



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

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

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

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

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<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>
Jun 13, 2013	2013_162109_0029	T-234-13	Complaint

**Licensee/Titulaire de permis**

DRS PAUL AND JOHN REKAI CENTRE  
345 SHERBOURNE STREET, TORONTO, ON, M5A-2S3

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

WELLESLEY CENTRAL PLACE  
160 WELLESLEY STREET EAST, TORONTO, ON, M4Y-1J2

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

SUSAN SQUIRES (109)

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

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

**This inspection was conducted on the following date(s): May 30, 2013 and June 10, 2013**

**During the course of the inspection, the inspector(s) spoke with Administrator, Director of Care, Registered staff, Personal support workers, Food Services Manager**

**During the course of the inspection, the inspector(s) reviewed the health record for resident # 1, reviewed policies and procedures**

**The following Inspection Protocols were used during this inspection:  
Personal Support Services**



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. 26. Plan of care Specifically failed to comply with the following:**

- s. 26. (4) The licensee shall ensure that a registered dietitian who is a member of the staff of the home,**
  - (a) completes a nutritional assessment for all residents on admission and whenever there is a significant change in a resident's health condition; and O. Reg. 79/10, s. 26 (4).**
  - (b) assesses the matters referred to in paragraphs 13 and 14 of subsection (3). O. Reg. 79/10, s. 26 (4).**



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**Findings/Faits saillants :**

1. The licensee failed to ensure that a registered dietitian who is a member of the staff of the home, (a) completes a nutritional assessment for all residents on admission and whenever there is a significant change in a resident's health condition.

In April 2013 resident # 2 was assessed by the Food Service Supervisor (FSS) and at that time had gained weight over a 6 month period. The FSS made a referral to the dietitian for this weight gain. There was no follow up to this referral.

The resident's health condition began to decline when progress notes indicate that the resident refused to eat.

There is daily progress notes indicating that the resident was refusing most solid foods that were offered despite staff attempts to feed him/her.

The policy utilized by the home for Nutritional Assessment states that the clinical dietitian will complete a nutritional assessment for all residents whenever there is a significant change in the resident's health condition. The home's dietitian referral tool is used by the care units to request a dietitian assessment. The criteria listed on this referral includes "Poor Food Intake (eating less than 50%)" and "Feeding Concerns". There was no referral made to the dietitian during the period of time when the resident began refusing solid food and when the resident was placed into palliative care and foods and fluids were withheld as a comfort measure until the resident passed away days later. [s. 26. (4) (a)]

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**Issued on this 17th day of June, 2013**

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

A handwritten signature in black ink, appearing to be "J. Spence", written over a white background within a rectangular box.