



**Ministry of Health and  
Long-Term Care**

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

**Ministère de la Santé et des  
Soins de longue durée**

**Rapport d'inspection 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**

Toronto Service Area Office  
5700 Yonge Street 5th Floor  
TORONTO ON M2M 4K5  
Telephone: (416) 325-9660  
Facsimile: (416) 327-4486

Bureau régional de services de  
Toronto  
5700 rue Yonge 5e étage  
TORONTO ON M2M 4K5  
Téléphone: (416) 325-9660  
Télécopieur: (416) 327-4486

## **Public Copy/Copie du public**

<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>
Jan 5, 11, 2018	2018_685648_0001	000271-18	Complaint

### **Licensee/Titulaire de permis**

2063414 ONTARIO LIMITED AS GENERAL PARTNER OF 2063414 INVESTMENT LP  
302 Town Centre Blvd., Suite #200 TORONTO ON L3R 0E8

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

Fieldstone Commons Care Community  
1000 Ellesmere Road SCARBOROUGH ON M1P 5G2

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

JOVAIRIA AWAN (648)

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

**The purpose of this inspection was to conduct a Complaint inspection.**

**This inspection was conducted on the following date(s): January 05, 2018**

**During the course of this inspection, complaint log #000271-18 was inspected related to the home being too cold.**

**During the course of the inspection, the inspector(s) spoke with personal support worker(s) (PSW), registered nurse(s) (RN), the environmental services manager (ESM), the executive director (ED), and residents in the home.**

**The following Inspection Protocols were used during this inspection:**



**Accommodation Services - Maintenance  
Safe and Secure Home**

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

1 WN(s)

0 VPC(s)

1 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. 8. (1)	CO #901	2018_685648_0001		648



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

<p>Legend</p> <p>WN – Written Notification  VPC – Voluntary Plan of Correction  DR – Director Referral  CO – Compliance Order  WAO – Work and Activity Order</p>	<p>Legendé</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 O.Reg 79/10, s. 8. Policies, etc., to be followed, and records**

**Specifically failed to comply with the following:**

**s. 8. (1) Where the Act or this Regulation requires the licensee of a long-term care home to have, institute or otherwise put in place any plan, policy, protocol, procedure, strategy or system, the licensee is required to ensure that the plan, policy, protocol, procedure, strategy or system,**

**(a) is in compliance with and is implemented in accordance with applicable requirements under the Act; and O. Reg. 79/10, s. 8 (1).**

**(b) is complied with. O. Reg. 79/10, s. 8 (1).**



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**Findings/Faits saillants :**



The licensee failed to ensure that where the act or the regulation requires the licensee of a long-term care home to have, institute or otherwise put in place any plan, policy, protocol, procedure, strategy or system is complied with.

Ontario Regulation 79/10 s. 21. required that every licensee of a long-term care home shall ensure that the home is maintained at a minimum temperature of 22 degrees Celsius.

Review of complaint log #000271-18/info line-54826-TO submitted to the MOHLTC identified the main floor of the facility and resident #001's room was very cold. The complainant identified he/she informed the home but nothing had been done to address the concern. The complainant identified he/she was unsure if the radiators along the walls in resident areas along walls with windows were forcing air into the home. The complaint identified resident #001 was very cold.

The inspector entered the home at approximately 10:40 hours on January 04, 2017.

Observations conducted by the inspector and with the homes ESM identified numerous resident rooms and home areas at a temperature below 22 degrees Celsius.

Brief interviews with residents #001, #002, #003, and #004 identified they felt the home and their individual rooms were very cold and uncomfortable.

Review of the homes Systems Temperature Control policy (#V-C-10.40, January 2015) identified that the environmental services manager or designate will perform daily checks to ensure that space temperature in all resident areas are maintained at a minimum of 72 degrees Fahrenheit or 22 degrees Celsius.

Interview and observations conducted with the homes FSM for the identified rooms and resident areas acknowledged that the resident areas were not maintained at a minimum temperature of 22 degrees Celsius. The FSM identified there was one main control per three rooms for the heating radiator system which is utilized to heat resident rooms.

The FSM was unable to demonstrate how the home ensured all resident areas were maintained at 22 degrees Celsius following the noted observations and review of the homes policy.



