



**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>
Jun 5, 2014	2014_298557_0007	T-635-13	Complaint

#### **Licensee/Titulaire de permis**

2063414 ONTARIO LIMITED AS GENERAL PARTNER OF 2063414 INVESTMENT LP

302 Town Centre Blvd., Suite #200, TORONTO, ON, L3R-0E8

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

LEISUREWORLD CAREGIVING CENTRE - VAUGHAN

5400 Steeles Avenue West, Woodbridge, ON, L4L-9S1

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

VALERIE PIMENTEL (557), LAURA BROWN-HUESKEN (503)

### **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): April 22, 23, 25 and May 5, 2014.**

**During the course of the inspection, the inspector(s) spoke with the director of administration, director of care, associate director of care, nurse manager, registered nursing staff, personal support workers, environmental manager, dietitian, behavioural support nurse, residents and substitute decision makers.**

**During the course of the inspection, the inspector(s) conducted observations of the home area and dining, a tour of the facility, reviewed resident records, reviewed home's policies and procedures, observed staff and resident interactions, and resident to resident interactions.**

**The following Inspection Protocols were used during this inspection:  
Nutrition and Hydration  
Personal Support Services  
Responsive Behaviours**

**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. 35. Foot care and nail care**

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

**s. 35. (1) Every licensee of a long-term care home shall ensure that each resident of the home receives preventive and basic foot care services, including the cutting of toenails, to ensure comfort and prevent infection. O. Reg. 79/10, s. 35 (1).**

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**Findings/Faits saillants :**

The licensee failed to ensure that the residents of the home receive preventive and basic foot care services, including the cutting of toenails, to ensure comfort and prevent infection.

The substitute decision maker (SDM) when visiting the resident observed the residents' toe nails were long and ingrown. The SDM stated "they have not been cut since his/her admission to the home". The homes normal practice is to trim the resident's finger and toe nails on their bath or shower day. On an identified date, the SDM followed up with the administration office and signed a consent form authorizing the resident #001 to have foot care provided by the home's contracted service provider and the resident received foot care service.

Record review revealed that during a 98 day time period resident #001 had his/her toenails cut once on an identified date.

Staff interviews confirmed that resident #001 had his/her toenails cut only once over a 3 month time frame and did not receive basic foot care.

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**Issued on this 11th day of June, 2014**

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