

Ministry of Long-Term Care Long-Term Care Operations Division Long-Term Care Inspections Branch

Ottawa District 347 Preston Street, Suite 410 Ottawa, ON, K1S 3J4 Telephone: (877) 779-5559

# Original Public Report

Report Issue Date: November 4, 2024

Inspection Number: 2024-1312-0005

Inspection Type:

Proactive Compliance Inspection

Licensee: Caressant-Care Nursing and Retirement Homes Limited

Long Term Care Home and City: Caressant Care Cobden, Cobden

#### **INSPECTION SUMMARY**

The inspection occurred onsite on the following date(s): October 22, 23, 24, 25, 28, 30, 31, 2024 and November 1, 4, 2024

The following intake(s) were inspected:

Intake: #00129742 - PCI

The following Inspection Protocols were used during this inspection:

Skin and Wound Prevention and Management

Resident Care and Support Services

Food, Nutrition and Hydration

Medication Management

Residents' and Family Councils

Safe and Secure Home

Infection Prevention and Control

Prevention of Abuse and Neglect

Quality Improvement

Staffing, Training and Care Standards

Pain Management



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## **INSPECTION RESULTS**

#### WRITTEN NOTIFICATION: Communication and response system

NC #001 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 20 (b)

Communication and response system

s. 20. Every licensee of a long-term care home shall ensure that the home is equipped with a resident-staff communication and response system that, (b) is on at all times;

The licensee failed to ensure that the home is equipped with a resident-staff communication and response system that is on at all times. On a specific date and time during the course of the inspection, the call bell in a resident's room was not completely plugged into the wall which caused it not to alarm when activated. A review of the resident health records and interviews with front line staff revealed the resident routinely used the call bell to alert staff when they required assistance.

Sources: Review of resident health records, observations, interviews with front line staff

### WRITTEN NOTIFICATION: Registered dietitian

NC #002 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 80 (2)

Registered dietitian

s. 80 (2) The licensee shall ensure that a registered dietitian who is a member of the staff of the home is on site at the home for a minimum of 30 minutes per resident



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per month to carry out clinical and nutritional care duties.

The licensee has failed to ensure a registered dietitian is on site at the home for a minimum of 30 minutes per resident per month to carry out clinical and nutritional care duties. The home did not have a registered dietitian on site for a period of five months in 2023/2024.

Sources: Continuous quality improvement meeting minutes, interview with the Administrator

#### WRITTEN NOTIFICATION: Medication Management

NC #003 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1. Non-compliance with: O. Reg. 246/22, s. 138 (1) (b) Safe storage of drugs

s. 138 (1) Every licensee of a long-term care home shall ensure that, (b) controlled substances are stored in a separate, double-locked stationary cupboard in the locked area or stored in a separate locked area within the locked medication cart.

The licensee has failed to ensure that medication was stored in a cart that is secured and locked.

In accordance with O. Reg 246/22 s. 11 (1) b, the licensee of a long-term care home shall institute any plan or policy that must be complied with and all applicable requirements under the Act. Upon review of the licensee's pharmacy manual of policies and procedures, staff must ensure that narcotics and controlled medication are stored in a locked box, located in a locked cart or cupboard in a locked medication room. On a specific date and time during the course of the inspection, the medication cart on a unit was observed to be unlocked when stored in the locked medication storage room.



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Sources: Review of the licensee's medication policy and procedure and an observation of the medication storage room.

# WRITTEN NOTIFICATION: Continuous quality improvement committee

NC #004 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 166 (2) 5.

Continuous quality improvement committee

- s. 166 (2) The continuous quality improvement committee shall be composed of at least the following persons:
- 5. The home's registered dietitian.

The licensee has failed to ensure the continuous quality improvement committee includes the licensee's registered dietitian. The home did not have a registered dietitian on site for a period of five months to participate in the licensee's continuous quality improvement committee.

Sources: Continuous Quality Improvement meeting minutes, interview with the Administrator.