



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

**Rapport d'inspection  
prevue 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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Date(s) of inspection/Date de l'inspection	Inspection No/ d'inspection	Type of Inspection/Genre d'inspection
November 30, 2010	2010_101_9510_30Nov082814	Complaint (T-2717)
<b>Licensee/Titulaire</b>		
Toronto Long-Term Care Homes and Services, 55 John Street, Metro Hall, 11th Floor, Toronto ON M5V 3C6		
Long-Term Care Home/Foyer de soins de longue durée		
Castleview Wychwood Towers, 351 Christie Street, Toronto, ON M6G 3C3		
<b>Name of Inspector(s)/Nom de l'inspecteur(s)</b>		
Amanda Williams (101)		

**Inspection Summary/Sommaire d'inspection**

The purpose of this inspection was to conduct a complaint inspection related to lack of hot water in the home in the mornings.

During the course of the inspection, the inspector spoke with: The Administrator, Environmental Manager, front-line nursing staff, and residents.

During the course of the inspection, the inspector: collected readings of water temperatures in shared resident washrooms and showers.

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

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

3 WN  
2 VPC



**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'exigences 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. 129(1)(a)(ii). Every licensee of a long-term care home shall ensure that, drugs are stored in an area or a medication cart, that is secure and locked,

**Findings:**

1. An identified Registered Practical Nurse (RPN) was noted to leave his medication cart unlocked and unattended while administering drugs to residents in the 7th floor dining room. A PSW was noted to be in close proximity to the cart but was not responsive when the writer opened the drawers. Residents were noted pass by and be seated near the cart.

**Inspector ID #:** 101

**Additional Required Actions:**  
None

**WN # 2:** The Licensee has failed to comply with O. Reg 79/10 s. 17(1)(a). Every licensee of a long-term care home shall ensure that the home is equipped with a resident-staff communication and response system that, can be easily seen, accessed and used by residents, staff and visitors at all times;

**Findings:**

1. An identified resident was found on a toilet in washroom #2 on 7W with the call string not attached to the call station and the resident verbally requesting assistance "because the call bell was not working".

**Inspector ID #:** 101

**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 call bell cords are connected to the call stations and accessible to residents at all times throughout the home. This plan is to be implemented voluntarily.



**WN # 3:** The Licensee has failed to comply with O. Reg 79/10 s. 90(2)(i). The licensee shall ensure that procedures are developed and implemented to ensure that, the temperature of the hot water serving all bathtubs and showers used by residents is maintained at a temperature of at least 40 degrees Celsius

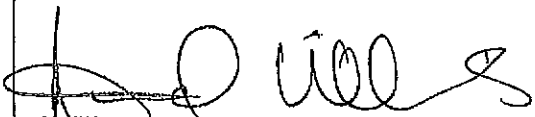
**Findings:**

1. Water temperatures were recorded below 40 degrees Celsius at ~8:30am on unit 3C washroom #2. The water temperature reached a maximum temperature of 35C.
2. Staff and residents interviewed stated water temperatures fluctuate continually. Sometimes it is extremely cold while other times it is extremely hot. Certain showers are not used in the mornings because the water is too cold.

Inspector ID #: 101

**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 contingency plans are in place when water temperatures fall below 40 degrees Celsius until the new boiler can be installed by February 2011 the latest. This plan is to be implemented voluntarily.

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.
		
Title:	Date:	Date of Report (if different from date(s) of inspection). December 16, 2010.