

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

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Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection		Type of Inspection / Genre d'inspection
Feb 26, 2013	2013_174189_0003	T-558-12, T- 10-13	Complaint

#### Licensee/Titulaire de permis

2063414 ONTARIO LIMITED AS GENERAL PARTNER OF 2063414 INVESTMENT LP

302 Town Centre Blvd.,, Suite #200, TORONTO, ON, L3R-0E8

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

LEISUREWORLD CAREGIVING CENTRE - LAWRENCE

2005 LAWRENCE AVENUE WEST, TORONTO, ON, M9N-3V4

Name of Inspector(s)/Nom de l'inspecteur ou des inspecteurs NICOLE RANGER (189)

# Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct a Complaint inspection.

This inspection was conducted on the following date(s): January 8, 9, 11, 2013

During the course of the inspection, the inspector(s) spoke with Director of Administration, Director of Care, Physician, Registered Staff

During the course of the inspection, the inspector(s) Reviewed health care records

Observation of medication cart

The following Inspection Protocols were used during this inspection:



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#### Medication

### **Personal Support Services**

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. 129. Safe storage of drugs



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

- 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 O. Reg. 79/10, s. 129 (1).
- (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. The licensee failed to ensure that drugs are stored in an area or a medication cart that is used exclusively for drugs and drug-related supplies.

During observation of the second and third floor medication carts, Inspector noted various non drug and non drug-related items being stored in the medication cart and the double locked narcotics bins. These items include money, earrings, rings, gold tooth, cigarette lighter, baptism certificate, personal checks and personal receipts for foot care services. [s. 129. (1) (a)]

# 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 drugs are stored in an area or medication cart that is used exclusively for drugs and drug-related supplies, to be implemented voluntarily.

WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 125. Monitored dosage system



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## Specifically failed to comply with the following:

s. 125. (2) The monitored dosage system must promote the ease and accuracy of the administration of drugs to residents and support monitoring and drug verification activities. O. Reg. 79/10, s. 125 (2).

## Findings/Faits saillants:

1. The licensee failed to ensure that the monitored dosage system promote the ease and accuracy of the administration of drugs to residents.

Inspector spoke with three registered staff regarding the dispensing of liquid Dilantin medication. Two of the three registered staff use a measuring cup, one registered staff uses syringes. The measuring cup has graduated increments of five (5ml, 10ml, 15ml, 20 ml). The syringe has graduated increments in single numbers (1ml, 2ml, 3ml, etc). Interview with registered staff and Director of Care (DOC) confirmed that as per policy the syringe will give a more accurate measurement of administration of liquid Dilantin medication. There is no consistent practice to measure Dilantin medication to ensure accurate administration of the drug to residents. [s. 125. (2)]

Issued on this 28th day of February, 2013

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