



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

**Rapport d'inspection
prévues 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

Toronto Service Area Office
55 St. Clair Avenue West, 8th Floor
Toronto ON M4V 2Y7

Bureau régional de services de Toronto
55, avenue St. Clair Ouest, 8^{ième} étage
Toronto, ON M4V 2Y7

**Ministère de la Santé et des Soins de
longue durée**

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

Telephone: 416-325-9297
1-866-311-8002

Téléphone: 416-325-9297
1-866-311-8002

Facsimile: 416-327-4486

Télécopieur: 416-327-4486

<input type="checkbox"/> Licensee Copy/Copie du Titulaire	<input checked="" type="checkbox"/> Public Copy/Copie Public
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Date(s) of inspection/Date de l'inspection November 10, 2010	Inspection No/ d'inspection 2010_132_8504_10Nov094138	Type of Inspection/Genre d'inspection Complaint T0552
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Licensee/Titulaire The Jewish Home For The Aged

Long-Term Care Home/Foyer de soins de longue durée Baycrest Centre Jewish H.F.A.
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Name of Inspector(s)/Nom de l'inspecteur(s) Rosemary Lam #132

Inspection Summary/Sommaire d'inspection

The purpose of this inspection was to conduct a complaint inspection.

During the course of the inspection, the inspector spoke with: Nurse Managers, Registered staff and Personal Support Workers on various units

During the course of the inspection, the inspector: examined the charger for phone and pager.

The following Inspection Protocols were used in part or in whole during this inspection:

Safe and Secure Homes Inspection Protocol

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

1 WN
1 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.

WN #1: The Licensee has failed to comply with O. Reg 79/10.17. (1) Every licensee of a long-term care home shall ensure that the home is equipped with a resident-staff communication and response system that, (b) is on at all times; (f) clearly indicates when activated where the signal is coming from; and (g) in the case of a system that uses sound to alert staff, is properly calibrated so that the level of sound is audible to staff.

Findings:

On November 10, 2010, the resident-staff response system (phone or pager) was left in the charger on 3rd and 7th floor for unspecified period of time due to dead batteries. Alarms from residents were not heard by the staff assigned.

- 1) 2 out of 4 PSW did not carry phone due to low battery on the 7th floor.
- 2) 1 out of 3 PSW did not carry pager on the 3rd floor due to low battery.
- 3) No extra phone or pager or spare batteries were available on these units, PSW worked for 4 hrs on day shift without carrying the phone or pager.
- 4) Staff off the unit for break or for inservices, if without the pagers, will not hear emergency calls summoning them back to the units. Previous concern raised regarding not having sufficient manpower to cover the unit for safe care during staff breaks or when staff attends in-servcies.

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 with ensuring staff follows procedures to charge pager or phone batteries; to carry pager/phone and that there are emergency supplies to replace phones/pagers when they are not functioning properly. This plan of correction is to be implemented voluntarily.

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.

Rosemary Lam

Title: Date:

Date of Report: (if different from date(s) of inspection).

December 9, 2010