



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

**Rapport d'inspection
prevue le Loi de 2007
les foyers de soins de
longue durée**

Ministry of Health and Long-Term Care
Health System Accountability and Performance Division
Performance Improvement and Compliance Branch

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

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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Date(s) of Inspection/Date de l'inspection	Inspection No/ d'inspection	Type of Inspection/Genre d'inspection
August 24/2010	2010_177_2874_23Au g162610	Critical Incident
Licensee/Titulaire		
2063414 Ontario Limited as General Partner of 2063414 Investment LP, 302 Town Centre Blv., suite # 200, Toronto, L3R 0E8 Long-Term Care Home/Foyer de soins de longue durée		
Leisureworld Caregiving Centre- Lawrence, 2005 Lawrence Avenue West, Toronto, ON M9N 3V4		
Name of Inspector(s)/Nom de l'inspecteur(s)		
Monica Klein and Sarah Daniel-Dodd (198 and 116)		

Inspection Summary/Sommaire d'inspection

The purpose of this inspection was to conduct a Critical Incident inspection.

During the course of the inspection, the inspectors spoke with: Administrator, Director Of Care (DOC), Registered Nurses (RN), Registered Practical Nurses (RPN) and Personal Support Workers (PSW) staff.

The following Inspection Protocols were used in part or in whole during this inspection:

- Fall prevention
- Hospitalization and death

Findings of Non-Compliance were found during this inspection. The following action was taken:

1 WN

NON-COMPLIANCE / (Non-respectés)
Definitions/Définitions

WN - Written Notification/Avis écrit
VPC - Voluntary Plan of Correction/Plan de redressement volontaire
DR - Director Referral/Régisseur envoie
CO - Compliance Order/Ordre de conformité
WAO - Work and Activity Order/Ordre travaux et activités

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

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 suivant constitue un avis d'écrit de l'exigences prévue le paragraphe 1 de section 152 de les foyers de soins de longue durée.

Non-respect avec les exigences sur le *Loi de 2007 les foyers de soins de longue durée* a été trouvé. (Une exigence dans le loi comprend les exigences contenues dans les points énumérés dans la définition de "exigence prévue par la présente loi" au paragraphe 2(1) de la loi.)

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

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.)

WN #1: THE LICENSEE HAS FAILED TO COMPLY WITH THE Long-Term Care Homes Program Manual Standards and Criteria

Criteria B2.4 : Each resident's plan of care shall reflect his/her current strengths, abilities, preferences, needs, goals, safety/security risks, and decisions including advance directives provided by the resident or any substitute decisions provided by the lawfully authorized person. The plan of care shall give clear directions to staff providing care.

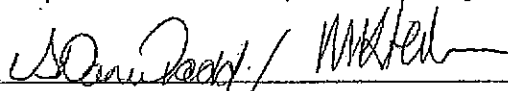
Findings:

1. There were no directions provided for staff regarding the method or frequency of the monitoring for a resident at risk for fall. There were no other falls related interventions noted in the plan of care.
2. There was no documentation available on health record regarding the frequency of monitoring for the resident.
3. Inconsistency was noted in staff understanding of "regular monitoring".

Inspector ID #: 198 and 116

Signature of Licensee or Representative of Licensee
Signature du Titulaire du représentant désigné

Signature of Health System Accountability and Performance Division
representative/Signature du (de la) représentant(e) de la Division de la
responsabilisation et de la performance du système de santé.





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Long-Term Care

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des Soins de longue durée

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Rapport
d'inspection prévue
le *Loi de 2007 les
foyers de soins de
longue durée*

Title:	Date:	Date of Report (if different from date(s) of inspection). September 22, 2010