



**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**

**Health System Accountability and
Performance Division
Performance Improvement and
Compliance Branch**

**Division de la responsabilisation et de la
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Direction de l'amélioration de la
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Report Date(s) / Date(s) du apport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Feb 11, 2016	2016_353589_0002	034414-15	Complaint

Licensee/Titulaire de permis

THE WEXFORD RESIDENCE INC.
1860 Lawrence Avenue East TORONTO ON M1R 5B1

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

THE WEXFORD
1860 LAWRENCE AVENUE EAST SCARBOROUGH ON M1R 5B1

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

JOANNE ZAHUR (589)

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): January 19, 20, 21, 22, and 27, 2016.

This inspection is related to a complaint regarding the uneven walkway outside the home posing a risk to residents.

During the course of the inspection, the inspector(s) spoke with Chief Executive Officer (CEO), Director of Environmental Services (DES), complainant and resident.

During the course of the inspection, the inspector(s) conducted observations of the outside grounds including the sidewalk, reviewed repair quotes, reviewed Family Council meeting minutes, preventative maintenance records, and relevant policies and procedures related to this inspection.

**The following Inspection Protocols were used during this inspection:
Safe and Secure Home**

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

1 WN(s)

1 VPC(s)

0 CO(s)

0 DR(s)

0 WAO(s)



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 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 failed to ensure that the home is a safe and secure environment for its residents.

Record review of Family Council meeting minutes from June 16, 2015, revealed a concern about the uneven sidewalk was brought forward to staff #100 to address. Staff



#100 was the guest speaker at the Family Council meeting that evening and revealed that the uneven sidewalks were a safety concern and that quotes were being gathered for the repairs to be done. Staff #100 advised to please use extreme caution when walking on the grounds.

Observation of the Family Council meeting notices dated June 16, 2015, and January 19, 2016, revealed that residents, family members, friends and tenants are invited to attend The Wexford Family Council meetings.

On January 19, 2016, at the Family Council meeting staff #101 was the invited guest and an identified resident was also in attendance. The identified resident raised the concern about the uneven sidewalks being unsafe for mobility aids to move along it.

On January 22, 2016, observations by the inspector revealed uneven concrete slabs on the sidewalk located on the east side of building. The gaps between the slabs measured an average of five centimetres (CM) in several areas that could pose a trip hazard. There are also eight alcove areas along this sidewalk and in the first four alcoves benches are secured.

Interview with the identified resident revealed during the cold weather he/she will go to the alcove areas. The identified resident further revealed he/she is afraid that his/her mobility aid will get caught in the uneven sidewalk and will fall so takes extra care to self-propel the mobility aid on the inner part of the sidewalk that is smoother.

Interview with the staff #101 revealed the cost of repairs to correct the uneven concrete slabs had not been approved in November 2015, as the approaching cold weather would not be an appropriate time to complete the repairs. Staff #101 further revealed that sidewalk repair quotes would be obtained to plan for repairs to be completed in the spring 2016.

Interview with staff #100 confirmed the home failed to provide a safe and secure environment for its residents by recognizing the safety concern and advising extreme caution when walking on the grounds. [s. 5.]



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Additional Required Actions:

VPC - pursuant to the Long-Term Care Homes Act, 2007, S.O. 2007, c.8, s.152(2) the licensee is hereby requested to prepare a written plan of correction for achieving compliance to ensure that the home is a safe and secure environment for its residents, to be implemented voluntarily.

Issued on this 11th day of February, 2016

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

Original report signed by the inspector.