



Ministry of Health and Long-Term Care

Ministère de la Santé et des Soins de longue durée

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

Rapport d'inspection prévue 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
Direction de l'amélioration de la performance et de la conformité

Ottawa Service Area Office
347 Preston St, 4th Floor
OTTAWA, ON, K1S-3J4
Telephone: (613) 569-5602
Facsimile: (613) 569-9670

Bureau régional de services d'Ottawa
347, rue Preston, 4ième étage
OTTAWA, ON, K1S-3J4
Téléphone: (613) 569-5602
Télécopieur: (613) 569-9670

Public Copy/Copie du public

Table with 3 columns: Date(s) of inspection, Inspection No, Type of Inspection. Row 1: Nov 1, 5, 7, 2012; 2012_179103_0010; Follow up

Licensee/Titulaire de permis

COUNTY OF PRINCE EDWARD
603 Highway 49, R R 2, PICTON, ON, K0K-2T0

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

H.J. MCFARLAND MEMORIAL HOME
R.R. #2, 603 HIGHWAY 49, HALLOWELL TOWNSHIP, PICTON, ON, K0K-2T0

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

DARLENE MURPHY (103)

Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct a Follow up inspection.

During the course of the inspection, the inspector(s) spoke with a Registered Nurse, a Registered Practical Nurse, the Director of Care and the Administrator.

During the course of the inspection, the inspector(s) did a walkthrough of the home, inspected resident beds for entrapment risks, inspected medication storage areas and reviewed resident health care records. The log numbers for this follow up inspection are: O-002127-12 and O-002128-12.

The following Inspection Protocols were used during this inspection:

Falls Prevention

Medication

Safe and Secure Home

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON-RESPECT DES EXIGENCES



Ministry of Health and Long-Term Care

Ministère de la Santé et des Soins de longue durée

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

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

<p>Legend</p> <p>WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order</p>	<p>Legendé</p> <p>WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités</p>
<p>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.)</p> <p>The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.</p>	<p>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.</p> <p>Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.</p>

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 :



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

1. The licensee has failed to comply with O. Reg 79/10 s. 8 (1) whereby the storage of drugs is not in accordance with the policy requirements specified under O. Reg 79/10 s. 114 (2) and in addition, did not comply with the removal of expired drugs as required under O. Reg 79/10 s. 136 (1) (a).

A Resident Quality Inspection was conducted at the home in September 2012. As a result of the inspection, an order was issued in regards to the safe storage of medication and had a compliance date of October 29, 2012. A follow up inspection was conducted on November 2, 2012. Ongoing non compliance was identified in the areas of double locking of controlled substances and the removal of expired medications.

The Pharmacy service provider, Picton Clinic Pharmacy O/O/B Medical Pharmacies Group Inc., in addition to all registered nursing staff that administer medications have failed to comply with Pharmacy policy and Procedures, Section 6-Monitored Medications, Policy 6-4, "Storage of Monitored Medications". The policy states, "all monitored medications are safely stored to comply with legislative and home requirements.

Procedure (1) states, "store ALL monitored medications, separate from other medications, in a locked compartment of the cart."

Policy 6-1 defines monitored medications as all narcotics, controlled and controlled-liked drugs."

During an inspection of a medication cart, Oxazepam was found in Resident #4's strip pouch and Lorazepam vials for as needed use were found in both the first and second floor refrigerator. Both of these medications are controlled substances and are required to be stored in a separate, locked area within the locked medication cart or in a double-locked stationary cupboard in the locked area. The strip pouches and the medication storage fridges are not double locked storage areas.

According to RPN #S100, the pharmacy is still delivering all regular doses of benzodiazepines in strip pouches to all residents who have orders.

The licensee has failed to comply with the pharmacy policy and procedure, Section 5, Policy 5-1, "Expiry and Dating of Medications". Procedure (2) states, "remove any expired medications from stock and order replacement if necessary".

During an inspection of a medication cart, the following expired medications were found:

- Resident #6, an inhaler expired April 2012, Nitrospray expired June 2012,
- Resident #7, eye drops were labelled as "opened July 2012-discard after 6 weeks",
- Resident #9, eye drops were labelled as "opened July 10-discard after 4 weeks", an inhaler expired March 2012
- Resident #10, insulin expired September 2012.

In addition, a medication storage cupboard contained eye drops for Resident #11 that expired September 2012.

Additional Required Actions:

CO # - 001 will be served on the licensee. Refer to the "Order(s) of the Inspector".

