



**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 performance et de la conformité**

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**Public Copy/Copie du public**

<b>Report Date(s) / Date(s) du Rapport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / Registre no</b>	<b>Type of Inspection / Genre d'inspection</b>
Jan 15, 2014	2014_274535_0001	T-297-13	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**

VERON ASH (535)

**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): January 7, 8, 9, 2014

During the course of the inspection, the inspector(s) spoke with Personal Support Workers, Registered Staff, Nurse Manager, Clinical Coordinator, Physiotherapist, family member

During the course of the inspection, the inspector(s) observed provision of resident care, conduct interviews, staff and resident interactions, review health records, the home policy/protocol/procedures.

The following Inspection Protocols were used during this inspection:  
**Falls Prevention**



Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

<p>Legend</p> <p>WN – Written Notification  VPC – Voluntary Plan of Correction  DR – Director Referral  CO – Compliance Order  WAO – Work and Activity Order</p>	<p>Legendé</p> <p>WN – Avis écrit  VPC – Plan de redressement volontaire  DR – Aiguillage au directeur  CO – Ordre de conformité  WAO – Ordres : travaux et activités</p>
<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. 8. Policies, etc., to be followed, and records**

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

**s. 8. (2) Where the Act or this Regulation requires the licensee to keep a record, the licensee shall ensure that the record is kept in a readable and useable format that allows a complete copy of the record to be readily produced. O. Reg. 79/10, s. 8 (2)**

**Findings/Faits saillants :**



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1. The licensee failed to ensure that records are kept in a readable and useable format that allows a complete copy of the records to be readily produced.

Record review confirmed that resident # 1, #2, and #3 post fall records were not complete and readily produced. Resident health records are missing pertinent assessment documentation namely printed incident reports and head injury routine (HIR). Staff interviews confirmed those records could not be located. [s. 8. (2)]

***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 safe-keeping and storage of records so that they are kept in a readable and useable format that allows a complete copy of the record to be readily produced, to be implemented voluntarily.***

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**WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 30. General requirements**

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

**s. 30. (2) The licensee shall ensure that any actions taken with respect to a resident under a program, including assessments, reassessments, interventions and the resident's responses to interventions are documented. O. Reg. 79/10, s. 30 (2).**

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**Findings/Faits saillants :**



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1. Review of health records for resident #1, #2, and #3 revealed that pertinent documentation related to residents' post fall assessments, printed incident reports and completed HIR, were not documented. Interviews conducted with registered staff and nurse manager confirmed the information above. [s. 30. (2)]

2. The home's Fall Prevention and Management Policy #NM-II-F005 was reviewed on January 10, 2014. The policy indicates to complete a head injury routine post fall for suspected head trauma, if the resident is on an anticoagulant, or if the fall was unwitnessed.

Health record review indicated that resident # 1 had seven (7) falls between February and June, 2013, and no HIR assessment was documented.

Resident # 2 had twelve (12) falls between February and June, 2013, and 8 HIR assessments were not documented.

Resident # 3 had six (6) falls between February and November, 2013, and 5 HIR assessments were not documented. [s. 30. (2)]

***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 residents' assessments are documented, to be implemented voluntarily.***

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**Issued on this 15th day of January, 2014**

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

A handwritten signature in black ink, appearing to be "V. [unclear]".

