



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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Table with 4 columns: Report Date(s) / Date(s) du Rapport, Inspection No / No de l'inspection, Log # / Registre no, Type of Inspection / Genre d'inspection. Row 1: Mar 8, 2013, 2013_168202_0014, T-1446-12, Critical Incident System

Licensee/Titulaire de permis

TORONTO LONG-TERM CARE HOMES AND SERVICES
55 JOHN STREET, METRO HALL, 11th FLOOR, TORONTO, ON, M5V-3C6

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

KIPLING ACRES
2233 KIPLING AVENUE, ETOBICOKE, ON, M9W-4L3

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

VALERIE JOHNSTON (202)

Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct a Critical Incident System inspection.

This inspection was conducted on the following date(s): March 04, 05, 06, 2013

During the course of the inspection, the inspector(s) spoke with Director of Care, Nurse Manager, Registered Nursing Staff, Physiotherapist, Personal Care Assistants

During the course of the inspection, the inspector(s) observed the provision of care to residents, reviewed clinical records, observed resident #001's bed rails

The following Inspection Protocols were used during this inspection:



Personal Support Services
Safe and Secure Home

Findings of Non-Compliance were found during this inspection.

Table with 2 columns: Legend and Legendé. It defines non-compliance terms like WN (Written Notification), VPC (Voluntary Plan of Correction), DR (Director Referral), CO (Compliance Order), and WAO (Work and Activity Order) in both English and French. It also explains that non-compliance with LTCHA requirements was found and that a written notification was issued under section 152 of the LTCHA.

WN #1: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 6. Plan of care

Specifically failed to comply with the following:

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. 2007, c. 8, s. 6 (7).

Findings/Faits saillants :



1. The licensee failed to ensure that the care set out in the plan of care is provided to the resident as specified in the plan. [s.6.(7)]

Resident #001's written plan of care directs staff to remove all 1/4 sized bed rails from his/her bed due to risk of injury. Staff interviews revealed that resident #001, who has a cognitive impairment, moves around in bed. Staff confirmed that resident #001 does not reposition him/herself. Staff felt that this was or is likely due to his/her upper body rigidity and decreased strength. Resident #001 sustained an injury due to being caught on 1/4 side rail was later diagnosed with a fracture of unknown cause. During the course of this inspection on March 05, 2013, resident #001 was observed to be lying in bed with 1/4 side rails positioned up on either side of the bed. An interview with the Nurse Manager(NM)confirmed that resident #001 should not have bed side rails as specified in the plan of care. [s. 6. (7)]

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 the care set out in the plan of care is provided to the resident as specified in the plan, to be implemented voluntarily.

Issued on this 8th day of March, 2013

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

A handwritten signature in black ink, appearing to be "C. H.", written in a cursive style.