



**Ministry of Health and Long-Term Care**

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

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

**Rapport d'inspection prévue le Loi de 2007 les foyers de soins de longue**

Health System Accountability and Performance Division  
Performance Improvement and Compliance Branch  
Division de la responsabilisation et de la performance du système de santé  
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| Date(s) of inspection/Date(s) de l'inspection | Inspection No/ No de l'inspection | Type of Inspection/Genre d'inspection |
|-----------------------------------------------|-----------------------------------|---------------------------------------|
| Jun 28, Jul 4, 2012                           | 2012_028102_0030                  | Follow up                             |

**Licensee/Titulaire de permis**

ROYAL CANADIAN LEGION DISTRICT 'D' CARE CENTRES  
59 Lawson Rd, TORONTO, ON, M1C-2J1

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

TONY STACEY CENTRE FOR VETERANS' CARE  
59 Lawson Road, TORONTO, ON, M1C-2J1

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

WENDY BERRY (102)

**Inspection Summary/Résumé de l'inspection**

The purpose of this inspection was to conduct a Follow up inspection.

During the course of the inspection, the inspector(s) spoke with the Executive Director (Administrator); several registered and non registered nursing staff; a housekeeper; several residents and visitors.

During the course of the inspection, the inspector(s) followed up on 2 previously issued compliance orders; toured resident areas on the 1st and 2nd floor; checked the resident staff communication and response system and door security; reviewed several binders containing policies. The on site inspection occurred on June 28, 2012.

The following Inspection Protocols were used during this inspection:

Resident Charges

Safe and Secure Home

Findings of Non-Compliance were found during this inspection.

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



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|                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                              |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>Legend</p> <p>WN – Written Notification<br/>VPC – Voluntary Plan of Correction<br/>DR – Director Referral<br/>CO – Compliance Order<br/>WAO – Work and Activity Order</p>                                                                                                                                                                                                                          | <p>Legendé</p> <p>WN – Avis écrit<br/>VPC – Plan de redressement volontaire<br/>DR – Aiguillage au directeur<br/>CO – Ordre de conformité<br/>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. 8. Policies, etc., to be followed, and records Specifically failed to comply with the following subsections:**

**s. 8. (1) 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,**  
**(a) is in compliance with and is implemented in accordance with applicable requirements under the Act; and**  
**(b) is complied with. O. Reg. 79/10, s. 8 (1).**

**Findings/Faits saillants :**

1. O.reg. 79/10, s. 30 identifies that each of the organized programs required under section 8 to 16 of the Act must have relevant policies, procedures and protocols. Nursing and personal support support services is a required program.

O.reg. 79/10, s. 37(1) also identifies that residents' personal items are to be labelled within 48 hours of admission and of acquiring new items.

A binder titled "Tony Stacey Centre APIC Infection Control Manual" was identified by 2nd floor nursing staff as a current policy and procedure manual. "Section G- Nursing Policies" contains a page titled "General Infection Control Nursing policies". The policy identifies that "All residents personal items will be appropriately labeled with resident name and stored in bedside stands or other designated resident storage areas and cleaned and disinfected as indicated."

In the majority of resident rooms that were checked, residents' personal items, which includes toothbrushes, hairbrushes and combs, were not labelled with residents' names.

The home's policy is not complied with. [s. 8(1)(b)]

**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 all residents' personal items are labelled and appropriately stored to prevent contamination, to be implemented voluntarily.**

**THE FOLLOWING NON-COMPLIANCE AND/OR ACTION(S)/ORDER(S) HAVE BEEN COMPLIED WITH/  
 LES CAS DE NON-RESPECTS ET/OU LES ACTIONS ET/OU LES ORDRES SUIVANT SONT MAINTENANT  
 CONFORME AUX EXIGENCES:**



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| CORRECTED NON-COMPLIANCE/ORDER(S)<br>REDRESSEMENT EN CAS DE NON-RESPECT OU LES ORDERS: |                                    |                                      |                                       |
|----------------------------------------------------------------------------------------|------------------------------------|--------------------------------------|---------------------------------------|
| REQUIREMENT/<br>EXIGENCE                                                               | TYPE OF ACTION/<br>GENRE DE MESURE | INSPECTION # / NO<br>DE L'INSPECTION | INSPECTOR ID #/<br>NO DE L'INSPECTEUR |
| O.Reg 79/10 r. 9.                                                                      | WN #1                              | 2011_046166_0012                     | 102                                   |
| O.Reg 79/10 r. 9.                                                                      | WN #2                              | 2012_028102_0009                     | 102                                   |
| O.Reg 79/10 r. 16.                                                                     | WN #1                              | 2011_046166_0012                     | 102                                   |
| O.Reg 79/10 r. 17.                                                                     | CO #001                            | 2012_028102_0009                     | 102                                   |
| LTCHA, 2007 S.O. 2007, c.8 s. 86.                                                      | WN #1                              | 2012_028102_0009                     | 102                                   |
| O.Reg 79/10 r. 90.                                                                     | WN #1                              | 2011_046166_0012                     | 102                                   |
| O.Reg 79/10 r. 91.                                                                     | WN #1                              | 2011_046166_0012                     | 102                                   |
| O.Reg 79/10 r. 245.                                                                    | CO #005                            | 2011_046166_0012                     | 102                                   |

Issued on this 4th day of July, 2012

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