



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

**Rapport d'inspection  
prévues le *Loi de 2007  
les foyers de soins de  
longue durée***

**Ministry of Health and Long-Term Care**  
Health System Accountability and Performance Division  
Performance Improvement and Compliance Branch

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**Ministère de la Santé et des Soins de  
longue durée**

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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

Licensee Copy/Copie du Titulaire  Public Copy/Copie Public

<b>Date(s) of inspection/Date de l'inspection</b>	<b>Inspection No/ d'inspection</b>	<b>Type of Inspection/Genre d'inspection</b>
September 24, 2010	2010_147_9623_21Sep155218	Critical Incident – H-00655
<b>Licensee/Titulaire</b> The Regional Municipality of Halton 1151 Bronte Road Oakvill, ON L6M 3L1		
<b>Long-Term Care Home/Foyer de soins de longue durée</b> Creekway Village 5200 Corporate Drive Burlington, ON L7L 7G7		
<b>Name of Inspector/Nom de l'inspecteur</b>  Laleh Newell - #147		
<b>Inspection Summary/Sommaire d'inspection</b>		

The purpose of this inspection was to conduct a Critical Incident inspection.

During the course of the inspection, the inspector spoke with:

Administrator, Director of Care, Unit Registered Practical Nurse and Resident.

During the course of the inspection, the inspector:

- Reviewed health care records, reviewed policy and procedures related to safe transfers and lifts, reviewed personnel file of staff member involved in the incident, reviewed internal incident report and home's investigation report related to the incident, toured the home, and observed staff in routine duties.

The following Inspection Protocols were used during this inspection:

- Personal Support Services Inspection Protocol

Findings of Non-Compliance were found during this inspection. The following action was taken:

1 WN

### NON-COMPLIANCE / (Non-respectés)

#### Definitions/Définitions

**WN** – Written Notifications/Avis écrit  
**VPC** – Voluntary Plan of Correction/Plan de redressement volontaire  
**DR** – Director Referral/Régisseur envoyé  
**CO** – Compliance Order/Ordres de conformité  
**WAO** – Work and Activity Order/Ordres: travaux et activités

The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.

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.)

Le suivant constituer un avis d'écrit de l'exigence prévue le paragraphe 1 de section 152 de les foyers de soins de longue durée.

Non-respect avec les exigences sur le *Loi de 2007 les foyers de soins de longue durée* à trouvé. (Une exigence dans le loi comprend les exigences contenues dans les points énumérés dans la définition de "exigence prévue par la présente loi" au paragraphe 2(1) de la loi.

#### **WN #1: The Licensee has failed to comply with O. Reg 79/10 s. 36**

**Every licensee of a long-term care home shall ensure that staff use safe transferring and positioning devices or techniques when assisting residents.**

#### **Findings:**

1. An identified resident was assessed as being a two person mechanical transfer, however, the resident was transferred by one staff member which placed resident at potential risk for harm.

**Inspector ID #:** 147




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Signature of Licensee or Representative of Licensee Signature du Titulaire du représentant désigné		Signature of Health System Accountability and Performance Division representative/Signature du (de la) représentant(e) de la Division de la responsabilisation et de la performance du système de santé.	
		 Nov 2/10	
Title:	Date:	Date of Report: (if different from date(s) of inspection).	