

Amended Public Report (A1)

Report Issue Date	June 6, 2022		
Inspection Number	2022_1594_0002		
Inspection Type	<input type="checkbox"/> Critical Incident System <input checked="" type="checkbox"/> Complaint <input type="checkbox"/> Follow-Up <input type="checkbox"/> Director Order Follow-up <input type="checkbox"/> Proactive Inspection <input type="checkbox"/> SAO Initiated <input type="checkbox"/> Post-occupancy <input type="checkbox"/> Other _____		
Licensee	City of Toronto		
Long-Term Care Home and City	Lakeshore Lodge, Etobicoke		
Inspector who Amended	Inspector who Amended Digital Signature		
Nital Sheth (500)			

INSPECTION SUMMARY

The inspection occurred on the following date(s): April 21-22, 25-28, May 2-4, 2022.

The following intake(s) were inspected:
 - Intake #017285-21 related to duty to protect, and maintenance.

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

- Prevention of Abuse and Neglect

INSPECTION RESULTS

During the course of this inspection, the inspector(s) made relevant observations, reviewed records and conducted interviews, as applicable.

NON-COMPLIANCE REMEDIED

Non-compliance was found during this inspection and was **remedied** by the licensee prior to the conclusion of the inspection. The inspector was satisfied that the non-compliance met the intent of section 154(2) and requires no further action.

NC# 001 remedied pursuant to FLTCA, 2021, s. 154(2)

LTCHA, 2007 s. 6 (7).

The licensee has failed to ensure that the care set out in the plan of care related to dressing was provided to a resident as specified in the plan.

Rationale and Summary

The resident's Substitute Decision Maker (SDM) raised a concern to the Director of Care (DOC), about the resident being inappropriately dressed. According to the resident's plan of care, they required extensive assistance from one staff member for dressing. The staff member to ensure that the resident is dressed appropriately.

Nurse Manager #108 investigated immediately and arranged for a staff member to assist them to get appropriately dressed.

Sources: Copies of emails to the licensee from the resident's SDM, interviews with the SDM, Nurse Manager #104, and other staff.

Date Remedy Implemented: June 4, 2021 [500]