

## Inspection Report Under the Fixing Long-Term Care Act, 2021

### **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

# **Public Report**

Report Issue Date: March 11, 2025 Inspection Number: 2025-1425-0002

Inspection Type:

Other

**Critical Incident** 

**Licensee:** Hellenic Home for the Aged Inc.

Long Term Care Home and City: Hellenic Home - Scarborough, Scarborough

## **INSPECTION SUMMARY**

The inspection occurred onsite on the following date(s): March 4-7, 10, and 11, 2025.

The following Critical Incident System (CIS) intake(s) were inspected:

- Intake: #00137021 related to falls prevention and management.
- Intake: #00138700 related to infectious disease outbreak.

The following other intake(s) were inspected:

• Intake: #00139222 related to emergency planning annual attestation.

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

Infection Prevention and Control Safe and Secure Home Falls Prevention and Management

# **INSPECTION RESULTS**



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## WRITTEN NOTIFICATION: Falls prevention and management

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

### Non-compliance with: O. Reg. 246/22, s. 54 (2)

Falls prevention and management

s. 54 (2) Every licensee of a long-term care home shall ensure that when a resident has fallen, the resident is assessed and that a post-fall assessment is conducted using a clinically appropriate assessment instrument that is specifically designed for falls. O. Reg. 246/22, s. 54 (2); O. Reg. 66/23, s. 11.

The licensee has failed to ensure that a post-fall assessment was conducted using a clinically appropriate assessment instrument specifically designed for falls when a resident fell.

**Sources:** Review of resident's progress notes and post-fall assessment records; interviews with the Registered Practical Nurse and the Acting Director of Care.

## WRITTEN NOTIFICATION: Attestation

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

Non-compliance with: O. Reg. 246/22, s. 270 (3)

Attestation

s. 270 (3) The licensee shall ensure that the attestation is submitted annually to the Director.

The licensee has failed to ensure that its emergency planning attestation was submitted to the Director annually. The home's Acting Administrator confirmed that the attestation was not submitted to the Director by December 31, 2024.

**Sources:** Review of attestation records; interview with the Acting Administrator.