

Ministry of Long-Term Care

Long-Term Care Operations Division
Long-Term Care Inspections Branch

Central West District

609 Kumpf Drive, Suite 105
Waterloo, ON, N2V 1K8
Telephone: (888) 432-7901

Public Report

Report Issue Date: March 6, 2025

Inspection Number: 2025-1501-0002

Inspection Type:

Critical Incident

Licensee: Tri-County Mennonite Homes

Long Term Care Home and City: Nithview Home, New Hamburg

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): March 4-6, 2025

The following intake(s) were inspected:

- Intake: #00137629 related to a fall of a resident resulting in injury
- Intake: #00138395 related to a medication error resulting in a resident being taken to hospital

The following intake(s) were completed:

- Intake: #00139980 related to a fall of a resident resulting in injury

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

Medication Management
Infection Prevention and Control
Falls Prevention and Management

INSPECTION RESULTS

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COMPLIANCE ORDER CO #001 Administration of drugs

NC #001 Compliance Order pursuant to FLTCA, 2021, s. 154 (1) 2.

Non-compliance with: O. Reg. 246/22, s. 140 (2)

Administration of drugs

s. 140 (2) The licensee shall ensure that drugs are administered to residents in accordance with the directions for use specified by the prescriber. O. Reg. 246/22, s. 140 (2).

The inspector is ordering the licensee to comply with a Compliance Order [FLTCA, 2021, s. 155 (1) (a)]:

The licensee shall:

1. Provide all registered nursing staff with re-education of the home's Medication Management Policy, and any other relevant policies related to management and administration of the medication involved in the incident, including directions from the prescriber.
2. Provide all registered nursing staff with re-education of the home's Documentation Policy, with a focus on the home's expectation for how to document administration or holding a dose of the medication involved in the incident as per the prescriber's orders.
3. Maintain a written record of the education provided in parts 1 and 2, including but not limited to: date and time education provided, name of the person receiving education, name of the person providing education, and the education content reviewed. Ensure that upon Inspector request these records can be provided.
4. Conduct audits on the resident impacted by the incident, and one additional random resident prescribed the medication involved in the incident, to ensure that the steps taken for administration were followed as per the home's medication management and documentation policy as it relates this medication. Complete three audits per week, per resident, and ensure that all administration times are included in the audits for each week. Complete these audits for a period of at least

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four weeks from the report issuance date.

5. Maintain a written record of the completed audits in part 4, including but not limited to: date and time audits were conducted, resident name, staff name(s), and any corrective action taken in response to the audit. Ensure that upon Inspector request these audits can be provided.

Grounds

The licensee failed to ensure that drugs were administered to a resident in accordance with the directions for use specified by the prescriber.

On January 19 and January 24, 2025, a medication error occurred by two separate registered staff members when they did not follow the prescribers orders.

On January 27, 2025, the resident experienced a medical episode that required transfer to hospital. Review of the resident's Medication Administration Record (MAR) and the Medication Incident Report indicated that a registered staff member did not follow the prescribers orders.

Sources: Critical Incident Report, resident's MAR, progress notes, medication incident report, interviews with staff

This order must be complied with by April 16, 2025

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REVIEW/APPEAL INFORMATION

TAKE NOTICE The Licensee has the right to request a review by the Director of this (these) Order(s) and/or this Notice of Administrative Penalty (AMP) in accordance with section 169 of the Fixing Long-Term Care Act, 2021 (Act). The licensee can request that the Director stay this (these) Order(s) pending the review. If a licensee requests a review of an AMP, the requirement to pay is stayed until the disposition of the review.

Note: Under the Act, a re-inspection fee is not subject to a review by the Director or an appeal to the Health Services Appeal and Review Board (HSARB). 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 or AMP was served on the licensee.

The written request for review must include:

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

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

Director

c/o Appeals Coordinator
Long-Term Care Inspections Branch
Ministry of Long-Term Care
438 University Avenue, 8th floor
Toronto, ON, M7A 1N3
e-mail: MLTC.AppealsCoordinator@ontario.ca

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If service is made by:

- (a) registered mail, is deemed to be made on the fifth day after the day of mailing
- (b) email, is deemed to be made on the following day, if the document was served after 4 p.m.
- (c) commercial courier, is deemed to be made on the second business day after the commercial courier received the document

If the licensee is not served with a copy of the Director's decision within 28 days of receipt of the licensee's request for review, this(these) Order(s) is(are) and/or this AMP is deemed to be confirmed by the Director and, for the purposes of an appeal to HSARB, the Director is deemed to have served the licensee with a copy of that decision on the expiry of the 28-day period.

Pursuant to s. 170 of the Act, the licensee has the right to appeal any of the following to HSARB:

- (a) An order made by the Director under sections 155 to 159 of the Act.
- (b) An AMP issued by the Director under section 158 of the Act.
- (c) The Director's review decision, issued under section 169 of the Act, with respect to an inspector's compliance order (s. 155) or AMP (s. 158).

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 an appeal, the licensee must give a written notice of appeal within 28 days from the day the licensee was served with a copy of the order, AMP or Director's decision that is being appealed from. The appeal notice must be given to both HSARB and the Director:

Health Services Appeal and Review Board

Attention Registrar
151 Bloor Street West, 9th Floor

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Director

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