

Inspection Report Under the Fixing Long-Term Care Act, 2021

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

Public Report

Report Issue Date: February 3, 2025

Inspection Number: 2025-1184-0001

Inspection Type:

Complaint

Licensee: Carveth Nursing Home Limited

Long Term Care Home and City: Carveth Care Centre, Gananoque

INSPECTION SUMMARY

The inspection occurred onsite on the following dates: January 27, 28, 30, 31, 2025

The following intakes were completed during this Complaint Inspection:

Intake #00134977 was related to communication, and multiple resident care concerns.

Intake: #00138173 was related to concerns regarding the qualifications and prehire screening of a specific staff member.

The following Inspection Protocols were used during this inspection:

Skin and Wound Prevention and Management

Continence Care

Food, Nutrition and Hydration

Medication Management

Infection Prevention and Control

Responsive Behaviours

Staffing, Training and Care Standards

Reporting and Complaints



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INSPECTION RESULTS

WRITTEN NOTIFICATION: Plan of care

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

Non-compliance with: FLTCA, 2021, s. 6 (9) 1.

Plan of care

- s. 6 (9) The licensee shall ensure that the following are documented:
- 1. The provision of the care set out in the plan of care.

The licensee has failed to ensure the provision of the care set out in the plan of care was documented for a resident. The resident's plan of care indicated they required a specific intervention to be completed at specific times.

A review of the resident's Point of Care (POC) documentation for specific months, identified the documentation was not completed.

Sources: The resident's plan of care, POC documentation for specific months, interviews with multiple staff.

WRITTEN NOTIFICATION: Administration of drugs

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

Non-compliance with: O. Reg. 246/22, s. 140 (2)

Administration of drugs

s. 140 (2) The licensee shall ensure that drugs are administered to residents in accordance with the directions for use specified by the prescriber. O. Reg. 246/22, s. 140 (2).

The licensee has failed to ensure that a drug was administered to a specific resident in accordance with the directions for use specified by the prescriber on three



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specific dates.

Sources: A Physician's Order written on a specific date for the resident, the resident's Electronic Medication Record (EMAR) for a specific month, the resident's progress notes.

WRITTEN NOTIFICATION: Screening Measures and Ongoing Declarations

NC #003 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 252 (1)

Hiring staff, accepting volunteers

s. 252 (1) This section applies where a police record check is required before a licensee hires a staff member or accepts a volunteer as set out in subsection 81 (2) of the Act.

The licensee has failed to ensure the required police record check, specific to a Vulnerable Sector Check (VSC) was conducted before hiring a specific staff member on as specific date.

Sources: Interview with multiple staff members, the specific staff member's offer of employment Letter, resume, request: Online Record Check request from a specific regional police department