

Ministry of Health and Long-Term Care

Health System Accountability and Performance Division Performance Improvement and Compliance Branch

Ministère de la Santé et des Soins de longue durée

Division de la responsabilisation et de la performance du système de santé Direction de l'amélioration de la performance et de la conformité

Order(s) of the Inspector

Pursuant to section 153 and/or section 154 of the Long-Term Care Homes Act, 2007, S.O. 2007, c.8

	Licensee Copy/Copie du Titulaire	Public Copy/Copie Public		
Name of Inspector:	Jane Carruthers Amanda Williams	Inspector ID # 113		
Log #:	T1203			
Inspection Report #:	2010_113_2556_13Dec111904 2010_101_2556_13Dec111934			
Type of Inspection:	Follow up			
Date of Inspection:	December 13,14, 2010			
Licensee:	Chartwell Master Care LP, 100 Milverton Drive, Suite 700, Mississauga, ON L5R 4H1			
LTC Home:	The Gibson Long-Term Care Centre, 1925 Steeles Avenue East, North York, ON M2H 2H3			
Name of Administrator:	Soile Helppi			

To Chartwell Master Care LP, you are hereby required to comply with the following order by the date set out below:

Order #:	001	Order Type:	Compliance Order, Section 153 (1)(a)
Every license	: O. Reg 79/10 s. 21. ee of a long-term car of 22 degrees Celsiu	e home shall er	sure that the home is maintained at a minimum
	icensee shall audit, id naintained at a minimu		t temperatures in all Resident Home Areas to ensure Celsius.
Grounds:			
	nperatures were record to 20.9'C.	ded in five identi	fied Resident bedrooms and bathrooms ranging from
This order r	nust be complied w	vith by: imme	diately



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REVIEW/APPEAL INFORMATION

TAKE NOTICE:

The Licensee has the right to request a review by the Director of this (these) Order(s) and to request that the Director stay this (these) Order(s) in accordance with section 163 of the Long-Term Care Homes Act, 2007.

The request for review by the Director must be made in writing and be served on the Director within 28 days from the day the order was served on the Licensee

The written request for review must include,

- (a) the portions of the order in respect of which the review is requested;
- (b) any submissions that the Licensee wishes the Director to consider; and
- (c) an address for service for the Licensee.

The written request for review must be served personally, by registered mail or by fax upon:.

Director
c/o Appeals Clerk
Performance Improvement and Compliance Branch
Ministry of Health and Long-Term Care
55 St. Clair Ave. West
Suite 800, 8th floor
Toronto, ON M4V 2Y2
Fax: 416-327-7603

When service is made by registered mail, it is deemed to be made on the fifth day after the day of mailing and when service is made by fax, it is deemed to be made on the first business day after the day the fax is sent. If the Licensee is not served with written notice of the Director's decision within 28 days of receipt of the Licensee's request for review, this(these) Order(s) is(are) deemed to be confirmed by the Director and the Licensee is deemed to have been served with a copy of that decision on the expiry of the 28 day period.

The Licensee has the right to appeal the Director's decision on a request for review of an Inspector's Order(s) to the Health Services Appeal and Review Board (HSARB) in accordance with section 164 of the *Long-Term Care Homes Act, 2007*. The HSARB is an independent group of members not connected with the Ministry. They are appointed by legislation to review matters concerning health care services. If the Licensee decides to request a hearing, the Licensee must, with 28 days of being served with the notice of the Director's decision, mail or deliver a written notice of appeal to both:

Health Services Appeal and Review Board and the Attention Registrar
151 Bloor Street West
9th Floor
Toronto, ON

M5S 2T5

Director

c/o Appeals Clerk
Performance Improvement and Compliance Branch
55 St. Claire Avenue, West
Suite 800, 8th Floor
Toronto, ON M4V 2Y2

Fax: 416-327-7603

Upon receipt, the HSARB will acknowledge your notice of appeal and will provide instructions regarding the appeal process. The Licensee may learn more about the HSARB on the website www.hsarb.on.ca.

