



**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 sous la Loi de 2007 sur les foyers de soins de longue durée**

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

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

**Public Copy/Copie du public**

<b>Report Date(s) / Date(s) du Rapport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / Registre no</b>	<b>Type of Inspection / Genre d'inspection</b>
Oct 23, 2014	2014_299559_0024	T-1100-14, T-547-14	Complaint

**Licensee/Titulaire de permis**

ADVENT HEALTH CARE CORPORATION  
541 Finch Avenue West, NORTH YORK, ON, M2R-3Y3

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

VALLEYVIEW RESIDENCE  
541 Finch Avenue West, NORTH YORK, ON, M2R-3Y3

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

ANN HENDERSON (559)

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

**The purpose of this inspection was to conduct a Complaint inspection.**

**This inspection was conducted on the following date(s): October 8, 9, 2014.**

**During the course of the inspection, the inspector(s) spoke with resident and family relations coordinator (RFRC), registered nurse and a resident.**

**During the course of the inspection, the inspector(s) reviewed clinical documentation.**

**The following Inspection Protocols were used during this inspection:  
Prevention of Abuse, Neglect and Retaliation**

**Findings of Non-Compliance were found during this inspection.**



**NON-COMPLIANCE / NON - RESPECT DES EXIGENCES**

Legend	Legendé
WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order	WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités
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.)  The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.	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.  Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.



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**WN #1: The Licensee has failed to comply with O.Reg 79/10, s. 17.**

**Communication and response system**

**Specifically failed to comply with the following:**

**s. 17. (1) Every licensee of a long-term care home shall ensure that the home is equipped with a resident-staff communication and response system that,**

**(a) can be easily seen, accessed and used by residents, staff and visitors at all times; O. Reg. 79/10, s. 17 (1).**

**(b) is on at all times; O. Reg. 79/10, s. 17 (1).**

**(c) allows calls to be cancelled only at the point of activation; O. Reg. 79/10, s. 17 (1).**

**(d) is available at each bed, toilet, bath and shower location used by residents; O. Reg. 79/10, s. 17 (1).**

**(e) is available in every area accessible by residents; O. Reg. 79/10, s. 17 (1).**

**(f) clearly indicates when activated where the signal is coming from; and O. Reg. 79/10, s. 17 (1).**

**(g) in the case of a system that uses sound to alert staff, is properly calibrated so that the level of sound is audible to staff. O. Reg. 79/10, s. 17 (1).**

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**Findings/Faits saillants :**

1. The licensee failed to ensure that the home is equipped with a resident-staff communication and response system that can be easily seen, accessed and used by residents.

During the inspection the resident stated on two identified dates, he/she had been left in a bathroom on the commode chair for two hours without being able to reach and activate the call bell. On an identified date, the inspector observed the call bell in the bathroom tied tightly around the assistive rail next to the commode chair and the resident demonstrated how he/she was unable to activate the call bell response system on an identified evening. An identified registered nurse confirmed that call bell could not be reached and activated. [s. 17. (1) (a)]

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Loi de 2007 sur les foyers de  
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**Issued on this 23rd day of October, 2014**

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