



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

Ottawa Service Area Office  
347 Preston St 4th Floor  
OTTAWA ON L1K 0E1  
Telephone: (613) 569-5602  
Facsimile: (613) 569-9670

Bureau régional de services d'Ottawa  
347 rue Preston 4<sup>ième</sup> étage  
OTTAWA ON L1K 0E1  
Téléphone: (613) 569-5602  
Télécopieur: (613) 569-9670

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

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| <b>Report Date(s) /<br/>Date(s) du apport</b> | <b>Inspection No /<br/>No de l'inspection</b> | <b>Log # /<br/>Registre no</b> | <b>Type of Inspection /<br/>Genre d'inspection</b> |
|---|---|--------------------------------|--|
| Apr 22, 2015                                  | 2015_291552_0011                              | O-001372-14                    | Complaint  |

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

REGIONAL MUNICIPALITY OF DURHAM  
605 Rossland Road East WHITBY ON L1N 6A3

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

HILLSDALE TERRACES  
600 Oshawa Blvd. North OSHAWA ON L1G 5T9

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

MARIA FRANCIS-ALLEN (552)

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## **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): April 13, 14, 15, 16, 17,  
2015**

**Complaint Log # 001372-14**

**During the course of the inspection, the inspector(s) spoke with the Administrator, Director of Care (DOC), Resident Care Coordinator (RCC), Occupational Therapist (OT), Physiotherapist (PT), Registered Nurse (RN), Registered Practical Nurse (RPN) and Personal Support Workers (PSW).**

**The inspector also observed staff to resident interaction during provision of care, reviewed resident's clinical health records and the licensee policy related to Power Mobility.**

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

**During the course of this inspection, Non-Compliances were not issued.**

**0 WN(s)**

**0 VPC(s)**

**0 CO(s)**

**0 DR(s)**

**0 WAO(s)**



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

|   |  |
|---|--|
| <b>Legend</b>   | <b>Legendé</b>   |
| WN – Written Notification<br>VPC – Voluntary Plan of Correction<br>DR – Director Referral<br>CO – Compliance Order<br>WAO – Work and Activity Order   | 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  |
| 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). | 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. |
| 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.  |

Issued on this 22nd day of April, 2015

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

**Original report signed by the inspector.**