



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  
prévues le Loi de 2007 les  
foyers de soins de longue

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 performance et de la  
conformité

Ottawa Service Area Office  
347 Preston St, 4th Floor  
OTTAWA, ON, K1S-3J4  
Telephone: (613) 569-5602  
Facsimile: (613) 569-9670

Bureau régional de services d'Ottawa  
347, rue Preston, 4<sup>ième</sup> étage  
OTTAWA, ON, K1S-3J4  
Téléphone: (613) 569-5602  
Télécopieur: (613) 569-9670

Public Copy/Copie du public

Date(s) of inspection/Date(s) de l'inspection	Inspection No/ No de l'inspection	Type of Inspection/Genre d'inspection
May 25, 26, Jun 6, 2011	2011_041103_0006	Complaint

**Licensee/Titulaire de permis**

CARESSANT-CARE NURSING AND RETIREMENT HOMES LIMITED  
264 NORWICH AVENUE, WOODSTOCK, ON, N4S-3V9

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

CARESSANT CARE MARMORA  
58 BURSTHALL STREET, P.O. BOX 429, MARMORA, ON, K0K-2M0

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

DARLENE MURPHY (103)

**Inspection Summary/Résumé de l'inspection**

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

During the course of the inspection, the inspector(s) spoke with the Resident Care Coordinator and the Director of Care.

During the course of the inspection, the inspector(s) reviewed the resident health care record.

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

Hospitalization and Death

Sufficient Staffing

Findings of Non-Compliance were found during this inspection.

**NON-COMPLIANCE / NON-RESPECT DES EXIGENCES**

**Definitions**

WN – Written Notification  
VPC – Voluntary Plan of Correction  
DR – Director Referral  
CO – Compliance Order  
WAO – Work and Activity Order

**Définitions**

WN – Avis écrit  
VPC – Plan de redressement volontaire  
DR – Aiguillage au directeur  
CO – Ordre de conformité  
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 LTCHA, 2007 S.O. 2007, c.8, s. 6. Plan of care**  
Specifically failed to comply with the following subsections:

s. 6. (10) 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,  
(a) a goal in the plan is met;  
(b) the resident's care needs change or care set out in the plan is no longer necessary; or  
(c) care set out in the plan has not been effective. 2007, c. 8, s. 6 (10).

**Findings/Faits sayants :**

A resident presented with changes in his/her condition and care needs.

At no time during the changes in the resident care needs is the resident care plan updated to reflect or communicate any of the changes.

**Additional Required Actions:**

*CO # - 901 was served on the licensee. Refer to the "Order(s) of the Inspector".*

**WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 117. Medical directives and orders — drugs**  
Every licensee of a long-term care home shall ensure that,

(a) all medical directives or orders for the administration of a drug to a resident are reviewed at any time when the resident's condition is assessed or reassessed in developing or revising the resident's plan of care as required under section 6 of the Act; and  
(b) no medical directive or order for the administration of a drug to a resident is used unless it is individualized to the resident's condition and needs. O. Reg. 79/10, s. 117.

**Findings/Faits sayants :**



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A resident was given a medication in accordance with a medical directive.

The medical directive directs staff to administer the medication for a total of two doses and then directs staff to inform the physician.

The resident received the second dose of the medication and the physician was not informed. The staff continued to administer four subsequent doses.

There was no written physician order to administer the medication to the resident such that the medication could be individualized to the resident's condition and needs.

The registered staff were administering medications per medical directives that were not ordered and individualized to the resident's condition and needs by the physician.

The home has a medical directive for a treatment.

A resident was administered the treatment initially under the direction of a medical directive. The treatment was discontinued and then restarted at a later date without the notification or order of a physician.

The physician had not ordered the treatment to be administered to the resident. The medical directive for the treatment was being utilized by staff and it had not been individualized to the resident's condition and needs.

