

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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| Report Date(s) / Date(s) du Rapport | Inspection No / No de l'inspection | Log # / No de registre | Type of Inspection / Genre d'inspection |
|--|---|-----------------------------------|--|
| Feb 22, 2021 | 2021_631210_0006 | 022722-20, 023149-20, 023240-20 | Complaint |

Licensee/Titulaire de permis

Harold and Grace Baker Centre
1 Northwestern Avenue Toronto ON M6M 2J7

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

Harold and Grace Baker Centre
1 Northwestern Avenue Toronto ON M6M 2J7

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

SLAVICA VUCKO (210)

Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct a Complaint inspection.

This inspection was conducted on the following date(s): February 2, 3, 4, 5 and 8, 2021.

During the course of the inspection the following complaints were inspected:

**-Log #023240-20, related to accommodation services-housekeeping, staffing, personal support services;
-Log #022722-20, related to personal support services and residents' rights.**

This inspection was conducted concurrently with Critical Incident System (CIS) report 2021_631210_0007

-Log #031315-21 related to Infection Prevention and Control (IPAC) services.

-Log #023149-21 related to follow up to compliance order for personal support services.

During the course of the inspection, the inspector(s) spoke with the Executive Director (ED), Director of Care (DOC), Nurse Manager (NM), Manager of Environmental Services, Registered Nurses (RNs), Environmental Service Assistants and Personal Support Workers (PSWs).

During the course of the inspection, the inspector conducted a tour of the resident home areas, observed resident and staff interactions, and reviewed clinical health records, relevant policies and procedures, and other documents.

**The following Inspection Protocols were used during this inspection:
Accommodation Services - Housekeeping
Personal Support Services
Sufficient Staffing**

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

**1 WN(s)
1 VPC(s)
0 CO(s)
0 DR(s)
0 WAO(s)**

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The following previously issued Order(s) were found to be in compliance at the time of this inspection:

Les Ordre(s) suivants émis antérieurement ont été trouvés en conformité lors de cette inspection:

| REQUIREMENT/ EXIGENCE | TYPE OF ACTION/ GENRE DE MESURE | INSPECTION # / DE L'INSPECTION | NO | INSPECTOR ID #/ NO DE L'INSPECTEUR |
|---|--|---|-----------|---|
| LTCHA, 2007 S.O. 2007, c.8 s. 6. (7) | CO #001 | 2020_767643_0021 | 210 | |

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NON-COMPLIANCE / NON - RESPECT DES EXIGENCES
Legend

WN – Written Notification
 VPC – Voluntary Plan of Correction
 DR – Director Referral
 CO – Compliance Order
 WAO – Work and Activity Order

Légende

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.

WN #1: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 15. Accommodation services

Specifically failed to comply with the following:

- s. 15. (2) Every licensee of a long-term care home shall ensure that,**
(a) the home, furnishings and equipment are kept clean and sanitary; 2007, c. 8, s.
15 (2).
(b) each resident's linen and personal clothing is collected, sorted, cleaned and
delivered; and 2007, c. 8, s. 15 (2).
(c) the home, furnishings and equipment are maintained in a safe condition and in
a good state of repair. 2007, c. 8, s. 15 (2).

Findings/Faits saillants :

1. The licensee has failed to ensure that the home, furnishings and equipment are kept clean and sanitary.

Observation of two randomly selected resident rooms on an identified date and time showed a sink and the floors were not clean. The rooms were previously cleaned by the environmental cleaning assistant.

As per the home's cleaning schedule the residents' rooms should be cleaned daily. The floors should be swept and mopped daily also. Heavy stains that could not be cleaned with regular wiping should be reported to the Janitor, to be cleaned with a machine on an "as needed" basis.

The two randomly selected rooms were not completely cleaned on a daily basis.

Sources: observation, home's cleaning schedule, interview with Environmental Cleaning Assistants, Environmental Supervisor and other staff. [s. 15. (2) (a)]

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 that the home, furnishings and equipment are
kept clean and sanitary, to be implemented voluntarily.***



**Ministry of Long-Term
Care**

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

**Ministère des Soins de longue
durée**

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soins de longue durée**

Issued on this 3rd day of March, 2021

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

Original report signed by the inspector.