



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

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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Inspection Report under the LTC Homes Act, 2007 <input checked="" type="checkbox"/> Public Copy <input type="checkbox"/> Licensee Copy		Rapport d'inspection prévue de la Loi de 2007 les foyers de soins de longue durée <input type="checkbox"/> Copie du Titulaire <input checked="" type="checkbox"/> Copie de la Publique	
Date(s) of inspection/Date de l'inspection July 8, 9, 12, 2010		Inspection No/ d'inspection 2010_101_8609_06Jul 145348	Type of Inspection/Genre d'inspection Follow-up
Licensee/Titulaire Ina Grafton Gage Home of Toronto			
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(s) Amanda Williams			
Inspection Summary/Sommaire d'inspection			



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 constituer 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* à 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 purpose of this inspection was to conduct a Follow-up inspection in respect of previously identified unmet standards and criteria from the Program Manual that applied when the home was governed by the Nursing Homes Act:

Risk Review conducted May 17, 2010

- M3.3
- O2.1
- O3.1

The inspection was conducted by 1 inspector identified above. The inspection occurred on July 8, 9 & 12, 2010.

During the course of the inspection, the inspector(s) spoke with:

The Management Team which included the Administrator, Director of Care, Assistant Director of Care, and the Director of Support Services. Front line nursing, housekeeping and maintenance staff were also spoken with.

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

Safe and Secure

Accommodation- housekeeping

Accommodation- maintenance

Personal Support Services

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

6 WN

2 VPC

3 CO: CO# 001, #002 and #003

NON-COMPLIANCE / (Non-respectés)

Definitions/Définitions

WN – Written Notifications/Avis écrit

VPC – Plan of correction/Plan de redressement

DR – Director Referral/Régisseur envoyé

CO – Compliance Order/Ordres de conformité

WAO – Work and Activity Order/Ordres: travaux et activités



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

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

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.)

Non-respect avec les exigences sur le *Loi de 2007 les foyers de soins de longue durée* à 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.

WN#1: The Licensee has failed to comply with: LTCHA, 2007, S.O 2007, c.8, s.15(2)(c)
Every licensee of a long-term care home shall ensure that, the home, furnishings and equipment are maintained in a safe condition and in a good state of repair.

Findings:

1. The shower faucet handle in the 3rd floor shower room was observed to be broken (i.e. the handle is missing.)

VPC- Pursuant to LTCHA, 2007, S.O.2007, c.8, s.152(2) the licensee is hereby requested to prepare a written plan of correction for achieving compliance with s. 15(2)(c) in respect to ensuring shower faucets are maintained in good repair. This is implemented voluntarily.

Inspector ID#: 101

Required Compliance Date: October 1, 2010

WN#2: 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.

Findings:

1. July 9, 2010- the 3rd floor landing area directly in front of the elevators and outside of the resident home area had water and plaster falling from the ceiling creating a potential slip, trip and overhead hazard to residents. The area was unsecured with resident access to the above noted area and hazards.
2. A ladder and tool kit was present in the above noted unsecured area, unattended, with resident access to sharp objects and equipment, creating a potential hazard to residents.
3. July 12, 2010- The 4th floor patio door that led to an outside area was left unlocked and unattended with resident access. Concrete slabs were dislodged and drain pipes exposed creating potential trip and fall hazards to residents.
4. July 12, 2010- The receiving door in the basement was left unlocked, unattended and accessible to residents where large pieces of equipment were stored creating potential trip and fall hazards.

Inspector ID#: 101

Required Compliance Date: Immediately

Compliance Order #001 will be served on the Licensee.

WN#3: The Licensee has failed to comply with: O.Reg.79/10, s. 13
Every licensee of a long-term care home shall ensure that every resident bedroom occupied by more than one resident has sufficient privacy curtains to provide privacy.

Findings:

1. Privacy curtains in shared resident rooms do not provide privacy. The privacy curtain ceiling tracks



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

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

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.)

Non-respect avec les exigences sur le *Loi de 2007 les foyers de soins de longue durée* à 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.

surrounding resident beds do not meet creating a 4 to 6 inch gap between split curtains, therefore not providing privacy to residents when required and/or desired:

- Room 121
- Room 123
- Room 207
- Room 208
- Room 321
- Room 410
- Room 421

Inspector ID#: 101

Required Compliance Date: Immediately

Compliance Order #002 will be served on the Licensee.

WN#4: The Licensee has failed to comply with: O.Reg.79/10, s. 17(1)(a)

Every licensee of a long-term care home shall ensure that the home is equipped with a resident-staff communication and response system that, can be easily seen, accessed and used by residents, staff and visitors at all times

Findings:

1. The call bell cord in the 1st floor public washroom (across from the tuck shop) did not activate the call station when pulled on July 9 & 12, 2010.
2. Call bell cords in resident washrooms were located behind the wall mounted paper dispenser, therefore inaccessible to residents in the below identified washrooms:
 - Room 306
 - Room 308
 - Room 326
 - Room 410
 - Room 418

Inspector ID#: 101

Required Compliance Date: Immediately

Compliance Order #003 will be served on the Licensee.

WN#5: The Licensee has failed to comply with: LTCHA, 2007, S.O. 2007, c.8, s. 15(2)(a), **Every licensee of a long-term care home shall ensure that,**
(a) the home, furnishings and equipment are kept clean and sanitary.

