

Inspection Report under the Long-Term Care Homes Act, 2007 Ministère de la Santé et des Soins de longue durée

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

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Report Date(s) /	Inspection No /	Log # /	Type of Inspection / Genre d'inspection
Date(s) du Rapport	No de l'inspection	Registre no	
Feb 20, 2013	2013_162109_0015	T-8-13	Complaint

Licensee/Titulaire de permis

Downsview Long Term Care Centre Limited 3595 Keele Street, NORTH YORK, ON, M3J-1M7

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

Downsview Long Term Care Centre 3595 Keele Street, NORTH YORK, ON, M3J-1M7

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

SUSAN SQUIRES (109)

Inspection Summary/Résumé de l'inspection

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

This inspection was conducted on the following date(s): February 7, 11, 14, & 15, 2013

During the course of the inspection, the inspector(s) spoke with Manager of Recreation Programs, Recreation Assistants, Resident.

During the course of the inspection, the inspector(s) Reviewed the health record for resident #12, and the plan of care for resident# 5, reviewed the Activity Calendar for February, 2013, reviewed the program descriptions. observed activity programs on the 2nd floor.

The following Inspection Protocols were used during this inspection:



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Personal Support Services Recreation and Social Activities

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES			
Legend	Legendé		
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		
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 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.		
The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.	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 O.Reg 79/10, s. 65. Recreational and social activities program



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Specifically failed to comply with the following:

- s. 65. (2) Every licensee of a long-term care home shall ensure that the program includes,
- (a) the provision of supplies and appropriate equipment for the program; O. Reg. 79/10, s. 65 (2).
- (b) the development, implementation and communication to all residents and families of a schedule of recreation and social activities that are offered during days, evenings and weekends; O. Reg. 79/10, s. 65 (2).
- (c) recreation and social activities that include a range of indoor and outdoor recreation, leisure and outings that are of a frequency and type to benefit all residents of the home and reflect their interests; O. Reg. 79/10, s. 65 (2).
- (d) opportunities for resident and family input into the development and scheduling of recreation and social activities; O. Reg. 79/10, s. 65 (2).
- (e) the provision of information to residents about community activities that may be of interest to them; and O. Reg. 79/10, s. 65 (2).
- (f) assistance and support to permit residents to participate in activities that may be of interest to them if they are not able to do so independently. O. Reg. 79/10, s. 65 (2).

Findings/Faits saillants:



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1. The licensee failed to ensure that the development, implementation and communication to all residents and families a schedule of recreation and social activities that are offered during days, evenings and weekends.

The monthly activity calendar is posted on the wall beside the nursing station for residents who are able to go to the calendar and read the calendar.

The monthly schedule of activity programs for February 2013 is not made available to all residents and families. The licensee only provides schedules of activity programs to those residents and family members who ask for one.

The scheduled activity programs were not implemented on February 7, 2013. Doll Therapy was not provided to the residents at 3:45 pm as scheduled.

On February 11, 2013 ipad visits were not provided to the residents at 11:00 am as scheduled. [s. 65. (2) (b)]

2. The licensee failed to ensure that the recreation program includes a range of indoor and outdoor recreation, leisure and outings that are of a frequency and type to benefit all residents and reflect their interests.

The care unit consist of 73 residents and one Recreation Assistant. The residents have varying degrees of physical and cognitive limitations.

According to the plan of care for resident # 5, the resident has no interest to be involved in any type of worship service. According to the attendance schedule for resident # 5 he/she was taken to a worship service on February 9, 2013.

On February 7, 2013 at approximately 10:30 am the Inspector observed 17 residents including resident # 5 sitting in a lounge facing a television on the wall which was set onto a news channel. Many of the residents were sleeping in their chairs and not watching the TV. There was a "Pinco" program running in the activity room with approximately 14 residents participating. There were another 5 residents sitting in front of another TV with a movie running. Most of the residents were sleeping. On February 11, 2013 at approximately 10:30 am there were 12 residents sitting in the activity room facing the TV. Most of the residents were sleeping. There were another 21 residents including resident # 5 sitting in a lounge lined up and facing a television which was set on a news station. Most of the 21 residents appeared to be either sleeping or blankly staring down. The recreation Assistant told the inspector that she/he had to attend the Care Conference so she/he put a movie in for the 12 residents in the Activity room to watch. Resident # 5 was identified on his/her plan of care as being interested in movies but was not sitting in the lounge where the movie was showing. [s. 65. (2) (c)]



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3. The licensee failed to ensure that they include opportunities for resident and family input into the development and scheduling of recreation and social activities. According to the Manager of Activation, there are no opportunities currently in place to enable resident and family input into the development and scheduling of activity programs.

The residents' council is given an annual report from the activation manager however there is no opportunity for input into the development and scheduling of activity programs. [s. 65. (2) (d)]

Issued on this 27th day of February, 2013

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