



**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

Toronto Service Area Office
65 St. Clair Avenue West, 8th Floor
Toronto ON M4V 2Y7

Bureau régional de services de Toronto
65, avenue St. Clair Ouest, 8^{ième} étage
Toronto, ON M4V 2Y7

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

Telephone: 416-325-9297
1-866-311-8002

Téléphone: 416-325-9297
1-866-311-8002

Division de la responsabilisation et de la performance du
système de santé
Direction de l'amélioration de la performance et de la
conformité

Facsimile: 416-327-4486

Télécopieur: 416-327-4486

Licensee Copy/Copie du Titulaire Public Copy/Copie Public

Date(s) of inspection/Date de l'inspection	Inspection No/ d'inspection	Type of Inspection/Genre d'inspection
November 8, 2010	2010_116_2594_20Dec122529	Complaint

Licensee/Titulaire
Leisureworld Senior Care LP on Behalf of 2063414
Long-Term Care Home/Foyer de soins de longue durée
Leisureworld Caregiving Centre- St. George

Name of Inspector(s)/Nom de l'inspecteur(s)
Saran Daniel-Dodd, Nursing Inspector

Inspection Summary/Sommaire d'inspection

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

During the course of the inspection, the inspector spoke with: The Administrator, Director of Care, and Resident Service Coordinator.

During the course of the inspection, the inspector: reviewed the health record of a resident, interviewed the Administrator, Director of Care, and Resident Service Coordinator.

The following Inspection Protocols were used in part or in whole during this inspection:
Admission and Discharge inspection Protocol

Findings of Non-Compliance were found during this inspection. The following action was taken:
2 WN

NON-COMPLIANCE / (Non-respectés)
Definitions/Définitions

WN – Written Notifications/Avvis 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'exigence prévue le paragraphe 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 prévue par la présente loi" au paragraphe 2(1) de la loi.

WN #1: The Licensee has failed to comply with the Nursing Homes Act, R.S.O. 1990, Chapter N7, Section 48(1).

No licensee shall discharge a resident from a nursing home unless permitted or required to do so by this section or section 47.1. O.Reg. 181/95, s.3 (1).

Findings: This provision is contravened as evidenced by:

- Resident was removed from the home and subsequently transferred to hospital.
- The licensee discharged the resident to hospital.

Inspector ID #: 116

WN #2: The Licensee has failed to comply with the Nursing Homes Act, R.S.O. 1990, Chapter N7, Section 48(5).

Before discharging a resident from a nursing home under clause (2) (b) or (c), the licensee of the home shall assist the resident and the person who is lawfully authorized to make a decision on the behalf of the resident concerning the resident's personal care to plan for the discharge, by identifying alternative accommodation, service organizations and other resources in the community.

Findings: This provision is contravened as evidenced by:

- Resident was discharged from the home. The licensee did not assist the resident in arranging alternative accommodations to meet his/her personal care needs.
- The licensee did not inform the resident or SDM of the discharge.

Inspector ID #: 116




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 prévue
le *Loi de 2007 les
foyers de soins de
longue durée*

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). December 23, 2010	