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



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 prévue le Loi de 2007 les foyers de soins de longue

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. The licensee has failed to comply with O. Reg 79/10 s. 129 (1) (a) whereby drugs are not being stored in an area or a medication cart that is used exclusively for drugs and drug-related supplies.

During an inspection of a medication cart, the following non drug related items were found:

- eye glasses for Residents #5, #12 and #14,
- loose change in Resident #13's medication slot, and
- hearing aide batteries.

During an inspection of a medication storage cupboard, the following non drug related items were found:

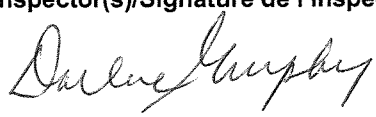
- a camera and
- hearing aide batteries.

**THE FOLLOWING NON-COMPLIANCE AND/OR ACTION(S)/ORDER(S) HAVE BEEN COMPLIED WITH/
 LES CAS DE NON-RESPECTS ET/OU LES ACTIONS ET/OU LES ORDRES SUIVANT SONT MAINTENANT
 CONFORME AUX EXIGENCES:**

CORRECTED NON-COMPLIANCE/ORDER(S) REDRESSEMENT EN CAS DE NON-RESPECT OU LES ORDERS:			
REQUIREMENT/ EXIGENCE	TYPE OF ACTION/ GENRE DE MESURE	INSPECTION # / NO DE L'INSPECTION	INSPECTOR ID #/ NO DE L'INSPECTEUR
LTCHA, 2007 S.O. 2007, c.8 s. 6.	CO #002	2012_041103_0038	103
O.Reg 79/10 r. 15.	CO #003	2012_041103_0038	103

Issued on this 7th day of November, 2012

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





**Ministry of Health and
Long-Term Care**

Order(s) of the Inspector
Pursuant to section 153 and/or
section 154 of the *Long-Term Care
Homes Act, 2007*, S.O. 2007, c.8

**Ministère de la Santé et
des Soins de longue durée**

Ordre(s) de l'inspecteur
Aux termes de l'article 153 et/ou
de l'article 154 de la *Loi de 2007 sur les foyers
de soins de longue durée*, L.O. 2007, chap. 8

**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**

Public Copy/Copie du public

Name of Inspector (ID #) / Nom de l'inspecteur (No) :	DARLENE MURPHY (103)
Inspection No. / No de l'inspection :	2012_179103_0010
Type of Inspection / Genre d'inspection:	Follow up
Date of Inspection / Date de l'inspection :	Nov 1, 5, 7, 2012
Licensee / Titulaire de permis :	COUNTY OF PRINCE EDWARD 603 Highway 49, R R 2, PICTON, ON, K0K-2T0
LTC Home / Foyer de SLD :	H.J. MCFARLAND MEMORIAL HOME R.R. #2, 603 HIGHWAY 49, HALLOWELL TOWNSHIP, PICTON, ON, K0K-2T0
Name of Administrator / Nom de l'administratrice ou de l'administrateur :	BETH PIPER

To COUNTY OF PRINCE EDWARD, you are hereby required to comply with the following order(s) by the date(s) set out below:



**Ministry of Health and
Long-Term Care**

Order(s) of the Inspector
Pursuant to section 153 and/or
section 154 of the *Long-Term Care
Homes Act, 2007*, S.O. 2007, c.8

**Ministère de la Santé et
des Soins de longue durée**

Ordre(s) de l'inspecteur
Aux termes de l'article 153 et/ou
de l'article 154 de la *Loi de 2007 sur les foyers
de soins de longue durée*, L.O. 2007, chap. 8

Order # /
Ordre no : 001 **Order Type /**
Genre d'ordre : Compliance Orders, s. 153. (1) (a)

Linked to Existing Order /
Lien vers ordre existant: 2012_041103_0038, CO #001

Pursuant to / Aux termes de :

O.Reg 79/10, 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).

Order / Ordre :

The licensee shall ensure the following:
-work with the Picton Clinic Pharmacy to develop a process to ensure all 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 and
-ensure all medications in the medication storage carts, emergency stock boxes, medication storage areas including medication storage fridges are reviewed and have all expired medications removed.

Grounds / Motifs :



**Ministry of Health and
Long-Term Care**

Order(s) of the Inspector
Pursuant to section 153 and/or
section 154 of the *Long-Term Care
Homes Act, 2007*, S.O. 2007, c.8

**Ministère de la Santé et
des Soins de longue durée**

Ordre(s) de l'inspecteur
Aux termes de l'article 153 et/ou
de l'article 154 de la *Loi de 2007 sur les foyers
de soins de longue durée*, L.O. 2007, chap. 8

1. The licensee has failed to comply with O. Reg 79/10 s. 8 (1) whereby the storage of drugs is not in accordance with the policy requirements specified under O. Reg 79/10 s. 114 (2) and in addition, did not comply with the removal of expired drugs as required under O. Reg 79/10 s. 136 (1) (a).

