



**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**

**Long-Term Care Homes Division
Long-Term Care Inspections Branch**

**Division des foyers de soins de
longue durée
Inspection de soins de longue durée**

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Report Date(s) / Date(s) du rapport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Jul 11, 2016	2016_353589_0013	006985-16	Follow up

Licensee/Titulaire de permis

INA GRAFTON GAGE HOME OF TORONTO
40 Bell Estate Road SCARBOROUGH ON M1L 0E2

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

INA GRAFTON GAGE HOME
40 Bell Estate Road SCARBOROUGH ON M1L 0E2

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

JOANNE ZAHUR (589)

Inspection Summary/Résumé de l'inspection



The purpose of this inspection was to conduct a Follow up inspection.

This inspection was conducted on the following date(s): June 14, 15, 16, 17 and 20, 2016.

During the course of the inspection, the inspector(s) spoke with Administrator, Director of Nursing (DON), Director of Support Services (DSS), Maintenance Lead (ML), Registered Staff (RN/RPN), Housekeeping Aides (HA), Dietary Aides (DA), Physiotherapy aide (PTA) and Physiotherapist (PT).

During the course of the inspection observations of resident home areas (RHA), dining rooms, food serveries, resident rooms, and RHA hallways were conducted, maintenance records, preventative maintenance schedules, pest control logs, infection prevention and control education records and relevant policies and procedures were reviewed.

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

During the course of this inspection, Non-Compliances were issued.

- 1 WN(s)**
- 1 VPC(s)**
- 0 CO(s)**
- 0 DR(s)**
- 0 WAO(s)**

The following previously issued Order(s) were found to be in compliance at the time of this inspection:

Les Ordre(s) suivants émis antérieurement ont été trouvés en conformité lors de cette inspection:



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REQUIREMENT/ EXIGENCE	TYPE OF ACTION/ GENRE DE MESURE	INSPECTION # / DE L'INSPECTION	NO	INSPECTOR ID #/ NO DE L'INSPECTEUR
LTCHA, 2007 S.O. 2007, c.8 s. 3.	WN	2015_405189_0017		589
LTCHA, 2007 S.O. 2007, c.8 s. 3.	WN	2015_405189_0013		589
O.Reg 79/10 s. 87. (2)	CO #002	2015_405189_0017		589
O.Reg 79/10 s. 88.	WN	2015_405189_0017		589
O.Reg 79/10 s. 88. (1)	CO #003	2015_405189_0017		589
O.Reg 79/10 s. 9. (1)	CO #001	2015_405189_0017		589



NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

Legend	Legendé
WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order	WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité 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.

WN #1: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 5. Every licensee of a long-term care home shall ensure that the home is a safe and secure environment for its residents. 2007, c. 8, s. 5.

Findings/Faits saillants :

1. The licensee has failed to ensure that the home is a safe and secure environment for its residents.

On an identified date, the inspector observed the physiotherapy (PT) room had been left open and unsupervised. Further observations revealed various types of equipment and several mobility aides stored against the mirrored wall. After five minutes the inspector notified staff #101 that the PT room had been left open and unsupervised. The PT room is located on the second floor where a RHA is located and a short distance from the elevators.

Interviews with staff #101 and staff #106 revealed that when the PT room is left unsupervised it should be kept closed.

On an identified date, observations by the inspector revealed the PT room as well as the PT's office had been left open. Further observations by the inspector revealed two electrical pieces of equipment within the PT's office. Neither of these pieces of equipment were secure as the lids could be easily lifted to reveal fluids which were both hot to touch.

Interview with staff #109 revealed that he/she had just left and was returning shortly however staff #109 further revealed the PT room should have been closed when left unsupervised.

Interview with staff #101 confirmed that by leaving the PT room open and unsupervised the home had failed to ensure a safe and secure environment for its residents. [s. 5.]

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 that the home is a safe and secure environment for its residents, to be implemented voluntarily.



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Issued on this 28th day of July, 2016

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

Original report signed by the inspector.