the home, including resident home areas, staff to resident interactions, reviewed temperature measurement logs, education materials, and relevant home policies and procedures.**

**The following Inspection Protocols were used during this inspection:  
Infection Prevention and Control  
Safe and Secure Home**

**During the course of this inspection, Non-Compliances were issued.**

**1 WN(s)  
0 VPC(s)  
0 CO(s)  
0 DR(s)  
0 WAO(s)**

**The following previously issued Order(s) were found to be in compliance at the time of this inspection:**

**Les Ordre(s) suivants émis antérieurement ont été trouvés en conformité lors de cette inspection:**

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REQUIREMENT/ EXIGENCE	TYPE OF ACTION/ GENRE DE MESURE	INSPECTION # / DE L'INSPECTION	NO	INSPECTOR ID #/ NO DE L'INSPECTEUR
LTCHA, 2007 S.O. 2007, c.8 s. 24. (1)	CO #001	2020_833763_0022		210

**NON-COMPLIANCE / NON - RESPECT DES EXIGENCES**

Legend	Légende
WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order	WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités
<p>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).</p> <p>The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.</p>	<p>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.</p> <p>Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.</p>

**WN #1: The Licensee has failed to comply with O.Reg 79/10, s. 21. Air temperature**

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

**s. 21. (2) Every licensee of a long-term care home shall ensure that the temperature is measured and documented in writing, at a minimum in the following areas of the home:**

**2. One resident common area on every floor of the home, which may include a lounge, dining area or corridor. O. Reg. 79/10, s. 21 (2).**

**s. 21. (3) The temperature required to be measured under subsection (2) shall be documented at least once every morning, once every afternoon between 12 p.m. and 5 p.m. and once every evening or night. O. Reg. 79/10, s. 21 (3).**

**Findings/Faits saillants :**

1. The licensee has failed to ensure that the temperature was measured and documented in writing in one resident common area on every floor of the home, which may include a lounge, dining area, or corridor.

A temperature measurement log indicated the air/ambient temperature was measured in common areas on one floor of the home, three times a day, 5-6 minutes apart.

The home was not able to present to the inspector that the temperature was measured and documented in writing in one resident common area on every floor of the home, which may include a lounge, dining area, or corridor.

Source: review of temperature measurement logs, interview with the Facility Manager. [s. 21. (2) 2.]

2. The licensee has failed to ensure that the temperatures required to be measured under subsection (2) were documented at least once every morning, once every afternoon between 12 p.m. and 5 p.m. and once every evening or night.

The temperature measurement log from August 2021 indicated the room temperature measured in two resident rooms, was measured inconsistently, one or two times a day.

The temperature measurement log from August 2021 indicated the air/ambient temperature on in common areas on one floor of the home, was taken three times a day, five to six minutes apart.

The ambient temperature measured from the residents' rooms and the unit common areas were not taken once every morning, once every afternoon between 12 p.m. and 5 p.m. and once every evening or night.

Source: review of residents' rooms and common areas temperature measurement logs, interview with the Facility Manager. [s. 21. (3)]

**Issued on this 27th day of August, 2021**

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

**Original report signed by the inspector.**