

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

**Rapport d'inspection en vertu de  
la Loi de 2007 sur les foyers de  
soins de longue durée**

**Long-Term Care Operations Division  
Long-Term Care Inspections Branch**

**Division des opérations relatives aux  
soins de longue durée  
Inspection de soins de longue durée**

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<b>Report Date(s) / Date(s) du Rapport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / No de registre</b>	<b>Type of Inspection / Genre d'inspection</b>
Oct 21, 2021	2021_872218_0020	016116-21	Complaint

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**Licensee/Titulaire de permis**

Delcare LTC Inc.  
4800 Dufferin Street Toronto ON M3H 5S9

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

Cawthra Gardens  
590 Lolita Gardens Mississauga ON L5A 4N8

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

APRIL RACPAN (218)

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**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): October 13-15 and 18-20, 2021.**

**The following intake was completed in this inspection:**

**Complaint Log #016116-21 related to missing resident's personal belongings.**

**This inspection was completed three days on-site and three days off-site.**

**During the course of the inspection, the inspector(s) spoke with the Administrator, the Social Worker (SW), Maintenance staff, Registered staff, Personal Support Workers (PSW), police authorities, residents and families.**

**During the course of the inspection, the inspector conducted an observation of the resident home area, reviewed relevant home policies and procedures, and other pertinent documents.**

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

**Accommodation Services - Laundry**

**Personal Support Services**

**During the course of this inspection, Non-Compliances were issued.**

**1 WN(s)**

**0 VPC(s)**

**0 CO(s)**

**0 DR(s)**

**0 WAO(s)**

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

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

**WN #1: The Licensee has failed to comply with O.Reg 79/10, s. 89. Laundry service**

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

**s. 89. (1) As part of the organized program of laundry services under clause 15 (1) (b) of the Act, every licensee of a long-term care home shall ensure that,**

**(a) procedures are developed and implemented to ensure that,**

- (i) residents' linens are changed at least once a week and more often as needed,**
- (ii) residents' personal items and clothing are labelled in a dignified manner within 48 hours of admission and of acquiring, in the case of new clothing,**
- (iii) residents' soiled clothes are collected, sorted, cleaned and delivered to the resident, and**
- (iv) there is a process to report and locate residents' lost clothing and personal items; O. Reg. 79/10, s. 89 (1).**

**Findings/Faits saillants :**

1. The licensee failed to ensure that procedures were developed and implemented to ensure that resident #001's personal item was labelled.

The home had a policy that provided guidance on labeling residents' personal clothing but did not have procedures related to the labeling of residents' personal items.

The home said that for every item that was brought to the home, it was expected that staff use the "Inventory of Personal Effects" form to list all of residents' personal items upon admission and updated whenever a new item was brought to the home. Inventoried personal items that were required to be labelled included but were not limited to, framed photographs.

Resident #001 had a framed photograph in their bedroom. The item was not labelled when it was brought to the home and it was also not listed on the resident's inventory list of personal belongings.

Not ensuring that procedures were developed related to labeling residents' personal belongings, increased the likelihood that should the item go missing, it would be difficult to locate who the item belonged to.

Sources: Section 4: Personal Laundry Policy #ALL-CA-ALL-500 NESM, issued February 2015, resident #001's Inventory of Personal Effects (Form ND-1-03-01-01), photograph of personal item, interviews with the Administrator and other staff. [s. 89. (1) (a) (ii)]

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**Issued on this 25th day of October, 2021**

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

**Original report signed by the inspector.**