



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

**Rapport d'inspection
prévue le *Loi de 2007
les foyers de soins de
longue durée***

Ministry of Health and Long-Term Care
Health System Accountability and Performance Division
Performance Improvement and Compliance Branch

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**Ministère de la Santé et des Soins de
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Division de la responsabilisation et de la performance du
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Direction de l'amélioration de la performance et de la
conformité

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Date(s) of inspection/Date de l'inspection August, 17, 18, 19, 20, 2010	Inspection No/ d'inspection 2010_141_901_16Aug165823	Type of Inspection/Genre d'inspection Critical Incident H-00544
Licensee/Titulaire King Nursing Home Ltd. 39 Sterne Street, Bolton, Ontario, L7E 1B9		
Long-Term Care Home/Foyer de soins de longue durée King Nursing Home 39 Sterne Street, Bolton, Ontario, L7E 1B9		
Name of Inspector(s)/Nom de l'inspecteur(s) Sharlee McNally, Compliance Inspector – Nursing #141.		
Inspection Summary/Sommaire d'inspection		
<p>The purpose of this inspection was to conduct a critical Incident inspection received in the Hamilton Service Area Office on June 28, 2010 concerning resident receiving wrong medication causing transfer to hospital.</p> <p>During the course of the inspection, the inspector spoke with: the Administrator, Director of Care, Registered Practical Nurses.</p> <p>During the course of the inspection, the inspector: reviewed the residents file, the homes policy and procedure for medication administration and staff orientation, and records of medication errors in the home for 2010.</p> <p><input checked="" type="checkbox"/> Findings of Non-Compliance were found during this inspection. The following action was taken:</p> <p>2 WN</p>		



NON- COMPLIANCE / (Non-respectés)

Definitions/Définitions

WN – Written Notifications/Avis écrit
VPC – Voluntary Plan of Correction/Plan de redressement volontaire
DR – Director Referral/Régisseur envoyé
CO – Compliance Order/Ordres de conformité
WAO – Work and Activity Order/Ordres: travaux et activités

The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.

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 suivant constituer un avis d'écrit de l'exigence prévue le paragraphe 1 de section 152 de les foyers de soins de longue durée.

Non-respect avec les exigences sur le *Loi de 2007 les foyers de soins de longue durée* à trouvé. (Une exigence dans le loi comprend les exigences contenues dans les points énumérés dans la définition de "exigence prévue par la présente loi" au paragraphe 2(1) de la loi.

WN #1: THE LICENSEE HAS FAILED TO COMPLY WITH THE Long-Term Care Homes Program Manual Standards and Criteria

Criteria C1.17 – Each resident shall receive medication and treatment as ordered by the physician, unless the resident refuses.

Findings:

1. An identified resident received an injectable medication. The resident was not diagnosed with a medical condition for which to receive the medication and did not have a physician order to receive the medication.

Inspector ID #: #141

WN #2: THE LICENSEE HAS FAILED TO COMPLY WITH THE Long-Term Care Homes Program Manual Standards and Criteria

Criteria C1.16: Residents shall be correctly identified prior to receiving medications and treatments.

Findings:

1. A registered staff administered medication by injection to an identified resident in error. The staff confirmed that the resident's identification was not checked until after the medication was administered.



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Signature du Titulaire du représentant désigné	representative/Signature du (de la) représentant(e) de la Division de la responsabilisation et de la performance du système de santé.
Title: _____ Date: _____	<i>John J. McNally July 21/11</i> Date of Report: (if different from date(s) of inspection).