



**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
prévus 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**

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Date(s) of inspection/Date(s) de l'inspection	Inspection No/ No de l'inspection	Type of Inspection/Genre d'inspection
Jan ^{Bmeal} 28, 25, 26, 27, 28, Feb 8, 2012	2012_088135_0005	Complaint

Licensee/Titulaire de permis

SHARON FARMS & ENTERPRISES LIMITED
1340 HURON STREET, LONDON, ON, N5V-3R3

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

KENSINGTON VILLAGE
1340 HURON STREET, LONDON, ON, N5V-3R3

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

BONNIE MACDONALD (135)

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 Administrator, Director of Care, Assistant Director of Care, Food Services Manager, Administrative Support Clerk, Registered Nurse, 5 Registered Practical Nurses, 4 Personal Support Workers/Health Care Aides, 2 Dietary Aides and 6 residents.

During the course of the inspection, the inspector(s) reviewed staffing plans, staff training records, policies and procedures, observed care provided to residents, observed 3 meals services, and reviewed clinical health record of resident.

Log #'s-L-000053-12, L-000068-12

The following Inspection Protocols were used during this inspection:

Infection Prevention and Control

Medication

Personal Support Services

Sufficient Staffing

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.)	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.
The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.	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 O.Reg 79/10, s. 8. Policies, etc., to be followed, and records
Specifically failed to comply with the following subsections:

s. 8. (1) Where the Act or this Regulation requires the licensee of a long-term care home to have, institute or otherwise put in place any plan, policy, protocol, procedure, strategy or system, the licensee is required to ensure that the plan, policy, protocol, procedure, strategy or system,
(a) is in compliance with and is implemented in accordance with applicable requirements under the Act; and
(b) is complied with. O. Reg. 79/10, s. 8 (1).

Findings/Faits saillants :

1. The home's Hand Washing and Hand Sanitizing policy IC-I-100, February 2010, states; hands should be washed if the following occurs: after contact with objects that are likely to be contaminated. Home's Hand Washing and Hand Sanitizing policy IC-I-100, was not complied with on the following occasions:

Dinner service January 25, 2012, in home's dining room, observed Registered Practical Nurse did not comply with the policy when serving residents food and beverages, without evidence of hand hygiene, after clearing resident's dirty dishes.

Breakfast service January 27, 2012, in home's dining room, observed Dietary Aide did not comply with the policy when serving residents muffins with her fingers without evidence of hand hygiene, after clearing resident's dirty dishes.

In interview January 27, 2012, home's Assistant Director of Care and Food Service Manager confirmed the home's Hand Washing and Hand Sanitizing policy IC-I-100, February 2010, was not complied with during dinner service January 25, 2012 and breakfast service January 27, 2012, in home's dining room.
 [O.Reg.79/10,s.8(1).(b)]

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 the home's Hand Washing and Hand Sanitizing policy IC-I-100 is complied with related to, proper hand washing techniques between residents, to be implemented voluntarily.

WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 129. Safe storage of drugs

Specifically failed to comply with the following subsections:

s. 129. (1) Every licensee of a long-term care home shall ensure that,
(a) drugs are stored in an area or a medication cart,
(i) that is used exclusively for drugs and drug-related supplies,
(ii) that is secure and locked,
(iii) that protects the drugs from heat, light, humidity or other environmental conditions in order to maintain efficacy, and
(iv) that complies with manufacturer's instructions for the storage of the drugs; and
(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. O. Reg. 79/10, s. 129 (1).

Findings/Faits saillants :

1. January 25, 2012, 16:09, observed unlocked, unattended medication cart in the home.
In interview January 25, 2012, Registered Practical Nurse confirmed cart should be locked when not in full view when dispensing medications.

January 25, 2012, in interview home's Assistant Director of Care confirmed her expectation the medication cart must be locked at all times when cart is not in full view of staff dispensing medications.

[O.Reg 79/10,S.129(ii)]

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 ensuring drugs are stored in medication carts that are secure and locked when not being monitored, to be implemented voluntarily.

WN #3: The Licensee has failed to comply with O.Reg 79/10, s. 229. Infection prevention and control program

Specifically failed to comply with the following subsections:

s. 229. (4) The licensee shall ensure that all staff participate in the implementation of the program. O. Reg. 79/10, s. 229 (4).

Findings/Faits saillants :



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1. Staff did not participate in the implementation of the homes' Infection Prevention and Control Program when the following were observed in resident care areas on first floor:

January 25, 2012, observed in resident's shared washroom, unlabeled nail file, tooth paste, tooth brush and facial blush brush.

In interview, Personal Support Worker confirmed these items should be labeled when resident is admitted to the home. Personal Support Worker was not sure who they belonged to as the washroom is shared by residents.

January 25, 2012, home's Assistant Director of Care, observed with inspector the unlabeled items in shared washroom. She confirmed her expectation resident's personal hygiene items are to be labeled when resident is admitted to the home.

Dinner service January 25, 2012, in home's dining room, observed Registered Practical Nurse did not implement infection control procedures when serving residents food and beverages without evidence of hand hygiene, after clearing resident's dirty dishes.

Breakfast service January 27, 2012, in home's dining room, observed Dietary Aide did not implement infection control procedures when serving residents muffins with their fingers without evidence of hand hygiene, after clearing residents dirty dishes.

In interview January 27, 2012, home's Assistant Director of Care and Food Service Manager confirmed the home's Infection Prevention and Control program was not implemented, related to safe food handling during dinner service January 25, 2012 and breakfast service January 27, 2012, in the home.

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 home's staff participate in the implementation of the home's Infection Prevention and Control Program for labelling of residents personal hygiene items and proper hand washing techniques when serving resident meals, to be implemented voluntarily.

Issued on this 8th day of February, 2012

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

Bonnie MacDonald #135