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***Additional Required Actions:***

***CO # - 901 was served on the licensee. Refer to the "Order(s) of the Inspector".***

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**Issued on this 12th day of January, 2018**

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

**Original report signed by the inspector.**



**Ministry of Health and  
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**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

**Ordre(s) de l'inspecteur**

Aux termes de l'article 153 et/ou  
de l'article 154 de la *Loi de 2007 sur les foyers  
de soins de longue durée*, L.O. 2007, chap. 8

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

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

**Public Copy/Copie du public**

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**Name of Inspector (ID #) /**

**Nom de l'inspecteur (No) :** JOVAIRIA AWAN (648)

**Inspection No. /**

**No de l'inspection :** 2018\_685648\_0001

**Log No. /**

**No de registre :** 000271-18

**Type of Inspection /**

**Genre d'inspection:** Complaint

**Report Date(s) /**

**Date(s) du Rapport :** Jan 5, 11, 2018

**Licensee /**

**Titulaire de permis :** 2063414 ONTARIO LIMITED AS GENERAL PARTNER  
OF 2063414 INVESTMENT LP  
302 Town Centre Blvd.,, Suite #200, TORONTO, ON,  
L3R-0E8

**LTC Home /**

**Foyer de SLD :** Fieldstone Commons Care Community  
1000 Ellesmere Road, SCARBOROUGH, ON, M1P-5G2

**Name of Administrator /**

**Nom de l'administratrice**

**ou de l'administrateur :** Lorraine Gibson

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To 2063414 ONTARIO LIMITED AS GENERAL PARTNER OF 2063414  
INVESTMENT LP, you are hereby required to comply with the following order(s) by  
the date(s) set out below:



**Ministry of Health and  
Long-Term Care**

**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

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**Order # /****Ordre no :** 901**Order Type /****Genre d'ordre :** Compliance Orders, s. 153. (1) (a)**Pursuant to / Aux termes de :**

O.Reg 79/10, s. 8. (1) Where the Act or this Regulation requires the licensee of a long-term care home to have, institute or otherwise put in place any plan, policy, protocol, procedure, strategy or system, the licensee is required to ensure that the plan, policy, protocol, procedure, strategy or system,  
(a) is in compliance with and is implemented in accordance with applicable requirements under the Act; and  
(b) is complied with. O. Reg. 79/10, s. 8 (1).

**Order / Ordre :**

The licensee shall comply with the homes policy titled, Systems Temperature Control ( V-C10.40)

The licensee shall immediately:

1. Ensure temperature in all resident areas is maintained at a minimum of 22 degrees celcius.
2. Monitor the temperature of all resident areas on a daily basis, including the identified rooms in this inspection. Temperature logs will be submitted to [jovairia.awan@ontario.ca](mailto:jovairia.awan@ontario.ca) on January 8, 2017.
3. Monitor the residents who reside on the first and second floor home areas for signs or symptoms related to cold, including hypothermia. Document any change in status of affected residents and what interventions were offered and accepted.

**Grounds / Motifs :**

1. The licensee failed to ensure that were the act or the regulation requires the licensee of a longterm care home to have, institute or otherwise put in place any plan, policy, protocol, procedures strategy or system is complied with.

Ontario Regulation 79/10 s. 21. required that every licensee of a long-term care home shall ensure that the home is maintained at a minimum temperature of 22 degrees Celsius.



**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*

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Brief interviews with residents #001, #002, #003, and #004 identified they felt the home and their individual rooms were very cold and uncomfortable.

Review of the homes Systems Temperature Control policy (#V-C-10.40, January 2015) identified that the environmental services manager or designate will perform daily checks to ensure that space temperature in all resident areas are maintained at a minimum of 72 degrees fahrenheit or 22 degrees celcius.

Interview and observations conducted with the homes FSM for the identified rooms and resident areas acknowledged that the resident areas were not maintained at a minimum temperature of 22 degrees celcius. The FSM identified there was one main control per three rooms for the heading radiator system which is utilized to heat resident rooms.

The FSM was unable to demonstrate how the home ensured all resident areas were maintained at 22 degrees celcius following the noted observations and review of the homes policy.

(648)

**This order must be complied with by /  
Vous devez vous conformer à cet ordre d'ici le : Immediate**



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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 services for the Licensee.