Issued on this 13 th day of	January 2011.
Signature of Inspector:	Lane Carrethers
Name of Inspector:	Jane Carruthers Amanda Williams
Service Area Office:	Toronto Service Area

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rapport a mopertion prévue le Loi de 2007 les foyers de soins de longue durée

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Ministère de la Santé et des Soins de longue durée

Division de la responsabilisation et de la performance du système de santé

Direction de l'amélioration de la performance et de la conformité

Toronto Service Area Office 55 St. Clair Avenue West, 8th Floor Toronto ON M4V 2Y7

Telephone: 416-325-9297

1-866-311-8002

Facsimile: 416-327-4486

Bureau régional de services de Toronto 55, avenue St. Clair Ouest, 8iém étage Toronto, ON M4V 2Y7

Téléphone: 416-325-9297

1-866-311-8002

Télécopieur: 416-327-4486

	Licensee Copy/Copie du Titulaire			
Date(s) of inspection/Date de l'inspection December 13,14, 2010	Inspection No/ d'inspection 2010_113_2556_13Dec111904 2010_101_2556_13Dec111934 Type of Inspection/Genre d'inspection T1203 - Follow up			
Licensee/Titulaire Chartwell Master Care LP, 100 Milverton Drive	e, Suite 700, Mississauga, ON L5R 4H1			
Long-Term Care Home/Foyer de soins de le The Gibson Long-Term Care Centre, 1925 Ste	ongue durée eeles Avenue East, North York, ON M2H 2H3			
Name of Inspector(s)/Nom de l'inspecteur(s) Jane Carruthers - #113 Ama	s) anda Williams - #101			
Inspection	Summary/Sommaire d'inspection			
issued under the Program Standards and Homes Act R.S.O., 1990 Chapter N.7.	duct a follow up inspection where the following unmet criteria were Criteria Manual and Area of Non-Compliance under the Nursing aspectors spoke with: The Administrator, Director of Care (DOC),			
Environmental Service Supervisor, and housekeeping staff.				
During the course of the inspection, the in and took air temperatures.	spectors: conducted a walk through of Resident Home Areas (RHA),			
	used in part or in whole during this inspection: Services – Housekeeping, Accommodation Services – Laundry, and on Protocols.			
Findings of Non-Compliance were	e found during this inspection. The following action was taken:			
[1]WN [1] CO: CO#001				
Corrected Non-Compliance is listed in	the section titled Corrected Non-Compliance.			

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Long-Term Care

Ministère de la Santé et des Soins de longue durée

under the Long-Term Care Homes Act, 2007 d'inspection prévue le Loi de 2007 les foyers de soins de longue durée

NON- COMPLIANCE / (Non-respectés)

Definitions/Définitions

WN - Written Notifications/Avis écrit

VPC - Voluntary Plan of Correction/Plan de redressement volontaire

DR - Director Referral/Régisseur 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 O. Reg 79/10 s. 21.

Every licensee of a long-term care home shall ensure that the home is maintained at a minimum temperature of 22 degrees Celsius.

Findings:

1. Air temperatures were recorded in five identified Resident bedrooms and bathrooms ranging from 17.1°C to 20.9°C.

Inspector ID #: 113

101

Additional Required Actions:

CO # - [001] was served on the licensee. Refer to the "Order(s) of the Inspector" form.

CORRECTED NON-COMPLIANCE Non-respects à Corrigé				
REQUIREMENT EXIGENCE	TYPE OF ACTION/ORDER	ACTION/ ORDER#	INSPECTION REPORT#	INSPECTOR ID #
NHA R.S.O. Chapter N.7 section 2 (2) 18			June 22,23, 2010	113 101
Program Standards and Criteria Manual unmet criterion M3.21 (re-issued)			June 22,23, 2010	113 101



Long-Term Care

under the Long-Term Care Homes Act, 2007 d'inspection prévue le Loi de 2007 les foyers de soins de longue durée

Ministère	de la	Santé	et
des Soins	de la	onque	durée

Program Standards and Criteria Manual unmet criterion 03.1 (re-issued)	June 22,23, 2010	113 101
Program Standards and Criteria Manual unmet criterion 04.14	June 22,23, 2010	113 101

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.
Title: Date:	Date of Report: (if different from date(s) of inspection). Our 13, 2011