



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

**Rapport d'inspection  
prevue 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  
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<b>Date of inspection/Date de l'inspection</b> 09 December 2010	<b>Inspection No/ d'inspection</b> 2010_127_2570_09Dec094234	<b>Type of Inspection/Genre d'inspection</b> Follow Up (H-02963)
<b>Licensee/Titulaire</b> 2063414 Ontario Limited as General Partner of 2063414 Investment LP, 302 Town Centre Blvd., Suite 200, Markham ON L3R 0E8		
<b>Long-Term Care Home/Foyer de soins de longue durée</b> Leisureworld Caregiving Centre – Brantford, 389 West Street, Brantford ON N3R 3V9		
<b>Name of Inspector(s)/Nom de l'inspecteur(s)</b> Richard Hayden, Long Term Care Homes Inspector – Environmental Health #127		
<b>Inspection Summary / Sommaire d'inspection</b>		
<p>The purpose of this inspection was to conduct a follow up inspection regarding the following previously identified non-compliance:</p> <p><b>Follow-up Inspection – 28 July 2009</b></p> <ul style="list-style-type: none"> <li>unmet criteria: O2.1 and O1.18</li> </ul> <p>During the course of the inspection, the inspector spoke with the administrator, maintenance manager, registered staff and housekeeping staff.</p> <p>During the course of the inspection, the inspector undertook a visual inspection of all areas of the home where previous non-compliance was identified and reviewed hot water temperature records.</p> <p>The following Inspection Protocols were used during this inspection:</p> <ul style="list-style-type: none"> <li>Accommodation Services – Maintenance</li> <li>Safe and Secure Home</li> </ul> <p><input checked="" type="checkbox"/> Findings of Non-Compliance were found during this inspection. The following action was taken:</p> <p>1 WN 1 VPC</p> <p>Corrected Non-Compliance is listed in the section titled Corrected Non-Compliance.</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

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'exigences prevue le paragraph 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 prevue 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.9.1.i.  
 9. Every licensee of a long-term care home shall ensure that the following rules are complied with:  
 1. All doors leading to stairways and the outside of the home must be,  
 i. kept closed and locked,

**Findings:**

09 December 2010


The following doors leading to the outside of the home were not locked at the time of inspection:

1. Ambulance door located near the nursing station closest to the main entrance.
2. Garden View dining room door.
3. Pleasant View dining room door.

**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 to be implemented voluntarily for achieving compliance with keeping doors locked that lead to the outside of the home.

CORRECTED NON-COMPLIANCE / Non-respects à Corrigé				
REQUIREMENT EXIGENCE	TYPE OF ACTION/ORDER	ACTION/ ORDER #	INSPECTION REPORT #	INSPECTOR ID #
<b>O2.1</b> , LTC Homes Program Manual now found in <i>LTCHA, 2007</i> , c.8., s. 15.(2)(c)			Follow-up Inspection – 28 July 2009	127
<b>O1.18</b> , LTC Homes Program Manual now found in <i>O. Reg. 79/10</i> , s. 90.(2)(k)			Follow-up Inspection – 28 July 2009	127

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). <i>16 December 2010</i>	