



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 sous la
Loi de 2007 sur les foyers de
soins de longue durée

Health System Accountability and
Performance Division
Performance Improvement and
Compliance Branch

Division de la responsabilisation et de la
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| Report Date(s) / Date(s) du Rapport | Inspection No / No de l'inspection | Log # / Registre no | Type of Inspection / Genre d'inspection |
|------------------------------------------------|-----------------------------------------------|--------------------------------|----------------------------------------------------|
| Jan 8, 2013 | 2012_128138_0046 | O-000749- 12 | Complaint |

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

PAULA MACDONALD (138)

Inspection Summary/Résumé de l'inspection



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

This inspection was conducted on the following date(s): December 28, 2012

During the course of the inspection, the inspector(s) spoke with the Executive Director, the Director of Care, the Environmental Manager, and personal care workers, and residents.

During the course of the inspection, the inspector(s) reviewed a resident's health record, reviewed the home's trust fund policy, reviewed a resident's trust fund statement and other financial documentation, and toured through resident common areas and resident rooms.

The following Inspection Protocols were used during this inspection:

Personal Support Services

Trust Accounts

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

| Legend | Legendé |
|------------------------------------|---------------------------------------|
| WN – Written Notification | WN – Avis écrit |
| VPC – Voluntary Plan of Correction | VPC – Plan de redressement volontaire |
| DR – Director Referral | DR – Aiguillage au directeur |
| CO – Compliance Order | CO – Ordre de conformité |
| WAO – Work and Activity Order | 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 O.Reg 79/10, s. 241. Trust accounts

Specifically failed to comply with the following:

s. 241. (7) The licensee shall,

(b) where the licensee has deposited in a trust account money received from any person on behalf of a resident, make part or all of the money available to the resident or a person acting on behalf of the resident,

(i) in accordance with the instructions of the resident or a person acting on behalf of the resident in respect of the property the resident or the person is legally authorized to manage, and

(ii) upon the resident, or the person acting on behalf of the resident, signing an acknowledgement that the resident, or the person acting on behalf of the resident, received the funds; O. Reg. 79/10, s. 241 (7).

Findings/Faits saillants :



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1. The licensee failed to comply with O.Reg 79/10, s. 241 (7) (b) (i) in that the licensee did not make available money deposited into a trust account in accordance with the instructions of a person legally authorized to manage the property of a resident.

A resident's money in his/her trust account was not released at the request his/her POA/executor after the resident's death. The Executive Director confirmed that the money in the trust fund was held by the home until the resident's accommodation fees were settled. A statement of the resident's trust fund confirmed that the trust fund money was release almost two months after the resident passed away.

The home's policy on resident trust accounts states that each resident trust account is required to maintain a balance of \$50.00 and that residents would not be permitted to make withdrawals or pay bills from their trust accounts once the balance was less than \$15.00. The home's Executive Director further confirmed that this was the practice at the home.

The home's trust account policy would therefore prevent residents or the persons legally authorized to manage the property of the resident from accessing all their money in the trust account regardless of their instructions. [s. 241. (7) (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 residents' trust money is available to the resident according to the instructions of the resident or legally authorized person, to be implemented voluntarily.



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Issued on this 8th day of January, 2013

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

Lyndi Duchesne
for Paula MacDonald.