

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

**Rapport d'inspection en vertu de  
la Loi de 2007 sur les foyers de  
soins de longue durée**

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

**Division des opérations relatives aux  
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 rapport 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>
Feb 18, 2021	2020_754764_0017	024187-19	Follow up

---

**Licensee/Titulaire de permis**

Toronto Finnish-Canadian Seniors Centre  
795 Eglinton Avenue East Toronto ON M4G 4E4

---

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

Suomi-Koti Toronto Nursing Home  
795 Eglinton Avenue East Toronto ON M4G 4E4

---

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

NAZILA AFGHANI (764)

---

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

---

**The purpose of this inspection was to conduct a Follow up inspection.**

**This inspection was conducted on the following date(s): December 14 and 15, 2020.**

**The following Compliance Order (CO) follow-up intake was inspected during this inspection: log #021248-19 (A)- related to operation of the unlicensed respite beds.**

**During the course of the inspection, the inspector(s) spoke with the Executive Director (ED), Administrator/ Director of Care (DOC), Infection Control Nurse, Housekeeping Supervisor, Registered Practical Nurses (RPNs) and Personal Support Workers (PSWs).**

**The following Inspection Protocols were used during this inspection:  
Infection Prevention and Control**

**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:**

<b>REQUIREMENT/ EXIGENCE</b>	<b>TYPE OF ACTION/ GENRE DE MESURE</b>	<b>INSPECTION # / DE L'INSPECTION</b>	<b>NO</b>	<b>INSPECTOR ID #/ NO DE L'INSPECTEUR</b>
LTCHA, 2007 S.O. 2007, c.8 s. 104. (1)	CO #001	2019_630589_0028		764

**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>Légende</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 LTCHA, 2007 S.O. 2007, c.8, s. 5. Every licensee of a long-term care home shall ensure that the home is a safe and secure environment for its residents. 2007, c. 8, s. 5.**

**Findings/Faits saillants :**

1. The licensee has failed to ensure a safe home environment by not implementing the Infection Prevention and Control (IPAC) measure of COVID-19 active screening as required for all staff and visitors upon exit of the home.

According to Directive #3 for Long Term Care Homes under the Long Term Care Homes Act, 2007, issued under section 77.7 of the Health Protection and Promotion Act (HPPA), R.S.O. 1990, c.H.7 with effective date of implementation on December 9, 2020: LTCHs must immediately implement active screening of all staff, visitors and anyone else entering the LTCH for COVID-19 with the expectation of first responders, who should, in emergency situations, be permitted entry without screening. Active screening must include twice daily (at the beginning and end of the day or shift) symptom screening and temperature checks.

On two different days, the inspector observed the nurses and PSWs left the unit and did not receive symptom screening or temperature checks at the end of their shift.

Review of staff and visitor active screening sign-in sheets for three days, showed that symptom screening and temperature checks were not completed for a total of 58 entries prior to end of the day.

During interviews with three nursing staff members, they stated that no screening was done at the end of the shift or end of the visit.

During an interview with the Administrator/ DOC, they verified that twice daily symptom screening and temperature checks were not done as required by Directive #3.

Sources: Directive #3 for Long Term Care Homes, staff active screening sign-in sheet, observations and interview with RN #102, RPN #103 and PSW #105. [s. 5.]

***Additional Required Actions:***

***CO # - 001 will be served on the licensee. Refer to the "Order(s) of the Inspector".***

---

**Issued on this 23rd day of February, 2021**

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

**Original report signed by the inspector.**

**Order(s) of the Inspector**

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

Pursuant to section 153 and/or  
section 154 of the *Long-Term  
Care Homes Act, 2007*, S.O.  
2007, c. 8

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 Operations Division  
Long-Term Care Inspections Branch

Division des opérations relatives aux soins de longue durée  
Inspection de soins de longue durée

**Public Copy/Copie du rapport public**

---

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

**Nom de l'inspecteur (No) :** NAZILA AFGHANI (764)

**Inspection No. /**

**No de l'inspection :** 2020\_754764\_0017

**Log No. /**

**No de registre :** 024187-19

**Type of Inspection /**

**Genre d'inspection:** Follow up

**Report Date(s) /**

**Date(s) du Rapport :** Feb 18, 2021

**Licensee /**

**Titulaire de permis :** Toronto Finnish-Canadian Seniors Centre  
795 Eglinton Avenue East, Toronto, ON, M4G-4E4

**LTC Home /**

**Foyer de SLD :** Suomi-Koti Toronto Nursing Home  
795 Eglinton Avenue East, Toronto, ON, M4G-4E4

**Name of Administrator /**

**Nom de l'administratrice**

**ou de l'administrateur :** Kathleen Francis

---

To Toronto Finnish-Canadian Seniors Centre, you are hereby required to comply with the following order(s) by the date(s) set out below:

**Order(s) of the Inspector**

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

Pursuant to section 153 and/or section 154 of the *Long-Term Care Homes Act, 2007*, S.O. 2007, c. 8

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

**Order # /**

**No d'ordre :** 001

**Order Type /**

**Genre d'ordre :** Compliance Orders, s. 153. (1) (a)

**Pursuant to / Aux termes de :**

LTCHA, 2007 S.O. 2007, c.8, s. 5. Every licensee of a long-term care home shall ensure that the home is a safe and secure environment for its residents. 2007, c. 8, s. 5.

