



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

**Rapport d'inspection  
prévus 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

Toronto Service Area Office  
55 St. Clair Avenue West, 8<sup>th</sup> Floor  
Toronto ON M4V 2Y7

Bureau régional de services de Toronto  
55, avenue St. Clair Ouest, 8<sup>ième</sup> étage  
Toronto, ON M4V 2Y7

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

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

Telephone: 416-325-9297  
1-866-311-8002

Téléphone: 416-325-9297  
1-866-311-8002

Facsimile: 416-327-4486

Télécopieur: 416-327-4486

Licensee Copy/Copie du Titulaire  Public Copy/Copie Public

<b>Date(s) of inspection/Date de l'inspection</b> Dec 17, 2010	<b>Inspection No/ d'inspection</b> 2010_132_9512_17Dec133036	<b>Type of Inspection/Genre d'inspection</b> CI (others) T 2026
---	---	--

**Licensee/Titulaire**  
City of Toronto Long-Term Care Homes and Services  
55 John Street, Metro Hall, 11th Floor  
Toronto, Ontario, M5V 3C6

**Long-Term Care Home/Foyer de soins de longue durée**  
**Cummer Lodge**  
205 Cummer Avenue  
North York, ON M2M 2E8

**Name of Inspector(s)/Nom de l'inspecteur(s)**  
Rosemary Lam (# 132)

**Inspection Summary/Sommaire d'inspection**

The purpose of this inspection was to conduct an [Other] inspection to follow up on critical incident M512-000048-10, reported to the MOHLTC on September 28, 2010.

During the course of the inspection, the inspector spoke with: The Administrator; MDS Coordinators; Director of Care; Registered staff; Personal Support workers.

During the course of the inspection, the inspector(s): Nurse Inspector visited residents in their rooms and reviewed relevant health records.

The following Inspection Protocols were used in part or in whole during this inspection:  
Responsive Behavior Inspection Protocol

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

2 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'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 LTCHA 2007, c. 8, s. 6 (1)(c)

Every licensee of a long-term care home shall ensure that there is a written plan of care for each resident that sets out, clear directions to staff and others who provide direct care to the resident.

**Findings:**

The October 2010 plan of care for an identified resident does not provide clear direction to staff on how to address the aggressive behaviour toward other residents. Care plan only has strategies to address aggression toward staff. Ongoing incident of aggression toward other residents in September and in November, 2010. Contributing factors to these incidents were not always known.

**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 with ensuring a process is developed to determine contributing factors precipitating an aggressive incident and to provide staff with clear direction on how to prevent these incidents by minimizing or eliminating these precipitating factors. This plan of correction is to be implemented voluntarily.

**WN #2:** The Licensee has failed to comply with *Long-Term Care Homes Act, 2007*, S.O. 2007, c.8, s.6(10)(b)

The licensee shall ensure that the resident is reassessed and the plan of care reviewed and revised at least every six months and at any other time when, the resident's care needs change or care set out in the plan is no longer necessary.

**Findings:**

Care plans were reviewed as they were due but not revised for 2 identified residents. Both of these residents exhibited aggressive behaviors toward other residents for the period the care plan was reassessed, but content of the care plan only addressed their aggression toward staff and were not changed to include their aggression toward other residents.



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 prévue  
le *Loi de 2007 les  
foyers de soins de  
longue durée*

**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 with revising plan of care to address all risk areas.

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.  Rosemary Lam 
Title: _____ Date: _____	Date of Report: (if different from date(s) of inspection).  January 5, 2011