



**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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Public Copy/Copie du public

Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Feb 25, 2014	2014_283544_0007	S-000037- 14, S- 000450-13	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

LEISUREWORLD CAREGIVING CENTRE - NORTH BAY
401 WILLIAM STREET, NORTH BAY, ON, P1A-1X5

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

FRANCA MCMILLAN (544)

Inspection Summary/Résumé de l'inspection



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

**This inspection was conducted on the following date(s): February 18, 19, 20, 21,
2014**

S-000037-14

S-000450-13

S-000451-13

**During the course of the inspection, the inspector(s) spoke with Administrator,
Director of Care (DOC), RAI/MDS Co-ordinator, Registered Staff, Personal
Support Workers (PSWs), Housekeeping staff, Residents and Families.**

**During the course of the inspection, the inspector(s) observed daily the direct
delivery of care and services to the residents, staff to resident interactions, the
daily duties performed by housekeeping staff, the cleanliness of the floors of the
residents' rooms and the common areas, and the condition and cleanliness of
the residents' wheelchairs, reviewed the residents' health care records, care
plans, housekeeping cleaning records, reviewed the home's policy regarding
Prevention of Abuse, the Continence Care and Bowel Management Program and
Accommodation Services-Housekeeping Program, reviewed staff education,
training and staff attendance records in regards to Prevention of Abuse Policy
and the Continence Care and Bowel Management Program**

*** The Critical Incident Response Inspection Protocol was opened in error.**

**The following Inspection Protocols were used during this inspection:
Accommodation Services - Housekeeping
Critical Incident Response
Prevention of Abuse, Neglect and Retaliation**

Findings of Non-Compliance were found during this inspection.



NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

Legend	Legendé
WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order	WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités
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.) The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.	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. Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.



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WN #1: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 19. Duty to protect

Specifically failed to comply with the following:

s. 19. (1) Every licensee of a long-term care home shall protect residents from abuse by anyone and shall ensure that residents are not neglected by the licensee or staff. 2007, c. 8, s. 19 (1).

Findings/Faits saillants :

1. Inspector # 544 reviewed Resident # 002's health care records, progress notes and Point of Care Record (POC) and found that care and services were not provided to Resident #002 from 0630 hours to 0950 hours when the resident's Power Of Attorney called the staff for assistance with the Resident. The Plan of Care for Resident # 002 identified that personal hygiene was to be provided in preparation for the breakfast meal, including oral hygiene, continence care, dressing, and transferring. The Inspector reviewed the Resident's Point of Care record and identified that there was no documentation noted related to the provision of these care and services areas.

Inspector interviewed Staff # 104 Registered Nurse, who confirmed that no care or services, as outlined in the plan of care, were provided to Resident # 002. The licensee of the long term care home did not ensure that the resident was not neglected by staff. [s. 19. (1)]

Issued on this 25th day of February, 2014

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

Nancy McMillan #544