**Order / Ordre :**

The licensee must be compliant with s. 5 of the LTCHA. Specifically, the licensee must ensure that:

1. A screener, all the times, is present at the entrance of the home to actively screen all persons entering or exiting the home for signs and symptoms of COVID-19.
2. All staff and visitors receive active screening in accordance with best practices prior to exit of the home.
3. Screening must include at a minimum, a temperature check as well as symptom screening. A record of all screening must be documented.
4. Conduct weekly audits of active screening for staff and visitors for a period of one month. Documentation of audits must include at minimum, name of the screener, date, results of the audit and any corrective actions taken as a result of the audit.

**Grounds / Motifs :**

1. Noncompliance found regarding s. 5, The licensee has failed to ensure a safe home environment by not implementing the Infection Prevention and Control (IPAC) measure of COVID-19 active screening as required for all staff, essential visitors and other visitors upon exit of the home.

The licensee has failed to ensure a safe home environment by not implementing the Infection Prevention and Control (IPAC) measure of COVID-19 active screening as required for all staff and visitors upon exit of the home.

**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

According to Directive #3 for Long Term Care Homes under the Long Term Care Homes Act, 2007, issued under section 77.7 of the Health Protection and Promotion Act (HPPA), R.S.O. 1990, c.H.7 with effective date of implementation on December 9, 2020:

LTCHs must immediately implement active screening of all staff, visitors and anyone else entering the LTCH for COVID-19 with the expectation of first responders, who should, in emergency situations, be permitted entry without screening. Active screening must include twice daily (at the beginning and end of the day or shift) symptom screening and temperature checks.

On two different days, the inspector observed the nurses and PSWs left the unit and did not receive symptom screening or temperature checks at the end of their shift.

Review of staff and visitor active screening sign-in sheets for three days, showed that symptom screening and temperature checks were not completed for a total of 58 entries prior to end of the day.

During interviews with three nursing staff members, they stated that no screening was done at the end of the shift or end of the visit.

During an interview with the Administrator/ DOC, they verified that twice daily symptom screening and temperature checks were not done as required by Directive #3.

Sources: Directive #3 for Long Term Care Homes, staff active screening sign-in sheet, observations and interview with RN #102, RPN #103 and PSW #105. [s. 5.]

An order was made by taking the following factors into account:

**Severity:** There was minimal risk of harm as symptom screening and temperature checks were done on entrance for staff and visitors.

**Scope:** This non-compliance was widespread as exit screening and checking of the temperature was not done for 58 staff and visitor.

**Order(s) of the Inspector**

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

Pursuant to section 153 and/or  
section 154 of the *Long-Term  
Care Homes Act, 2007*, S.O.  
2007, c. 8

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

Compliance history: Six Written Notifications (WN), three Voluntary Plans of  
Correction (VPCs) and one Compliance Order (CO) were issued to the home  
related to different sections of the legislation in the past 36 months. .  
(764)

**This order must be complied with by /**

**Vous devez vous conformer à cet ordre d'ici le :**

Feb 24, 2021

**Order(s) of the Inspector**

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

Pursuant to section 153 and/or  
section 154 of the *Long-Term  
Care Homes Act, 2007*, S.O.  
2007, c. 8

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

**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 Long-Term Care  
1075 Bay Street, 11th Floor  
Toronto, ON M5S 2B1  
Fax: 416-327-7603

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:

**Order(s) of the Inspector**

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

Pursuant to section 153 and/or  
section 154 of the *Long-Term  
Care Homes Act, 2007*, S.O.  
2007, c. 8

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

Health Services Appeal and Review Board and the Director

Attention Registrar  
Health Services Appeal and Review Board  
151 Bloor Street West, 9th Floor  
Toronto, ON M5S 1S4

Director  
c/o Appeals Coordinator  
Long-Term Care Inspections Branch  
Ministry of 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).

**Order(s) of the Inspector**

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

Pursuant to section 153 and/or  
section 154 of the *Long-Term  
Care Homes Act, 2007*, S.O.  
2007, c. 8

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

**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 des Soins de longue durée  
1075, rue Bay, 11<sup>e</sup> étage  
Toronto ON M5S 2B1  
Télécopieur : 416-327-7603

**Order(s) of the Inspector****Ordre(s) de l'inspecteur**

Pursuant to section 153 and/or  
section 154 of the *Long-Term  
Care Homes Act, 2007*, S.O.  
2007, c. 8

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

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)  
Commission d'appel et de révision  
des services de santé  
151, rue Bloor Ouest, 9e étage  
Toronto ON M5S 1S4

Directeur  
a/s du coordonnateur/de la coordonnatrice en matière  
d'appels  
Direction de l'inspection des foyers de soins de longue durée  
Ministère 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 18th day of February, 2021**

**Signature of Inspector /**

**Signature de l'inspecteur :**

**Name of Inspector /**

**Nom de l'inspecteur :** Nazila Afghani

**Service Area Office /**

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