

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

**Rapport d'inspection en vertu de  
la Loi de 2007 sur les foyers de  
soins de longue durée**

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

**Division des opérations relatives aux  
soins de longue durée  
Inspection de soins de longue durée**

Ottawa Service Area Office  
347 Preston St Suite 420  
OTTAWA ON K1S 3J4  
Telephone: (613) 569-5602  
Facsimile: (613) 569-9670

Bureau régional de services d'Ottawa  
347 rue Preston bureau 420  
OTTAWA ON K1S 3J4  
Téléphone: (613) 569-5602  
Télécopieur: (613) 569-9670

**Public Copy/Copie du rapport public**

---

<b>Report Date(s) / Date(s) du Rapport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / No de registre</b>	<b>Type of Inspection / Genre d'inspection</b>
Apr 26, 2021	2021_583117_0006	024143-20, 024145-20	Follow up

---

**Licensee/Titulaire de permis**

United Counties of Prescott and Russell  
59 Court Street Box 304 L'original ON K0B 1K0

---

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

Residence Prescott et Russell  
1020 Cartier Boulevard Hawkesbury ON K6A 1W7

---

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

LYNE DUCHESNE (117)

---

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

---

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

**This inspection was conducted on the following date(s): February 25, 26, March 1, 2, 3, 4, 5, March 8, 9, 10, 15, 16, 17, 18, 19, 22 and 23, 2021**

**The purpose of this inspection was to conduct a Follow-Up Inspection to Compliance Orders Log # 024145-20 CO #002 O.Reg. 79/10 s. 114 (3) Medication management systems and Log #024143-20 CO #003 O.Reg. s.131 (3) Administration of Drugs , issued under inspection #2020\_583117\_0016 on November 27, 2020 with compliance due dates of December 31, 2020.**

**During the course of the inspection, the inspector(s) spoke with the Administrator, Director of Care (DOC), Associate Director of Care (ADOC), Nursing Coordinator, Registered Nurse (RN), several Registered Practical Nurses (RPNs), and the scheduling coordinator.**

**During the course of the inspection, the inspector reviewed several resident health care records, reviewed medication administration records and policy #340.09 “Administration orale de médicaments”, medication administration audits, registered nursing staff education, as well as registered nursing and PSW staffing schedules.**

**The following Inspection Protocols were used during this inspection:  
Infection Prevention and Control  
Medication**

**During the course of this inspection, Non-Compliances were issued.**

**1 WN(s)  
0 VPC(s)  
0 CO(s)  
0 DR(s)  
0 WAO(s)**

**The following previously issued Order(s) were found to be in compliance at the time of this inspection:**

**Les Ordre(s) suivants émis antérieurement ont été trouvés en conformité lors de cette inspection:**

<b>REQUIREMENT/ EXIGENCE</b>	<b>TYPE OF ACTION/ GENRE DE MESURE</b>	<b>INSPECTION # / DE L'INSPECTION</b>	<b>NO</b>	<b>INSPECTOR ID #/ NO DE L'INSPECTEUR</b>
O.Reg 79/10 s. 114. (3)	CO #002	2020_583117_0016		117
O.Reg 79/10 s. 131. (3)	CO #003	2020_583117_0016		117

**NON-COMPLIANCE / NON - RESPECT DES EXIGENCES**

<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>Légende</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 LTCHA, 2007 S.O. 2007, c.8, s. 101. Conditions of licence**

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

**Conditions of licence**

**s. 101. (3) It is a condition of every licence that the licensee shall comply with this Act, the Local Health System Integration Act, 2006, the Connecting Care Act, 2019, the regulations, and every directive issued, order made or agreement entered into under this Act and those Acts.**

**Findings/Faits saillants :**

1. The licensee failed to comply with the compliance due date for compliance order #002 issued on November 27, 2020.

A compliance order CO #002 was issued on November 27, 2020 under inspection report #2020\_583117\_0016 related to O.Reg. 79/10 s. 114 (3) Medication Management Systems with a compliance due date of December 31, 2020. There were three parts to the order. Part 1) related to staff re-education on the licensee's policies related to the administration of medication documentation and part 3) related to documenting, implementing and re-evaluating corrective actions related to any identified deficiencies are found to be in compliance.

The order issued identified under part 2) that the home was to conduct weekly audits for four (4) consecutive weeks to assess compliance with the home's policies and protocols in relation to the administration of medication documentation. The compliance due date for this to be completed was December 31, 2020. A review of the home's weekly medication administration documentation audits was completed. It was noted and confirmed with the home's Director of Care (DOC) that the audits were initiated on January 7, 2021 and was conducted for four (4) consecutive weeks. The DOC and Administrator reported that the auditing process was not initiated prior to this due to home's ongoing COVID-19 outbreak which was declared over on December 20, 2020 and other operational needs. The Administrator also reported that they had not contacted the Ministry of Long-Term Care to request an extension to the compliance due date.

As such, by not completing the audits prior to December 31, 2020, related to medication administration documentation processes, this poses a potential risk to the residents as compliance by registered nursing staff to medication administration policies and protocols was not being formally monitored as ordered. [s. 101. (3)]

**Issued on this 3rd day of May, 2021**

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

**Original report signed by the inspector.**