



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

**Rapport d'inspection
prévue 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

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

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Date(s) of inspection/Date de l'inspection	Inspection No/ d'inspection	Type of Inspection/Genre d'inspection
April 26 & 27, 2011	2011_167_2912_26Apr104255	Inspection related to critical incidents H-00414 and H-01120
Licensee/Titulaire Delcare LTC Inc. 4800 Dufferin Street, Toronto, Ontario M3H 5S9		
Long-Term Care Home/Foyer de soins de longue durée Cawthra Gardens Long Term Care Community 590 Lolita Gardens Mississauga, Ontario L5A 4N8		
Name of Inspector(s)/Nom de l'inspecteur(s) Marilyn Tone # 167		
Inspection Summary/Sommaire d'inspection		
<p>The purpose of this inspection was to conduct an inspection related to two critical incident reports.</p> <p>During the course of the inspection, the inspector spoke with: The Director of Care, the Administrator and staff on the unit where the identified residents reside.</p> <p>During the course of the inspection, the inspector conducted a review of the health files for the identified residents, reviewed the investigation notes related to both incidents and reviewed the home's policy and procedure related to Falls Prevention.</p> <p>The following Inspection Protocols were used in part or in whole during this inspection: Personal Support Services Inspection Protocol Falls Prevention Inspection Protocol</p> <p><input checked="" type="checkbox"/> Findings of Non-Compliance were found during this inspection. The following action was taken: 2 WN 1 VPC</p>		

NON- COMPLIANCE / (Non-respectés)
Definitions/Définitions

WN – Written Notifications/Avis écrit
VPC – Voluntary Plan of Correction/Plan de redressement volontaire
DR – Director Referral/Régleur 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 LTCHA, 2007, S.O. c. 8 s. 6(7)

The licensee shall ensure that the care set out in the plan of care is provided to the resident as specified in the plan.

Findings:

The identified resident was not transferred as directed in their plan of care.

The plan of care indicated that the identified resident was to be transferred using a sit/stand lift and with the assistance of two staff. The identified resident did not receive the required amount of assistance during the transfer resulting in a fall.

Inspector ID #: # 167

WN #2: The Licensee has failed to comply with O. Reg. 79/10, s. 36

Every licensee of a long-term care home shall ensure that staff use safe transferring and positioning devices or techniques when assisting residents.

Findings:

The identified resident was not transferred using safe transferring technique.

The identified resident was transferred with a sit/stand lift with assistance of only one staff.

- 1) The identified resident's plan of care indicates that they are to be transferred using a sit/stand lift and two staff assistance.

The assessed number of staff were not used to provide safe transferring technique for the identified resident.

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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 staff use safe transferring and positioning devices or techniques when assisting residents, 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. <i>Makujin Lone</i>
Title: _____ Date: _____	Date of Report: (if different from date(s) of inspection). May 4, 2011