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

Director  
c/o Appeals Coordinator  
Long-Term Care Inspections Branch  
Ministry of Health and Long-Term Care  
1075 Bay Street, 11th Floor  
TORONTO, ON  
M5S-2B1  
Fax: 416-327-7603



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When service is made by registered mail, it is deemed to be made on the fifth day after the day of mailing, when service is made by a commercial courier it is deemed to be made on the second business day after the day the courier receives the document, 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 tribunal not connected with the Ministry. They are established by legislation to review matters concerning health care services. If the Licensee decides to request a hearing, the Licensee must, within 28 days of being served with the notice of the Director's decision, give a written notice of appeal to both:

Health Services Appeal and Review Board and the Director

Attention Registrar  
151 Bloor Street West  
9th Floor  
Toronto, ON M5S 2T5

Director  
c/o Appeals Coordinator  
Long-Term Care Inspections Branch  
Ministry of Health and Long-Term Care  
1075 Bay Street, 11th Floor  
TORONTO, ON  
M5S-2B1  
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](http://www.hsarb.on.ca).



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## **RENSEIGNEMENTS RELATIFS AUX RÉEXAMENS DE DÉCISION ET AUX APPELS**

**PRENEZ AVIS :**

Le/la titulaire de permis a le droit de faire une demande de réexamen par le directeur de cet ordre ou de ces ordres, et de demander que le directeur suspende cet ordre ou ces ordres conformément à l'article 163 de la Loi de 2007 sur les foyers de soins de longue durée.

La demande au directeur doit être présentée par écrit et signifiée au directeur dans les 28 jours qui suivent la signification de l'ordre au/à la titulaire de permis.

La demande écrite doit comporter ce qui suit :

- a) les parties de l'ordre qui font l'objet de la demande de réexamen;
- b) les observations que le/la titulaire de permis souhaite que le directeur examine;
- c) l'adresse du/de la titulaire de permis aux fins de signification.

La demande de réexamen présentée par écrit doit être signifiée en personne, par courrier recommandé, par messagerie commerciale ou par télécopieur, au :

Directeur  
a/s du coordonnateur/de la coordonnatrice en matière d'appels  
Direction de l'inspection des foyers de soins de longue durée  
Ministère de la Santé et des Soins de longue durée  
1075, rue Bay, 11e étage  
Toronto ON M5S 2B1  
Télécopieur : 416 327-7603



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Quand la signification est faite par courrier recommandé, elle est réputée être faite le cinquième jour qui suit le jour de l'envoi, quand la signification est faite par messagerie commerciale, elle est réputée être faite le deuxième jour ouvrable après le jour où la messagerie reçoit le document, et lorsque la signification est faite par télécopieur, elle est réputée être faite le premier jour ouvrable qui suit le jour de l'envoi de la télécopie. Si un avis écrit de la décision du directeur n'est pas signifié au/à la titulaire de permis dans les 28 jours de la réception de la demande de réexamen présentée par le/la titulaire de permis, cet ordre ou ces ordres sont réputés être confirmés par le directeur, et le/la titulaire de permis est réputé(e) avoir reçu une copie de la décision en question à l'expiration de ce délai.

Le/la titulaire de permis a le droit d'interjeter appel devant la Commission d'appel et de révision des services de santé (CARSS) de la décision du directeur relative à une demande de réexamen d'un ordre ou des ordres d'un inspecteur ou d'une inspectrice conformément à l'article 164 de la Loi de 2007 sur les foyers de soins de longue durée. La CARSS est un tribunal autonome qui n'a pas de lien avec le ministère. Elle est créée par la loi pour examiner les questions relatives aux services de santé. Si le/la titulaire décide de faire une demande d'audience, il ou elle doit, dans les 28 jours de la signification de l'avis de la décision du directeur, donner par écrit un avis d'appel à la fois à :

la Commission d'appel et de révision des services de santé et au directeur

À l'attention du/de la registrateur(e)  
151, rue Bloor Ouest, 9e étage  
Toronto ON M5S 2T5

Directeur  
a/s du coordonnateur/de la coordonnatrice en matière  
d'appels  
Direction de l'inspection des foyers de soins de longue durée  
Ministère de la Santé et des Soins de longue durée  
1075, rue Bay, 11e étage  
Toronto ON M5S 2B1  
Télécopieur : 416 327-7603

À la réception de votre avis d'appel, la CARSS en accusera réception et fournira des instructions relatives au processus d'appel. Le/la titulaire de permis peut en savoir davantage sur la CARSS sur le site Web [www.hsarb.on.ca](http://www.hsarb.on.ca).

**Issued on this 5th day of January, 2018**

**Signature of Inspector /  
Signature de l'inspecteur :**



**Ministry of Health and  
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**Name of Inspector /**

**Nom de l'inspecteur :**

Jovairia Awan

**Service Area Office /**

**Bureau régional de services :** Toronto Service Area Office