***Additional Required Actions:***

***CO # - 902 was served on the licensee. Refer to the "Order(s) of the Inspector".***

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**WN #3: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 8. Nursing and personal support services**

**Specifically failed to comply with the following subsections:**

**s. 8. (3) Every licensee of a long-term care home shall ensure that at least one registered nurse who is both an employee of the licensee and a member of the regular nursing staff of the home is on duty and present in the home at all times, except as provided for in the regulations. 2007, c. 8, s. 8 (3).**

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**Findings/Faits sayants :**

1. Caessant Care Marmora is an 84 bed long term care home. During a complaint inspection, it was noted that the home has not been ensuring that at least one registered nurse is on duty and present in the home at all times.

The registered nurse schedule was reviewed from January 2011 to March 2011. The home has 3-6 shifts which are not covered by a registered nurse each month. Resident Care Coordinator, Karen Wilkes does cover some of the shifts but even with this coverage the home was short in January 2011 with six shifts, February 2011 with four shifts and March 2011 with three shifts.

The shifts not being covered are not a result of an emergency or a planned or extended leave of absence by a registered nurse. Therefore, the exceptions to the requirement that at least one registered nurse who is both an employee of the licensee and a member of the regular nursing staff are not applicable as per Ontario Regulations 79/10 s. 45 (1)(2).

Marie Kent, Director of Care advises a registered nurse resigned approximately two weeks ago. The home has received a registered nurse application which Kent feels will help but will still not resolve the the problem.



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*Additional Required Actions:*

CO # - 903 was served on the licensee. Refer to the "Order(s) of the Inspector".

Issued on this 7th day of June, 2011

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

A handwritten signature in cursive script that reads "Darlene Gimpsey".



**Ministry of Health and  
Long-Term Care**

**Ministère de la Santé et  
des Soins de longue durée**

**Order(s) of the Inspector**  
Pursuant to section 153 and/or  
section 154 of the *Long-Term Care  
Homes Act, 2007*, S.O. 2007, c.8

**Ordre(s) de l'inspecteur**  
Aux termes de l'article 153 et/ou  
de l'article 154 de la *Loi de 2007 sur les foyers  
de soins de longue durée*, L.O. 2007, chap. 8

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 performance et de la conformité

Public Copy/Copie du public

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<b>Name of Inspector (ID #) / Nom de l'inspecteur (No) :</b>	DARLENE MURPHY (103)
<b>Inspection No. / No de l'inspection :</b>	2011_041103_0006
<b>Type of Inspection / Genre d'inspection:</b>	Complaint
<b>Date of Inspection / Date de l'inspection :</b>	May 25, 26, Jun 6, 2011
<b>Licensee / Titulaire de permis :</b>	CARESSANT-CARE NURSING AND RETIREMENT HOMES LIMITED 264 NORWICH AVENUE, WOODSTOCK, ON, N4S-3V9
<b>LTC Home / Foyer de SLD :</b>	CARESSANT CARE MARMORA 58 BURSTHALL STREET, P.O. BOX 429, MARMORA, ON, K0K-2M0
<b>Name of Administrator / Nom de l'administratrice ou de l'administrateur :</b>	LINDA MERKLEY

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To CARESSANT-CARE NURSING AND RETIREMENT HOMES LIMITED, you are hereby required to comply with the following order(s) by the date(s) set out below:



Ministry of Health and  
Long-Term Care

Ministère de la Santé et  
des Soins de longue durée

Order(s) of the Inspector  
Pursuant to section 153 and/or  
section 154 of the *Long-Term Care  
Homes Act, 2007*, S.O. 2007, c.8

Ordre(s) de l'inspecteur  
Aux termes de l'article 153 et/ou  
de l'article 154 de la *Loi de 2007 sur les foyers  
de soins de longue durée*, L.O. 2007, chap. 8

Order # /  
Ordre no : 901

Order Type /  
Genre d'ordre : Compliance Orders, s. 153. (1) (a)

Pursuant to / Aux termes de :

LTCHA, 2007 S.O. 2007, c.8, s. 6. (10) 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,

- (a) a goal in the plan is met;
- (b) the resident's care needs change or care set out in the plan is no longer necessary; or
- (c) care set out in the plan has not been effective. 2007, c. 8, s. 6 (10).

Order / Ordre :

The licensee shall immediately update all plans of care to reflect changes in resident condition and care needs to meet the requirements of s. 6(10)

Grounds / Motifs :

1. A resident presented with changes in his/her condition and care needs.

At no time during the changes in the resident care needs is the resident care plan updated to reflect or communicate any of the changes.

