

Ministry of Health
and Long-Term Care

Ministère de la Santé
et des Soins de longue durée



Health System Accountability and
Performance Division
Performance Improvement and Compliance Branch
Toronto Service Area Office

55 St. Clair Avenue West, 8th Floor
Toronto ON M4V 2Y7

Telephone: 416-325-9297
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Division de la responsabilisation et de la
performance du système de santé
Direction de l'amélioration de la performance
et de la conformité
Bureau régional de services de Toronto

55, avenue St. Clair Ouest, 8^{ième} étage
Toronto, ON M4V 2Y7

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JAN 06 2011

Ms. Elizabeth Bradshaw
Administrator
Main Street Terrace
77 Main Street
Toronto, ON M4E 2V6

Dear Ms. Bradshaw:

Please find enclosed the ***Inspection Report-Public Copy*** for an inspection conducted **December 8, 2010** under the *Long-Term Care Homes Act, 2007* (LTCHA) for the purpose of ensuring compliance with requirements under the LTCHA.

This inspection report must be posted in the home, in a conspicuous and easily accessible location in accordance with the LTCHA, 2007, S.O. 2007, c.8, s.79 (1) and (2).

A copy of the ***Inspection Report-Public Copy*** must be made available without charge upon request. The report will also be on file with the Toronto Service Area Office, Performance Improvement and Compliance Branch.

Sincerely,

A handwritten signature in cursive script, appearing to read "a. Squires".

for Susan Squires
LTC Homes Inspector



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

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

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☐ Licensee Copy/Copie du Titulaire ☒ Public Copy/Copie Public

Date(s) of inspection/Date de l'inspection December 8, 2010	Inspection No/ d'inspection 2010_109_2589_08Dec141522	Type of Inspection/Genre d'inspection Complaint T 3092
Licensee/Titulaire Revera Long Term Care Inc 55 Standish Court 8 th floor Mississauga, Ontario, L5R 4B2 Phone 289-360-1200 Fax 289-360-1201		
Long-Term Care Home/Foyer de soins de longue durée Main Street Terrace - Toronto		
Name of Inspector(s)/Nom de l'inspecteur(s) Susan Squires (109)		

Inspection Summary/Sommaire d'inspection

The purpose of this inspection was to conduct a complaint inspection.

During the course of the inspection, the inspector(s) spoke with:
Administrator, Registered Nursing staff, Personal Support Workers, Resident

During the course of the inspection, the inspector(s):
Reviewed Health Record

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

☒ There are no findings of Non-Compliance as a result of this inspection.



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des Soins de longue durée

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

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

NON- COMPLIANCE / (Non-respectés)

Definitions/Définitions

WN – Written Notifications/Avis écrit
VPC – Voluntary Plan of Correction/Plan de redressement volontaire
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.

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'exigence 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.

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.

Susan Squires

Title:

Date:

Date of Report (if different from date(s) of inspection).

January 6, 2011