



**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
Apr 3, 2017	2017_645558_0002	005989-17	Complaint

Licensee/Titulaire de permis

City of Toronto
55 JOHN STREET METRO HALL, 11th FLOOR TORONTO ON M5V 3C6

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

CASTLEVIEW WYCHWOOD TOWERS
351 CHRISTIE STREET TORONTO ON M6G 3C3

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

BARBARA PARISOTTO (558)

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): March 6, 8, 16, 2017.

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

During the course of the inspection, the inspector reviewed the applicant's long-term care home application and rejection letter.

**The following Inspection Protocols were used during this inspection:
Admission and Discharge**



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)

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. 44.
Authorization for admission to a home**

Specifically failed to comply with the following:

s. 44. (7) The appropriate placement co-ordinator shall give the licensee of each selected home copies of the assessments and information that were required to have been taken into account, under subsection 43 (6), and the licensee shall review the assessments and information and shall approve the applicant's admission to the home unless,

(a) the home lacks the physical facilities necessary to meet the applicant's care requirements; 2007, c. 8, s. 44. (7).

(b) the staff of the home lack the nursing expertise necessary to meet the applicant's care requirements; or 2007, c. 8, s. 44. (7).

(c) circumstances exist which are provided for in the regulations as being a ground for withholding approval. 2007, c. 8, s. 44. (7).

Findings/Faits saillants :



1. The licensee has failed to ensure that an applicant's admission to the home was approved after a review of the assessments and information provided by the placement co-ordinator unless, (b) the staff of the home lack the nursing expertise necessary to meet the applicant's care requirements.

A complaint letter was received by the Director in August 2016, related to the rejection of #001's application for admission to the home.

A review of the rejection letter from Castleview Wychwood Towers stated the reason for rejection was that the home lacked the nursing expertise necessary to manage the applicant's care requirements.

The letter referenced behavioural patterns suggesting these behaviours posed a safety and potential injury risk to the applicant, residents and staff of the home.

A review of the placement co-ordinator's application dated June 2016, revealed the applicant was stable.

An interview with the home's administrator revealed the nursing staff did not have the nursing expertise or resources to manage the applicant's behaviours. He also stated the applicant's behaviours could put other residents at risk.

The administrator further indicated the home does have a responsive behaviour program in place, including a lead registered nurse, additional funding from Toronto Central Local Health Integration Network (LHIN) and outreach programs. The home is expecting some additional personal care aide (PCA) resources and future registered practical nurse resources. [s. 44. (7) (b)]



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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 licensee shall approve the applicant's admission to the home unless, (b) the staff of the home lack the nursing expertise necessary to meet the applicant's care requirements, to be implemented voluntarily.

Issued on this 3rd day of April, 2017

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

Original report signed by the inspector.