



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
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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
May 22, 2013	2013_109153_0010	T-1450-12	Complaint

Licensee/Titulaire de permis

2063414 ONTARIO LIMITED AS GENERAL PARTNER OF 2063414 INVESTMENT
LP

302 Town Centre Blvd., Suite #200, TORONTO, ON, L3R-0E8

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

LEISUREWORLD CAREGIVING CENTRE - BARRIE

130 OWEN STREET, BARRIE, ON, L4M-3H7

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

LYNN PARSONS (153)

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): May 6 and 9, 2013.

During the course of the inspection, the inspector(s) spoke with previous and current Director of Administration(DOA), previous and current Director of Care (DOC), RAI MDS Co-ordinator, Registered Practical Nurse(RPN, Personal Support Workers (PSWs) and Residents.

During the course of the inspection, the inspector(s) Reviewed clinical health records.

Completed observations of the provision of care and staff to resident interactions.

The following Inspection Protocols were used during this inspection:
Dignity, Choice and Privacy

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES	
Legend	Legendé
WN – Written Notification	WN – Avis écrit
VPC – Voluntary Plan of Correction	VPC – Plan de redressement volontaire
DR – Director Referral	DR – Aiguillage au directeur
CO – Compliance Order	CO – Ordre de conformité
WAO – Work and Activity Order	WAO – Ordres : travaux et activités



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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.)

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

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 O.Reg 79/10, s. 231. Resident records

Every licensee of a long-term care home shall ensure that,

(a) a written record is created and maintained for each resident of the home;
and

(b) the resident's written record is kept up to date at all times. O. Reg. 79/10, s. 231.

Findings/Faits saillants :



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1. The licensee did not ensure a written record is maintained for each resident of the home.

A request was made on May 9, 2013 to the licensee to review RAI MDS assessments completed during May and June 2012 for Residents # 1, 2 and 3.

Upon review of the RAI MDS assessments it was noted information was missing from the residents' records which included the following areas:

Communication/Hearing Patterns, Vision, Psychosocial Well-Being, Physical Functioning, Continence, Health Conditions, Skin Condition and the Resident Assessment Protocols (RAPs) were not available to be reviewed.

During interviews with the Director of Administration and RAI MDS Co-ordinator it was identified the home changed their clinical health record software provider in June 2012. There was an issue with the conversion that resulted in the disappearance of the identified residents' RAI MDS assessments.

The RAI MDS Co-ordinator provided documentation to indicate the assessments had been completed and submitted to CIHI but the licensee was unable to produce a complete assessment for review. [s. 231. (a)]

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 a written record of the RAI MDS Assessments is maintained for each resident of the home, to be implemented voluntarily.

Issued on this 22nd day of May, 2013

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

Lynn Parsons