



**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

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

Division de la responsabilisation et de la performance du
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Licensee Copy/Copie du Titulaire Public Copy/Copie Public

Date(s) of inspection/Date de l'inspection September 20, 2010	Inspection No/ d'inspection 2010_111_2789_02Sep112021	Type of Inspection/Genre d'inspection CIS (log # O-000586)
Licensee/Titulaire 2063414 Ontario limited as General Partner of 2063414, 302 Town Centre Blvd., Suite #200 Toronto, ON L3R 0E8 Fax: 905-415-7623		
Long-Term Care Home/Foyer de soins de longue durée Leisureworld Caregiving Centre-Scarborough, 130 Midland Ave., Scarborough, ON M1N 4B2 Fax: 416-264-3704		
Name of Inspector(s)/Nom de l'inspecteur(s) Lynda Brown, (ID#111)		

Inspection Summary/Sommaire d'inspection

The purpose of this inspection was to conduct a Critical Incident inspection for a discharged resident who sustained a serious injury requiring hospitalization.

During the course of the inspection, the inspector spoke with the Administrator and the ADOC.

During the course of the inspection, the inspector reviewed the resident's health record and reviewed the homes investigation report.

The following Inspection Protocols were used during this inspection:

Prévention of Abuse & neglect

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

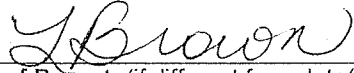
1 WN

NON-COMPLIANCE / (Non-respectés)



Definitions/Définitions	
<p>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</p>	
<p>The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.</p> <p>Non-compliance with requirements under the <i>Long-Term Care Homes Act, 2007</i> (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>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.</p> <p>Non-respect avec les exigences sur le <i>Loi de 2007 les foyers de soins de longue durée</i> 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.</p>

<p>WN #1: The Licensee has failed to comply with O.Reg.79/10, s.8 (1) (b) Where the Act or this Regulation requires the licensee of a long-term care home to have, institute or otherwise put in place any plan, policy, protocol, procedure, strategy or system, the licensee is required to ensure that the plan, policy, protocol, procedure, strategy or system, is complied with.</p>	
<p>Findings: An identified resident's documentation was not completed according to the homes policy (V3-570, V3-010). An investigation was not completed according to the homes policy and Police were not notified according to the homes policy.</p>	
Inspector ID #:	111

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). 