

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

Rapport d'inspection prévue  
sous *la Loi de 2007 sur les foyers  
de soins de longue durée*

Long-Term Care Homes Division  
Long-Term Care Inspections Branch

Division des foyers de soins de  
longue durée  
Inspection de soins de longue durée

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<b>Report Date(s) / Date(s) du Rapport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / No de registre</b>	<b>Type of Inspection / Genre d'inspection</b>
Jul 15, 2019	2019_780699_0015	008219-19	Follow up

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**Licensee/Titulaire de permis**

Vigour Limited Partnership on behalf of Vigour General Partner Inc.  
302 Town Centre Blvd Suite 300 MARKHAM ON L3R 0E8

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

Cheltenham Care Community  
5935 Bathurst Street NORTH YORK ON M2R 1Y8

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

PRAVEENA SITTAMPALAM (699)

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**Inspection Summary/Résumé de l'inspection**

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**The purpose of this inspection was to conduct a Follow up inspection.**

**This inspection was conducted on the following date(s): June 19-21, 24-28, 2019.**

**The following follow up intake was inspected during this inspection:  
-Log #008219-19 related to compliance order regarding safe transferring of  
residents.**

**During the course of the inspection, the inspector(s) spoke with the Director of  
Care (DOC), Associate Director of Care (ADOC) and Personal Support Workers  
(PSW).**

**During the course of the inspection, the inspector observed staff and resident  
interactions and the provision of care, record review of health records, and  
relevant policies and procedures.**

**The following Inspection Protocols were used during this inspection:  
Personal Support Services**

**During the course of this inspection, Non-Compliances were issued.**

**1 WN(s)**

**0 VPC(s)**

**0 CO(s)**

**0 DR(s)**

**0 WAO(s)**

**The following previously issued Order(s) were found to be in compliance at the  
time of this inspection:**

**Les Ordre(s) suivants émis antérieurement ont été trouvés en conformité lors de  
cette inspection:**

REQUIREMENT/ EXIGENCE	TYPE OF ACTION/ GENRE DE MESURE	INSPECTION # / DE L'INSPECTION	NO	INSPECTOR ID #/ NO DE L'INSPECTEUR
O.Reg 79/10 s. 36.	CO #001	2019_769646_0003		699

**NON-COMPLIANCE / NON - RESPECT DES EXIGENCES**

Legend	Légende
<p>WN – Written Notification  VPC – Voluntary Plan of Correction  DR – Director Referral  CO – Compliance Order  WAO – Work and Activity Order</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 LTCHA, 2007 S.O. 2007, c.8, s. 101. Conditions of licence**

Specifically failed to comply with the following:

**s. 101. (3) It is a condition of every licence that the licensee shall comply with this Act, the Local Health System Integration Act, 2006, the Commitment to the Future of Medicare Act, 2004, the regulations, and every directive issued, order made or agreement entered into under this Act and those Acts. 2007, c. 8, s. 195 (12); 2017, c. 25, Sched. 5, s. 23.**

**Findings/Faits saillants :**

1. The licensee has failed to comply with the following requirement of the LTCHA: it is a condition of every licence that the licensee shall comply with every order made under this Act.

On March 21, 2019, the following compliance order (CO) #001 from inspection number, 2019\_769646\_0003, made under O.Reg 79/10, s. 36 was issued:

1) Ensure that for resident #023 and all residents who require a specified transferring or ambulation device have the proper attachments in place at all times unless otherwise specified in the resident's written plan of care.

2) Ensure that staff use safe transferring techniques to assist resident #023 and any other residents who require assistance with transferring as specified in the resident's written plan of care.

3) Develop an auditing system in the home to ensure that resident #023 and all residents who require a specified transferring device have the proper attachments in place when in use.

4) Maintain a written record of audits conducted. The written record must include the date and location of the audit, the resident's name, staff members audited, the name of the person completing the audit and the action required as a result of the audit.

The compliance date was May 24, 2019.

The licensee completed steps 1-3 in CO#001.

The licensee failed to complete step 4.

Record review of the home's audits that were conducted March 27, 2019 did not indicate who completed the audit, which staff were audited, what location audit took place in, what actions were taken in response to audit, and no date indicating when audit was

completed.

Record review of the home's audit that were conducted May 3, 2019 did not indicate which staff were audited, what location audit took place in, and what actions were taken in response to audit.

In an interview with ADOC #106 and DOC #101 conducted on June 24, 2019, they acknowledged that the staff who were audited, location of the audits, action as a result of the audit were not documented as required by the compliance order. On June 25, 2019, ADOC #106 provided the inspector with an updated audit tool that listed the above mentioned requirements. [s. 101. (3)]

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**Issued on this 15th day of July, 2019**

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

**Original report signed by the inspector.**