

**Ministry of Long-Term Care**  
Long-Term Care Operations Division  
Long-Term Care Inspections Branch

**Toronto District**  
5700 Yonge Street, 5th Floor  
Toronto, ON, M2M 4K5  
Telephone: (866) 311-8002

<b>Original Public Report</b>	
<b>Report Issue Date:</b> March 30, 2023	
<b>Inspection Number:</b> 2023-1058-0002	
<b>Inspection Type:</b> Follow up Critical Incident System	
<b>Licensee:</b> Schlegel Villages Inc.	
<b>Long Term Care Home and City:</b> Maynard Nursing Home, Toronto	
<b>Lead Inspector</b> Oraldeen Brown (698)	<b>Inspector Digital Signature</b>
<b>Additional Inspector(s)</b>	

<b>INSPECTION SUMMARY</b>
<p>The inspection occurred onsite on the following date(s): March 17, 20, 21, and 22, 2023.</p> <p>The following intake(s) were inspected:                      Intake #00019446 (CI#2211-000002-23) was related to falls.                      Intake: #00019314 - Order #001 from Inspection #2022-1058-0001 related to FLTCA, 2021, s. 6 (7).</p> <p>The following intakes were completed in this inspection:                      Intake: #00013468 (CI#2211-000016-22); #00014233 (CI#2211-000018-22); #00021162 (CI#2211-000004-23) were related to falls.</p>

**Previously Issued Compliance Order(s)**

The following previously issued Compliance Order(s) were found to be in compliance:  
 Order #001 from Inspection #2022-1058-0001 related to FLTCA, 2021, s. 6 (7) inspected by Oraldeen Brown (698)

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

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Resident Care and Support Services  
Infection Prevention and Control  
Reporting and Complaints  
Falls Prevention and Management

## INSPECTION RESULTS

### WRITTEN NOTIFICATION: Reports re critical incidents

**NC #001 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.**

Non-compliance with: O. Reg. 246/22, s. 115 (4) (b)

The licensee failed to ensure that where the licensee determines that the injury has resulted in a significant change in the resident's health condition, to inform the Director of the incident no later than three business days after the occurrence of the incident.

**Rationale and Summary**

A resident experienced a fall and sustained an injury for which they went to an acute care facility.

The following day, the home was notified by the acute care facility of a significant change in the resident's condition.

However, the home failed to report the incident to the Ministry, until five days later.

The General Manager (GM) acknowledged that the incident should have been reported when they were informed of the resident's significant change in condition.

**Sources:** Critical Incident (CI) report #2211-000002-23, the home's policy #04-23, titled, "Mandatory Reporting (Reporting Certain Matters to Director)", last reviewed on 10/30/2022, interviews with GM and others. [698]

### WRITTEN NOTIFICATION: Retention of resident records

**NC #002 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.**

Non-compliance with: O. Reg. 246/22, s. 276

The licensee failed to ensure that the records of a resident were kept at the home.

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**Rationale and Summary**

The home experienced a flood where a toilet overflowed and caused water damage that affected the GM's office.

The water damage to the office was discovered three days later.

However, the water damage to resident's files were discovered seventeen days later, where mold had consumed the files.

Upon discovering this, the GM and the Director of Environmental Services (DES), proceeded to denature the documents using water before discarding the documents in the garbage.

**Sources:** Critical Incident Report CI #2211-000002-23, the home's policy #23-11, titled, "Record Destruction and Retention", last reviewed on 01/02/2019, interview with GM and others. [698]