



**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 sous la  
Loi de 2007 sur les foyers de  
soins de longue durée**

**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**

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**Public Copy/Copie du public**

| <b>Report Date(s) /<br/>Date(s) du Rapport</b> | <b>Inspection No /<br/>No de l'inspection</b> | <b>Log # /<br/>Registre no</b> | <b>Type of Inspection /<br/>Genre d'inspection</b> |
|--|---|--------------------------------|--|
| Aug 9, 2013                                    | 2013_217137_0017                              | L-000467-13                    | Critical Incident<br>System                        |

**Licensee/Titulaire de permis**

**MERITAS CARE CORPORATION  
567 VICTORIA AVENUE, WINDSOR, ON, N9A-4N1**

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

**FRANKLIN GARDENS LONG TERM CARE HOME  
24 FRANKLIN ROAD, LEAMINGTON, ON, N8H-4B7**

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

**MARIAN MACDONALD (137)**

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

**The purpose of this inspection was to conduct a Critical Incident System  
inspection.**

**This inspection was conducted on the following date(s): August 8, 2013**

**During the course of the inspection, the inspector(s) spoke with Director of Care,  
Assistant Director of Care and Quality Improvement Nurse.**

**During the course of the inspection, the inspector(s) reviewed internal  
investigative reports, medication administration policy and registered staff  
training records , related to medication administration.**

**The following Inspection Protocols were used during this inspection:**



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## Medication

**Findings of Non-Compliance were found during this inspection.**

| <b>NON-COMPLIANCE / NON - RESPECT DES EXIGENCES</b>   |   |
|---|---|
| <b>Legend</b><br><br>WN – Written Notification<br>VPC – Voluntary Plan of Correction<br>DR – Director Referral<br>CO – Compliance Order<br>WAO – Work and Activity Order  | <b>Legendé</b><br><br>WN – Avis écrit<br>VPC – Plan de redressement volontaire<br>DR – Aiguillage au directeur<br>CO – Ordre de conformité<br>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. 135. Medication incidents and adverse drug reactions**



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

- s. 135. (2) In addition to the requirement under clause (1) (a), the licensee shall ensure that,
- (a) all medication incidents and adverse drug reactions are documented, reviewed and analyzed; O. Reg. 79/10, s. 135 (2).
  - (b) corrective action is taken as necessary; and O. Reg. 79/10, s. 135 (2).
  - (c) a written record is kept of everything required under clauses (a) and (b). O. Reg. 79/10, s. 135 (2).
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**Findings/Faits saillants :**

1. There is no documented evidence to ensure that all medication incidents are documented, reviewed and analyzed, that corrective action is taken as necessary and that a written record is kept of everything required.

The Director of Care confirmed that these measures, related to medication incidents, are not implemented. [s. 135. (2)]

**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 that all medication incidents are documented,  
reviewed and analyzed, that corrective action is taken as necessary and that a  
written record is kept of everything required, to be implemented voluntarily.***

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Issued on this 9th day of August, 2013

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

Marian C. Mac Donald