A Resident Quality Inspection was conducted at the home in September 2012. As a result of the inspection, an order was issued in regards to the safe storage of medication and had a compliance date of October 29, 2012. A follow up inspection was conducted on November 2, 2012. Ongoing non compliance was identified in the areas of double locking of controlled substances and the removal of expired medications.

The Pharmacy service provider, Picton Clinic Pharmacy O/O/B Medical Pharmacies Group Inc., in addition to all registered nursing staff that administer medications have failed to comply with Pharmacy policy and Procedures, Section 6-Monitored Medications, Policy 6-4, "Storage of Monitored Medications". The policy states, "all monitored medications are safely stored to comply with legislative and home requirements. Procedure (1) states, "store ALL monitored medications, separate from other medications, in a locked compartment of the cart." Policy 6-1 defines monitored medications as all narcotics, controlled and controlled-liked drugs."

During an inspection of a medication cart, Oxazepam was found in Resident #4's strip pouch and Lorazepam vials for as needed use were found in both the first and second floor medication storage refrigerators. Both of these medications are controlled substances and are required to be stored in a separate, locked area within the locked medication cart or in a double-locked stationary cupboard in the locked area. The strip pouches and the medication storage fridges are not double locked storage areas.

According to RPN #S100, the pharmacy is still delivering all regular doses of benzodiazepines in strip pouches to all residents who have orders.

The licensee has failed to comply with the pharmacy policy and procedure, Section 5, Policy 5-1, "Expiry and Dating of Medications". Procedure (2) states, "remove any expired medications from stock and order replacement if necessary".

During an inspection of a medication cart, the following expired medications were found:

- Resident #6, an inhaler expired April 2012, Nitrospray expired June 2012,
- Resident #7, eye drops were labelled as "opened July 2012-discard after 6 weeks",
- Resident #9, eye drops were labelled as "opened July 10-discard after 4 weeks", an inhaler expired March 2012
- Resident #10, insulin expired September 2012.

In addition, a medication storage cupboard contained eye drops for Resident #11 that expired September 2012.
(103)

**This order must be complied with by /
Vous devez vous conformer à cet ordre d'ici le :** Dec 07, 2012



**Ministry of Health and
Long-Term Care**

Order(s) of the Inspector
Pursuant to section 153 and/or
section 154 of the *Long-Term Care
Homes Act, 2007*, S.O. 2007, c.8

**Ministère de la Santé et
des Soins de longue durée**

Ordre(s) de l'inspecteur
Aux termes de l'article 153 et/ou
de l'article 154 de la *Loi de 2007 sur les foyers
de soins de longue durée*, L.O. 2007, chap. 8

REVIEW/APPEAL INFORMATION

TAKE NOTICE:

The Licensee has the right to request a review by the Director of this (these) Order(s) and to request that the Director stay this (these) Order(s) in accordance with section 163 of the Long-Term Care Homes Act, 2007.

The request for review by the Director must be made in writing and be served on the Director within 28 days from the day the order was served on the Licensee.

The written request for review must include,

- (a) the portions of the order in respect of which the review is requested;
- (b) any submissions that the Licensee wishes the Director to consider; and
- (c) an address for services for the Licensee.

The written request for review must be served personally, by registered mail or by fax upon:

Director
c/o Appeals Coordinator
Performance Improvement and Compliance Branch
Ministry of Health and Long-Term Care
55 St. Clair Avenue West
Suite 800, 8th Floor
Toronto, ON M4V 2Y2
Fax: 416-327-7603

When service is made by registered mail, it is deemed to be made on the fifth day after the day of mailing and when service is made by fax, it is deemed to be made on the first business day after the day the fax is sent. If the Licensee is not served with written notice of the Director's decision within 28 days of receipt of the Licensee's request for review, this(these) Order(s) is(are) deemed to be confirmed by the Director and the Licensee is deemed to have been served with a copy of that decision on the expiry of the 28 day period.

