



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 prévue 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
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Date(s) of inspection/Date(s) de l'inspection	Inspection No/ No de l'inspection	Type of Inspection/Genre d'inspection
Sep 13, 17, 2012	2012_085152_0003	Other

Licensee/Titulaire de permis

TORONTO AGED MEN'S AND WOMEN'S HOMES
55 Belmont Street, TORONTO, ON, M5R-1R1

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

BELMONT HOUSE
55 BELMONT STREET, TORONTO, ON, M5R-1R1

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

CATHERINE PALMER (152)

Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct an Other inspection.

During the course of the inspection, the inspector(s) spoke with the Chief Executive Officer, Director of Care, Assistant Director of Care, Social Worker, Registered Staff, Health Care Aides, Dietary Aide, residents, family.

During the course of the inspection, the inspector(s) conducted a walk through of the building, observed residents and staff, conducted interviews, observed lunch meal.

The following Inspection Protocols were used during this inspection:

Residents' Council

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



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<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>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>The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.</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. 17. Communication and response system Specifically failed to comply with the following subsections:

- s. 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,
- (a) can be easily seen, accessed and used by residents, staff and visitors at all times;
 - (b) is on at all times;
 - (c) allows calls to be cancelled only at the point of activation;
 - (d) is available at each bed, toilet, bath and shower location used by residents;
 - (e) is available in every area accessible by residents;
 - (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. O. Reg. 79/10, s. 17 (1).

Findings/Faits saillants :

1. The licensee failed to ensure that the home is equipped with a resident-staff communication and response system that is available in every area accessible by residents. The auditorium, accessed by long term care home residents for activities, is not equipped with a resident-staff communication and response system.

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 that every area accessible by residents is equipped with a resident-staff communication and response system, to be implemented voluntarily.

Issued on this 17th day of September, 2012

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

Cathy Palmer