Findings:

1. Resident room floors and furnishings were soiled with dirt, debris and dried substances on July 9.



Ministry of Health and Long-Term Care

Ministère de la Santé et des Soins de longue durée

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

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

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.)

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

2010 and July 12, 2010 in the following areas:

- Soiled resident lounge chairs were noted in rooms 410 and 421.
- Soiled resident room and bathroom floors were noted in the following areas:
 - Room 308;
 - Room 326;
 - Room 221 Bath
 - Room108
 - Room 104
 - 1W hallway at the stairwell landing.

VPC- Pursuant to LTCHA, 2007, S.O.2007, c.8, s.152(2) the licensee is hereby requested to prepare a written plan of correction for achieving compliance with s. 15(2)(a) in respect to ensuring the home and resident furnishings and equipment are kept clean and sanitary. This is implemented voluntarily.

Inspector ID#: 101
Required Compliance Date: September 1, 2010

WNN#6: The Licensee has failed to comply with: O.Reg.79/10, s. 90(1)(a)
As part of the organized program of maintenance services under clause 15 (1) (c) of the Act, every licensee of a long-term care home shall ensure that, maintenance services in the home are available seven days per week to ensure that the building, including both interior and exterior areas, and its operational systems are maintained in good repair;

Findings:

1. The exterior of the building is not maintained in good repair as evidenced by the following:
 - The driveway leading onto the property is unfinished with incomplete areas of pavement creating potential trip and fall hazards to residents.
 - The receiving area pavement was sunken and cracked with standing water present on July 9, 2010.

Inspector ID#: 101
Required Compliance Date: September 1, 2010

Signature of Licensee of Designated Representative
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.

Sara Rooney

[Signature]

Aug. 18, 2010

Title: *Adm. Director* Date: *Aug 18, 2010*

Date of Report (if different from date(s) of inspection): *Aug 18, 2010*



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

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

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 constituer 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* à 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.

Order(s) of an Inspector

Pursuant to section 153 and/or section 154 of the
 Long-Term Care Homes Act, 2007, S.O. 2007, c.8

Inspector Name:	Amanda Williams
Inspector Number:	101
Type of Inspection:	Follow-up (2010_101_8609_06Jul145348)
Licensee:	Ina Grafton Gage Home of Toronto
LTC Home:	Ina Grafton Gage Home 40 Bell Estate Road, Scarborough, ON M1L 0E2
Name of Administrator:	Sara Rooney

To Ina Grafton Gage Home of Toronto, you are hereby required to comply with the following order(s) by the date(s) set out below:

Compliance Order#: 001

Pursuant To: 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.

The licensee shall ensure the residents' environment is safe and secure from potential trip, fall and other hazards.

Grounds:

- The three below listed scenarios created safety and security risks to residents:
 - Plaster, debris, and water were falling from the 3rd floor landing area, accessible to residents.
 - Building construction tools were unsecured and accessible to residents on the 3rd floor landing area.
 - The 4th floor patio door leading to an outdoor area was unlocked and accessible to residents.

Inspector ID#: 101

This order must be complied with by: Immediately

Compliance Order: 002

Pursuant To: O.Reg.79/10, s. 13

Every licensee of a long-term care home shall ensure that every resident bedroom occupied by more than one resident has sufficient privacy curtains to provide privacy.

The licensee shall ensure all privacy curtains in shared resident rooms provide privacy, including the privacy curtains in resident bedrooms identified in the inspection report

Grounds:

- Privacy curtains do not provide privacy in shared resident rooms.

Inspector ID#: 101

This order must be complied with by: AUGUST 16, 2010

Compliance Order: 003

Pursuant To: O.Reg.79/10, s. 17(1)(a)

Every licensee of a long-term care home shall ensure that the home is equipped with a resident-staff communication and response system that, can be easily seen, accessed and used by residents, staff and visitors at all times;

The licensee shall ensure call bell cords are readily accessible to residents at all times, including the call bell cords in resident washrooms identified in the licensee report.

The licensee shall ensure all call bell cords activate the call stations located throughout the Home, including the 1st floor public washroom.

Grounds:

- When pulled the call bell cord in the 1st floor public washroom (across from the tuck shop) did not activate.
- Call bell cords in identified resident washrooms were inaccessible to residents.

Inspector ID#: 101

This order must be complied with by: Immediately

TAKE NOTICE:

- A licensee has the right to request a review of this Order by the Director and to request a stay of the Order by the Director as per section 163 of the *Long-Term Care Homes Act 2007*.
- The request for review by the Director must be made in writing and within 28 days of the date the Order is served.
- The request for the Director's review must be delivered personally or by registered mail to the address below, or by fax to the number below.

Director

c/o Appeals Clerk

Performance and Improvement Branch

Ministry of Health and Long-Term Care

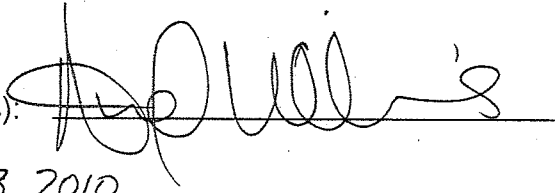
55 St. Clair Ave. West

Suite 800, 8th floor

Toronto ON M4V 2Y2

Fax: 416-327-7603

Signature of Inspector(s):

A handwritten signature in black ink, appearing to be "D. Williams", written over a horizontal line.

Date: August 18, 2010

Time Order is Served: 10:56 AM