The Licensee has the right to appeal the Director's decision on a request for review of an Inspector's Order(s) to the Health Services Appeal and Review Board (HSARB) in accordance with section 164 of the Long-Term Care Homes Act, 2007. The HSARB is an independent tribunal not connected with the Ministry. They are established by legislation to review matters concerning health care services. If the Licensee decides to request a hearing, the Licensee must, within 28 days of being served with the notice of the Director's decision, give a written notice of appeal to both:

Health Services Appeal and Review Board and the

Director

Attention Registrar
151 Bloor Street West
9th Floor
Toronto, ON M5S 2T5

Director
c/o Appeals Coordinator
Performance Improvement and Compliance Branch
Ministry of Health and Long-Term Care
55 St. Clair Avenue West
Suite 800, 8th Floor
Toronto, ON M4V 2Y2
Fax: 416-327-7603

Upon receipt, the HSARB will acknowledge your notice of appeal and will provide instructions regarding the appeal process. The Licensee may learn more about the HSARB on the website www.hsarb.on.ca.



**Ministry of Health and
Long-Term Care**

Order(s) of the Inspector
Pursuant to section 153 and/or
section 154 of the *Long-Term Care
Homes Act, 2007, S.O. 2007, c.8*

**Ministère de la Santé et
des Soins de longue durée**

Ordre(s) de l'inspecteur
Aux termes de l'article 153 et/ou
de l'article 154 de la *Loi de 2007 sur les foyers
de soins de longue durée, L.O. 2007, chap. 8*

RENSEIGNEMENTS SUR LE RÉEXAMEN/L'APPEL

PRENDRE AVIS

En vertu de l'article 163 de la Loi de 2007 sur les foyers de soins de longue durée, le titulaire de permis peut demander au directeur de réexaminer l'ordre ou les ordres qu'il a donné et d'en suspendre l'exécution.

La demande de réexamen doit être présentée par écrit et est signifiée au directeur dans les 28 jours qui suivent la signification de l'ordre au titulaire de permis.

La demande de réexamen doit contenir ce qui suit :

- a) les parties de l'ordre qui font l'objet de la demande de réexamen;
- b) les observations que le titulaire de permis souhaite que le directeur examine;
- c) l'adresse du titulaire de permis aux fins de signification.

La demande écrite est signifiée en personne ou envoyée par courrier recommandé ou par télécopieur au :

Directeur
a/s Coordinateur des appels
Direction de l'amélioration de la performance et de la conformité
Ministère de la Santé et des Soins de longue durée
55, avenue St. Clair Ouest
8e étage, bureau 800
Toronto (Ontario) M4V 2Y2
Télécopieur : 416-327-7603

Les demandes envoyées par courrier recommandé sont réputées avoir été signifiées le cinquième jour suivant l'envoi et, en cas de transmission par télécopieur, la signification est réputée faite le jour ouvrable suivant l'envoi. Si le titulaire de permis ne reçoit pas d'avis écrit de la décision du directeur dans les 28 jours suivant la signification de la demande de réexamen, l'ordre ou les ordres sont réputés confirmés par le directeur. Dans ce cas, le titulaire de permis est réputé avoir reçu une copie de la décision avant l'expiration du délai de 28 jours.

En vertu de l'article 164 de la Loi de 2007 sur les foyers de soins de longue durée, le titulaire de permis a le droit d'interjeter appel, auprès de la Commission d'appel et de révision des services de santé, de la décision rendue par le directeur au sujet d'une demande de réexamen d'un ordre ou d'ordres donnés par un inspecteur. La Commission est un tribunal indépendant du ministère. Il a été établi en vertu de la loi et il a pour mandat de trancher des litiges concernant les services de santé. Le titulaire de permis qui décide de demander une audience doit, dans les 28 jours qui suivent celui où lui a été signifié l'avis de décision du directeur, faire parvenir un avis d'appel écrit aux deux endroits suivants :

À l'attention du registraire
Commission d'appel et de révision des services de santé
151, rue Bloor Ouest, 9e étage
Toronto (Ontario) M5S 2T5

Directeur
a/s Coordinateur des appels
Direction de l'amélioration de la performance et de la conformité
Ministère de la Santé et des Soins de longue durée
55, avenue St. Clair Ouest
8e étage, bureau 800
Toronto (Ontario) M4V 2Y2
Télécopieur : 416-327-7603

La Commission accusera réception des avis d'appel et transmettra des instructions sur la façon de procéder pour interjeter appel. Les titulaires de permis peuvent se renseigner sur la Commission d'appel et de révision des services de santé en consultant son site Web, au www.hsarb.on.ca.

Issued on this 7th day of November, 2012

**Signature of Inspector /
Signature de l'inspecteur :**

**Name of Inspector /
Nom de l'inspecteur :** DARLENE MURPHY

**Service Area Office /
Bureau régional de services :** Ottawa Service Area Office

