

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

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Division de la responsabilisation et de la
performance du système de santé
Direction de l'amélioration de la performance
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Bureau régional de services de Toronto

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JAN 06 2011

Mr. Fernando A. Scopa
Executive Director
Villa Colombo
40 Playfair Avenue
Toronto ON M6B 2P9

Dear Mr. Scopa:

Please find enclosed the **Inspection Report-Public Copy** for an inspection conducted **November 15, 16, 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. Mancillo

for Nicole Ranger
LTC Homes Inspector

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☒ Public Copy/Copie Public (Revised December 16, 2010)

Date(s) of inspection/Date de l'inspection November 15 and November 16, 2010	Inspection No/ d'inspection 2010_189_8577_15Nov122408 T-1792	Type of Inspection/Genre d'inspection Critical Incident
Licensee/Titulaire Villa Colombo Homes for the Aged Inc. 40 Playflair Ave Toronto, Ontario M6B 2P9		
Long-Term Care Home/Foyer de soins de longue durée Villa Colombo Homes for the Aged Inc. 40 Playflair Ave Toronto, Ontario M6B 2P9		
Name of Inspector(s)/Nom de l'inspecteur(s) Nicole Ranger (189)		
Inspection Summary/Sommaire d'inspection		
The purpose of this inspection was to conduct a Critical Incident Inspection. During the course of the inspection, the inspector spoke with: Director of Nursing, Assistant Executive Director, Registered Nursing Staff During the course of the inspection, the inspector: Conducted a walk through of resident home area and common areas Reviewed health care records Reviewed the home's Falls Prevention Program The following Inspection Protocols were used in part or in whole during this inspection: Falls Prevention Inspection Protocol ☒ Findings of Non-Compliance were found during this inspection. The following action was taken: 1 WN		

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.

WN #1: The Licensee has failed to comply with LTCHA, 2007, S.O. 2007, c.8, s.6 (10) b

The Licensee shall ensure that the resident is reassessed and the plan of care reviewed and revised at least every six months and at any other time when,

(b) the resident's care needs change or care set out in the plan is no longer necessary

Findings:

1. An identified resident plan of care was not revised following multiple falls.

Inspector ID #: 189

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.

Title:

Date:

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

Nicole Rang
December 16th, 2010