(103)

This order must be complied with by /  
Vous devez vous conformer à cet ordre d'ici le : Jun 08, 2011

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Ministry of Health and  
Long-Term Care

Ministère de la Santé et  
des Soins de longue durée

Order(s) of the Inspector  
Pursuant to section 153 and/or  
section 154 of the *Long-Term Care  
Homes Act, 2007*, S.O. 2007, c.8

Ordre(s) de l'inspecteur  
Aux termes de l'article 153 et/ou  
de l'article 154 de la *Loi de 2007 sur les foyers  
de soins de longue durée*, L.O. 2007, chap. 8

Order # /  
Ordre no : 902

Order Type /  
Genre d'ordre : Compliance Orders, s. 153. (1) (b)

**Pursuant to / Aux termes de :**

O.Reg 79/10, s. 117. Every licensee of a long-term care home shall ensure that,  
(a) all medical directives or orders for the administration of a drug to a resident are reviewed at any time when the resident's condition is assessed or reassessed in developing or revising the resident's plan of care as required under section 6 of the Act; and  
(b) no medical directive or order for the administration of a drug to a resident is used unless it is individualized to the resident's condition and needs. O. Reg. 79/10, s. 117.

**Order / Ordre :**

The licensee shall prepare, submit and implement a plan for achieving compliance to meet the requirement that no medical directive or order for the administration of a drug to a resident is used unless it is individualized to the resident's conditions and needs. The plan is to be submitted in writing by June 20, 2011 to Inspector, Darlene Murphy at 347 Preston Street, 4th floor, Ottawa, ON K1S 3J4 or by fax at 1-613-569-9670

**Grounds / Motifs :**

1. A resident was given a medication in accordance with a medical directive.

The medical directive directs staff to administer the medication for a total of two doses and then directs staff to inform the physician.

The resident received the second dose of the medication and the physician was not informed. The staff continued to administer four subsequent doses.

There was no written physician order to administer the medication to the resident such that the medication could be individualized to the resident's condition and needs.

The registered staff were administering medications per medical directives that were not ordered and individualized to the resident's condition and needs by the physician.

The home has a medical directive for a treatment.

A resident was administered the treatment initially under the direction of a medical directive. The treatment was discontinued and then restarted at a later date without the notification or order of a physician.

The physician had not ordered the treatment to be administered to the resident. The medical directive for the treatment was being utilized by staff and it had not been individualized to the resident's condition and needs.  
(103)

**This order must be complied with by /**

**Vous devez vous conformer à cet ordre d'ici le :** Jun 27, 2011



Ministry of Health and  
Long-Term Care

Ministère de la Santé et  
des Soins de longue durée

Order(s) of the Inspector  
Pursuant to section 153 and/or  
section 154 of the *Long-Term Care  
Homes Act, 2007, S.O. 2007, c.8*

Ordre(s) de l'inspecteur  
Aux termes de l'article 153 et/ou  
de l'article 154 de la *Loi de 2007 sur les foyers  
de soins de longue durée, L.O. 2007, chap. 8*

Order # /  
Ordre no : 903

Order Type /  
Genre d'ordre : Compliance Orders, s. 153. (1) (b)

Pursuant to / Aux termes de :

LTCHA, 2007 S.O. 2007, c.8, s. 8. (3) Every licensee of a long-term care home shall ensure that at least one registered nurse who is both an employee of the licensee and a member of the regular nursing staff of the home is on duty and present in the home at all times, except as provided for in the regulations. 2007, c. 8, s. 8 (3).

Order / Ordre :

The licensee shall prepare, submit and implement a plan for achieving compliance to meet the requirement that at least one registered nurse who is both an employee and a member of the regular nursing staff of the home is on duty and present in the home at all times. The plan is to be submitted in writing by June 20, 2011 to Inspector, Darlene Murphy by either mailing to 347 Preston Street, 4th floor, Ottawa, Ontario K1S 3J4 or by fax at 1-613-569-9670.

Grounds / Motifs :

1. Caessant Care Marmora is an 84 bed long term care home. During a complaint inspection, it was noted that the home has not been ensuring that at least one registered nurse is on duty and present in the home at all times.

