



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

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

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

**Rapport d'inspection sous la
Loi de 2007 sur les foyers de
soins de longue durée**

**Health System Accountability and
Performance Division
Performance Improvement and
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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**

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Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Jul 16, 2014	2014_270531_0014	O-000598- 14	Resident Quality Inspection

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

SUSAN DONNAN (531), AMBER MOASE (541), PAUL MILLER (143), SAMI
JAROUR (570)

Inspection Summary/Résumé de l'inspection



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The purpose of this inspection was to conduct a Resident Quality Inspection inspection.

This inspection was conducted on the following date(s): July 7, 8, 9,10,11, and 14, 2014

During the course of the inspection, the inspector(s) spoke with Residents, Resident Family members, Personal Support Workers, Registered Practical Nurses, Registered Nurses, Family Council Representative, Resident Council Representative, Environmental Manager, Infection Prevention and Control Manager, Nutritional Care Manager, RAI Co-ordinator, Director of Care and the Administrator.

During the course of the inspection, the inspector(s) toured the home,observed resident care and services including dining and medication administration, reviewed resident health care records and policies and procedures related to infection prevention and control, falls prevention, and medication administration and management system.

The following Inspection Protocols were used during this inspection:

**Accommodation Services - Housekeeping
Dining Observation
Falls Prevention
Family Council
Food Quality
Hospitalization and Change in Condition
Infection Prevention and Control
Medication
Nutrition and Hydration
Personal Support Services
Prevention of Abuse, Neglect and Retaliation
Residents' Council
Responsive Behaviours
Skin and Wound Care**

Findings of Non-Compliance were found during this inspection.



NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

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.) 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. 3. Residents' Bill of Rights



Specifically failed to comply with the following:

s. 3. (1) Every licensee of a long-term care home shall ensure that the following rights of residents are fully respected and promoted:

8. Every resident has the right to be afforded privacy in treatment and in caring for his or her personal needs. 2007, c. 8, s. 3 (1).

s. 3. (1) Every licensee of a long-term care home shall ensure that the following rights of residents are fully respected and promoted:

11. Every resident has the right to,

i. participate fully in the development, implementation, review and revision of his or her plan of care,

ii. give or refuse consent to any treatment, care or services for which his or her consent is required by law and to be informed of the consequences of giving or refusing consent,

iii. participate fully in making any decision concerning any aspect of his or her care, including any decision concerning his or her admission, discharge or transfer to or from a long-term care home or a secure unit and to obtain an independent opinion with regard to any of those matters, and

iv. have his or her personal health information within the meaning of the Personal Health Information Protection Act, 2004 kept confidential in accordance with that Act, and to have access to his or her records of personal health information, including his or her plan of care, in accordance with that Act. 2007, c. 8, s. 3 (1).

Findings/Faits saillants :



1. The licensee has failed to comply with LTCHA, 2007 s. 3 (1) 8. whereby resident rights to be afforded privacy in treatment and in caring for his or her personal needs were not protected.

On a specified date during the observation of the breakfast medication pass S#109 was observed doing glucometer reading and administering insulin in the exposed abdomen to Resident #1 while he/she and co-residents were being served breakfast. On a specified during the noon medication pass S#113 was observed doing glucometer reading and administering insulin in the exposed abdomen to Resident #2 while he/she and co-residents were being served lunch.

The Director of Care was interviewed and stated this was not an acceptable practice . [s. 3. (1) 8.]

2. The licensee has failed to comply with LTCHA 2007, s. 3(1)(11)(iv) whereby the resident has not had his or her personal health information pertaining to medication kept confidential.

On an identified date in an interview with S#101 and S#109 it was confirmed that the resident individual medication administration packages are placed in the regular garbage.

On a specified date S#108 the Director of Care was interviewed and confirmed that the resident individual medication administration packages were placed in the regular garbage for disposal. Confidentiality with respect to the residents health medication profile was not protected or maintained. [s. 3. (1) 11. iv.]

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 residents have glucometer readings and insulin injections given in a private area, to be implemented voluntarily.

WN #2: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 85. Satisfaction survey



Specifically failed to comply with the following:

s. 85. (3) The licensee shall seek the advice of the Residents' Council and the Family Council, if any, in developing and carrying out the survey, and in acting on its results. 2007, c. 8, s. 85. (3).

Findings/Faits saillants :

1. The licensee has failed to comply with LTCHA 2007 c.8 s. 85(3) in that the home did not seek the advice of the Family Council in the development and implementation of the satisfaction survey including incorporation of recommendations made.

Review of the Family Council meeting minutes from July 2013 to May 2014 confirm that the Family Council advice had not been requested in development of the satisfaction survey.

On a specified date interview with S#107 a Family Council representative confirmed that the Family Council did not participate in the development, and implementation of the satisfaction survey.

On a specified date during an interview with the Administrator confirmed that the satisfaction survey is developed at the corporate level and the Family Council had not been consulted in respect of the development of the survey. [s. 85. (3)]

2. The licensee has failed to comply with LTCHA 2007 c.8 s. 85(3) in that the home did not seek the advice of the Resident's Council in developing and implementing the satisfaction survey, and in acting on its results.

On an identified during an interview with the Administrator confirmed that the satisfaction survey is developed corporately and that residents are not asked for their advice in the development, implementation or evaluation of the survey. [s. 85. (3)]



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Issued on this 16th day of July, 2014

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