



**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  
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Performance Improvement and  
Compliance Branch**

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**Division de la responsabilisation et de la  
performance du système de santé  
Direction de l'amélioration de la  
performance et de la conformité**

### **Public Copy/Copie du public**

<b>Report Date(s) / Date(s) du Rapport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / Registre no</b>	<b>Type of Inspection / Genre d'inspection</b>
Mar 25, 2014	2014_357101_0001	T-627-13	Complaint

#### **Licensee/Titulaire de permis**

WEST PARK HEALTHCARE CENTRE  
82 BUTTONWOOD AVENUE, TORONTO, ON, M6M-2J5

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

WEST PARK LONG TERM CARE CENTRE  
82 BUTTONWOOD AVENUE, TORONTO, ON, M6M-2J5

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

AMANDA WILLIAMS (101)

### **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): March 6 and 7, 2014**

**This inspection was conducted in response to INFOLINE complaint # IL-350035-TO related to cleanliness, safety and infection prevention and control practices in the home.**

**During the course of the inspection, the inspector(s) spoke with the Executive Director, Personal support workers, Housekeeping staff, Assistant Director of Care, registered nursing staff, maintenance staff, residents, family and visiting friends in the home at the time of the inspection.**

**During the course of the inspection, the inspector(s) conducted a visual inspection of resident home areas; reviewed housekeeping job routines; reviewed infection prevention and control policies and procedures and infection prevention and control surveillance records; reviewed shift report and flow sheets for staff tracking and communication of changes in resident status; and reviewed the home's resident-staff communication and response system safety check documentation, system operation and staff response to an activated call.**

**The following Inspection Protocols were used during this inspection:  
Accommodation Services - Housekeeping  
Infection Prevention and Control  
Safe and Secure Home**

**Findings of Non-Compliance were found during this inspection.**



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

<p>Legend</p> <p>WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order</p>	<p>Legendé</p> <p>WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité 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. 17.  
Communication and response system**



**Specifically failed to comply with the following:**

- 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; O. Reg. 79/10, s. 17 (1).**
  - (b) is on at all times; O. Reg. 79/10, s. 17 (1).**
  - (c) allows calls to be cancelled only at the point of activation; O. Reg. 79/10, s. 17 (1).**
  - (d) is available at each bed, toilet, bath and shower location used by residents; O. Reg. 79/10, s. 17 (1).**
  - (e) is available in every area accessible by residents; O. Reg. 79/10, s. 17 (1).**
  - (f) clearly indicates when activated where the signal is coming from; and O. Reg. 79/10, s. 17 (1).**
  - (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).**
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**Findings/Faits saillants :**

1. The resident-staff communication and response system was not functional when activated in five identified resident rooms on March 6, 2014. [s. 17. (1) (b)]
2. The home's resident-staff communication and response system utilizes a pager system to indicate the location of resident activated calls to staff. The system also includes a visual overhead light system located in the corridor outside the room and an audible alarm located at the nursing station in each resident home area. It was also noted that the audible alarm could only be heard in areas directly adjacent to the nursing station. Personal support workers (PSWs) on identified resident home areas were observed to a) carry pagers that were not operational. An activated call did not display nor respond when a call was activated; and b) not carry their assigned pagers during evening shift on identified resident home areas. This poses a potential risk for PSW staff to not respond to an activated call bell in a timely manner when not within visual or audible sight of the resident activated call (i.e. in another residents room, tub/shower room, activity room, etc. ). [s. 17. (1) (f)]



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***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:***

- 1. that all resident accessible resident-staff communication and response systems are operational and maintained in good repair at all times throughout the home.***
- 2. the pagers used by personal support workers to respond to an activated resident-staff communication and response call are maintained in good working order at all times; and***
- 3. the home has a system in place to ensure the pagers used by personal support workers as part of the resident-staff communication and response system are operational at all times, to be implemented voluntarily.***

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Issued on this 26th day of March, 2014

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

A handwritten signature in black ink, appearing to be "Mel Williams", written in a cursive style.