



**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
prévus le Loi de 2007 les
foyers de soins de longue**

Health System Accountability and Performance
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Performance Improvement and Compliance Branch
Division de la responsabilisation et de la
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Date(s) of inspection/Date(s) de l'inspection	Inspection No/ No de l'inspection	Type of Inspection/Genre d'inspection
Jun 28, Jul 4, 2012	2012_028102_0030	Follow up

Licensee/Titulaire de permis

ROYAL CANADIAN LEGION DISTRICT 'D' CARE CENTRES
59 Lawson Rd, TORONTO, ON, M1C-2J1

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

TONY STACEY CENTRE FOR VETERANS' CARE
59 Lawson Road, TORONTO, ON, M1C-2J1

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

WENDY BERRY (102)

Inspection Summary/Résumé de l'inspection

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

During the course of the inspection, the inspector(s) spoke with the Executive Director (Administrator); several registered and non registered nursing staff; a housekeeper; several residents and visitors.

During the course of the inspection, the inspector(s) followed up on 2 previously issued compliance orders; toured resident areas on the 1st and 2nd floor; checked the resident staff communication and response system and door security; reviewed several binders containing policies. The on site inspection occurred on June 28, 2012.

The following Inspection Protocols were used during this inspection:

Resident Charges

Safe and Secure Home

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON-RESPECT DES EXIGENCES



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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 O.Reg 79/10, s. 8. Policies, etc., to be followed, and records
Specifically failed to comply with the following subsections:

s. 8. (1) Where the Act or this Regulation requires the licensee of a long-term care home to have, institute or otherwise put in place any plan, policy, protocol, procedure, strategy or system, the licensee is required to ensure that the plan, policy, protocol, procedure, strategy or system,
(a) is in compliance with and is implemented in accordance with applicable requirements under the Act; and
(b) is complied with. O. Reg. 79/10, s. 8 (1).

Findings/Faits saillants :

1. O.reg. 79/10, s. 30 identifies that each of the organized programs required under section 8 to 16 of the Act must have relevant policies, procedures and protocols. Nursing and personal support support services is a required program.

O.reg. 79/10, s. 37(1) also identifies that residents' personal items are to be labelled within 48 hours of admission and of acquiring new items.

A binder titled "Tony Stacey Centre APIC Infection Control Manual" was identified by 2nd floor nursing staff as a current policy and procedure manual. "Section G- Nursing Policies" contains a page titled "General Infection Control Nursing policies". The policy identifies that "All residents personal items will be appropriately labeled with resident name and stored in bedside stands or other designated resident storage areas and cleaned and disinfected as indicated."

In the majority of resident rooms that were checked, residents' personal items, which includes toothbrushes, hairbrushes and combs, were not labelled with residents' names.

The home's policy is not complied with. [s. 8(1)(b)]

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 all residents' personal items are labelled and appropriately stored to prevent contamination, to be implemented voluntarily.

**THE FOLLOWING NON-COMPLIANCE AND/OR ACTION(S)/ORDER(S) HAVE BEEN COMPLIED WITH/
LES CAS DE NON-RESPECTS ET/OU LES ACTIONS ET/OU LES ORDRES SUIVANT SONT MAINTENANT
CONFORME AUX EXIGENCES:**



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**CORRECTED NON-COMPLIANCE/ORDER(S)
REDRESSEMENT EN CAS DE NON-RESPECT OU LES ORDERS:**

REQUIREMENT/ EXIGENCE	TYPE OF ACTION/ GENRE DE MESURE	INSPECTION # / NO DE L'INSPECTION	INSPECTOR ID #/ NO DE L'INSPECTEUR
O.Reg 79/10 r. 9.	WN #1	2011_046166_0012	102
O.Reg 79/10 r. 9.	WN #2	2012_028102_0009	102
O.Reg 79/10 r. 16.	WN #1	2011_046166_0012	102
O.Reg 79/10 r. 17.	CO #001	2012_028102_0009	102
LTCHA, 2007 S.O. 2007, c.8 s. 86.	WN #1	2012_028102_0009	102
O.Reg 79/10 r. 90.	WN #1	2011_046166_0012	102
O.Reg 79/10 r. 91.	WN #1	2011_046166_0012	102
O.Reg 79/10 r. 245.	CO #005	2011_046166_0012	102

Issued on this 4th day of July, 2012

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