The registered nurse schedule was reviewed back to January 2011 and the home currently has 3-6 shifts which are not covered by a registered nurse each month. Resident Care Coordinator, Karen Wilkes does cover some of the shifts but even with this coverage the home was short in January 2011 with six shifts, February with four shifts and March with three shifts.

The shifts not being covered are not a result of an emergency or a planned or extended leave of absence by a registered nurse. Therefore, the exceptions to the requirement that at least one registered nurse who is both an employee of the licensee and a member of the regular nursing staff are not applicable as per Ontario Regulations 79/10 s. 45 (1)(2).

Marie Kent, Director of Care advises a registered nurse resigned approximately two weeks ago. The home has received a registered nurse application which Kent feels will help but will still not resolve the the problem.

(103)

This order must be complied with by /  
Vous devez vous conformer à cet ordre d'ici le : Sep 19, 2011

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Ministry of Health and  
Long-Term Care

Ministère de la Santé et  
des Soins de longue durée

Order(s) of the Inspector  
Pursuant to section 153 and/or  
section 154 of the *Long-Term Care  
Homes Act, 2007*, S.O. 2007, c.8

Ordre(s) de l'inspecteur  
Aux termes de l'article 153 et/ou  
de l'article 154 de la *Loi de 2007 sur les foyers  
de soins de longue durée*, L.O. 2007, chap. 8

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**REVIEW/APPEAL INFORMATION / RENSEIGNEMENTS SUR LE RÉEXAMEN/L'APPEL**

**TAKE NOTICE:**

The Licensee has the right to request a review by the Director of this (these) Order(s) and to request that the Director stay this (these) Order(s) in accordance with section 163 of the *Long-Term Care Homes Act, 2007*.

The request for review by the Director must be made in writing and be served on the Director within 28 days from the day the order was served on the Licensee.

The written request for review must include,

- (a) the portions of the order in respect of which the review is requested;
- (b) any submissions that the Licensee wishes the Director to consider; and
- (c) an address for services for the Licensee.

The written request for review must be served personally, by registered mail or by fax upon:

Director  
c/o Appeals Clerk  
Performance Improvement and Compliance Branch  
Ministry of Health and Long-Term Care  
55 St. Clair Ave. West  
Suite 800, 8th floor  
Toronto, ON M4V 2Y2  
Fax: 416-327-760

When service is made by registered mail, it is deemed to be made on the fifth day after the day of mailing and when service is made by fax, it is deemed to be made on the first business day after the day the fax is sent. If the Licensee is not served with written notice of the Director's decision within 28 days of receipt of the Licensee's request for review, this(these) Order(s) is(are) deemed to be confirmed by the Director and the Licensee is deemed to have been served with a copy of that decision on the expiry of the 28 day period.

The Licensee has the right to appeal the Director's decision on a request for review of an Inspector's Order(s) to the Health Services Appeal and Review Board (HSARB) in accordance with section 164 of the *Long-Term Care Homes Act, 2007*. The HSARB is an independent tribunal not connected with the Ministry. They are established by legislation to review matters concerning health care services. If the Licensee decides to request a hearing, the Licensee must, within 28 days of being served with the notice of the Director's decision, give a written notice of appeal to both:

Health Services Appeal and Review Board and the Director

Attention Registrar  
151 Bloor Street West  
9th Floor  
Toronto, ON  
M5S 2T5

c/o Appeals Clerk  
Performance Improvement and Compliance Branch  
55 St. Clair Avenue, West  
Suite 800, 8th Floor  
Toronto, ON M4V 2Y2

Fax: 416-327-7603

Upon receipt, the HSARB will acknowledge your notice of appeal and will provide instructions regarding the appeal process. The Licensee may learn more about the HSARB on the website [www.hsarb.on.ca](http://www.hsarb.on.ca).

Issued on this 7th day of June, 2011

Signature of Inspector /  
Signature de l'inspecteur :

Name of Inspector /  
Nom de l'inspecteur :

DARLENE MURPHY

Service Area Office /  
Bureau régional de services :

Ottawa Service Area Office