

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 Direction de l'amélioration de la performance et de la conformité

Date(s) of inspection/Date(s) do

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Type of Inspection/Genro

## Public Copy/Copie du public

l'inspection	inspection No. No de l'inspection	d'inspection
Oct 10, 23, 2012	2012_157322_0008	Other
Licensee/Titulaire de permis		
ST. CLAIR O'CONNOR COMMUNITY 2701 St Clair Avenue East, East York, Long-Term Care Home/Foyer de soi	ON, M4B-3M3	
ST. CLAIR O'CONNOR COMMUNITY 2701 St Clair Avenue East, East York,		
Name of Inspector(s)/Nom de l'insp	ecteur ou des inspecteurs	
LORI KANE (322)		
In	spection Summary/Résumé de l'inspe	ection

Increation No./ No. do l'increation

The purpose of this inspection was to conduct an Other inspection.

During the course of the inspection, the inspector(s) spoke with Administrator, Director or Care, Registered Staff, PSW's, Dietary Staff, Families, and Residents.

During the course of the inspection, the inspector(s) conducted a walk through of the LTC home, observed residents and staff, conducted interviews, observed lunch meal.

The following Inspection Protocols were used during this inspection:

Residents' Council

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	



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Non-compliance with requirements under the Long-Term Care LTCHA includes the requirements contained in the items listed in the definition of "requirement under this Act" in subsection 2(1) of the LTCHA.)

Le non-respect des exigences de la Loi de 2007 sur les foyers de Homes Act, 2007 (LTCHA) was found. (A requirement under the 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.

The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.

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. 17. Communication and response system Specifically failed to comply with the following subsections:

- s. 17. (1) Every licensee of a long-term care home shall ensure that the home is equipped with a resident-staff communication and response system that,
- (a) can be easily seen, accessed and used by residents, staff and visitors at all times;
- (b) is on at all times;
- (c) allows calls to be cancelled only at the point of activation;
- (d) is available at each bed, toilet, bath and shower location used by residents;
- (e) is available in every area accessible by residents;
- (f) clearly indicates when activated where the signal is coming from; and
- (g) in the case of a system that uses sound to alert staff, is properly calibrated so that the level of sound is audible to staff. O. Reg. 79/10, s. 17 (1).

## Findings/Faits saillants:

1. Oct 10, 2012 - 10:13 - The licensee failed to ensure that the home is equipped with a resident-staff communication and response system that is available in every area accessible by residents. The dining rooms, and piano room adjacent to the main TV lounge were not equipped with a resident-staff communication and response system. Confirmed with staff.

WN #2: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 85. Satisfaction survey Specifically failed to comply with the following subsections:

- s. 85. (3) The licensee shall seek the advice of the Residents' Council and the Family Council, if any, in developing and carrying out the survey, and in acting on its results. 2007, c. 8, s. 85. (3).
- s. 85. (4) The licensee shall ensure that,
- (a) the results of the survey are documented and made available to the Residents' Council and the Family Council, if any, to seek their advice under subsection (3);
- (b) the actions taken to improve the long-term care home, and the care, services, programs and goods based on the results of the survey are documented and made available to the Residents' Council and the Family Council, if any;
- (c) the documentation required by clauses (a) and (b) is made available to residents and their families; and (d) the documentation required by clauses (a) and (b) is kept in the long-term care home and is made available during an inspection under Part IX. 2007, c. 8, s. 85. (4).

## Findings/Faits saillants:

1. 1. Through interviews and review of the Residents' Council minutes it was identified the Licensee did not make available

the results of the satisfaction surveys to the Residents' Council and did not seek their advice.

2. Through interviews and review of the Residents' Council minutes it was identified the Licensee did not seek advice from the Residents' Council in developing and carrying out the survey and in acting on its results.



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Issued on this 23rd day of October, 2012

CONTRACTOR OF THE SECOND SECON
Signature of Inspector(s)/Signature de l'inspecteur ou des inspecteurs