



**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**

Division de la responsabilisation et de la performance du
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<input type="checkbox"/> Licensee Copy/Copie du Titulaire		<input checked="" type="checkbox"/> Public Copy/Copie Public
Date(s) of inspection/Date de l'inspection January 25, 26, 28, 2011	Inspection No/ d'inspection 2011_178_9545_25Jan102439	Type of Inspection/Genre d'inspection Complaint, T-1255
Licensee/Titulaire Toronto Long-Term Care Homes and Services, 55 John Street, Metro Hall, 11 th Floor, Toronto, ON, M5V 3C6, Fax 416-392-4180		
Long-Term Care Home/Foyer de soins de longue durée Kipling Acres		
Name of inspector(s)/Nom de l'inspecteur(s) Susan Lui, 199		
Inspection Summary/Sommaire d'inspection		
<p>The purpose of this inspection was to conduct a complaint inspection.</p> <p>During the course of the inspection, the inspector spoke with: Administrator, Director of Nursing, Manager of Programs and Services, former Manager of Programs and Services, physiotherapist, social worker, registered staff.</p> <p>During the course of the inspection, the inspector: reviewed resident records, reviewed Home policies for the Resident Concern Form, Issues, Concerns, Complaints Log and Statistics, Medication Administration, reviewed personal notes from former Manager of Programs and Services, reviewed Homes Complaints Log for 2010.</p> <p>The following Inspection Protocols were used during this inspection: Reporting and Complaints, Medication, Responsive Behaviours</p> <p><input checked="" type="checkbox"/> Findings of Non-Compliance were found during this inspection. The following action was taken:</p> <p>3 WN 2 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/Régisseur envoyé
CO – Compliance Order/Ordres de conformité
WAO – Work and Activity Order/Ordres: travaux et activités

<p>The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA</p> <p>Non-compliance with requirements under the <i>Long-Term Care Homes Act, 2007</i> (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>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.</p> <p>Non-respect avec les exigences sur le <i>Loi de 2007 les foyers de soins de longue durée</i> 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.</p>
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WN #1: The Licensee has failed to comply with LTCHA, 2007, S.O., c. 8, s3(1)8
 Every licensee of a long-term care home shall ensure that the following rights of residents are fully respected and promoted:
 8. Every resident has the right to be afforded privacy in treatment and in caring for his or her personal needs.

Findings:
An identified resident was not afforded privacy when discussing her treatment with a registered healthcare provider within the Home.

Inspector ID #:	199
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WN #2: The Licensee has failed to comply with O. Reg. 79/10, s. 101(1)1 and 3
 1. Every licensee shall ensure that every written or verbal complaint made to the licensee or a staff member concerning the care of a resident or operation of the home is dealt with as follows:
 The complaint shall be investigated and resolved where possible, and a response that complies with paragraph 3 provided within 10 business days of the receipt of the complaint, and where the complaint alleges harm or risk of harm to one or more residents, the investigation shall be commenced immediately.

3. i) A response shall be made to the person who made the complaint, indicating, what the licensee has done to resolve the complaint, or
 ii) A response shall be made to the person who made the complaint, indicating, that the licensee believes the complaint to be unfounded and the reasons for the belief.

Findings:
A complaint from the family of an identified resident was not resolved.

Inspector ID #:	199
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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 with the requirement that every written or verbal complaint made to the licensee or a staff member concerning the care of a resident or operation of the home is dealt with as follows:



The complaint shall be investigated and resolved where possible, and a response that complies with paragraph 3 provided within 10 business days of the receipt of the complaint, and where the complaint alleges harm or risk of harm to one or more residents, the investigation shall be commenced immediately, to be implemented voluntarily.

WN #3: The Licensee has failed to comply with O. Reg. 79/10, s.101(2)(a)-(f)
The licensee shall ensure that a documented record is kept in the home that includes,
a)the nature of each verbal or written complaint;
b)the date the complaint was received;
c) the type of action taken to resolve the complaint, including the date of the action, time frames for actions to be taken and any follow-up action required;
d)the final resolution, if any;
e) every date on which any response was provided to the complainant and a description of the response; and
f)any response made in turn by the complainant.

Findings:
Records of complaints from an identified resident and her family are not available in the Home.

Inspector ID #: 199

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 with the requirement that a documented record is kept in the home that includes,
a)the nature of each verbal or written complaint;
b)the date the complaint was received;
c) the type of action taken to resolve the complaint, including the date of the action, time frames for actions to be taken and any follow-up action required;
d)the final resolution, if any;
e) every date on which any response was provided to the complainant and a description of the response; and
f)any response made in turn by the complainant, 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.

Auson Liu 199

Title: Date:

Date of Report: (if different from date(s) of inspection).

Feb 2, 2011