

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

Ottawa District
347 Preston Street, Suite 410
Ottawa, ON, K1S 3J4
Telephone: (877) 779-5559

Original Public Report

Report Issue Date: August 17, 2023	
Inspection Number: 2023-1014-0004	
Inspection Type: Follow up Critical Incident System	
Licensee: Arch Long Term Care LP by its General Partner, Arch Long Term Care MGP, by its partners, Arch Long Term Care GP Inc. and Arch Capital Management Corporation.	
Long Term Care Home and City: Perth Community Care Centre, Perth	
Lead Inspector Dee Colborne (000721)	Inspector Digital Signature
Additional Inspector(s) Cheryl Leach (719340)	

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): August 1, 2, 3,4, 8, 2023

The following intake(s) were inspected:

- Intake: #00089878 - Fall of a resident resulting in an injury.
- Intake: #00091138 - Follow-up #: 1 - O. Reg. 246/22 - s. 140 (2) related to medication administration
- Intake: #00091580 - Improper/incompetent treatment of a resident resulting in a medication error.

Previously Issued Compliance Order(s)

The following previously issued Compliance Order(s) were found to be in compliance:

Order #001 from Inspection #2023-1014-0003 related to O. Reg. 246/22, s. 140 (2) inspected by Dee

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Colborne (000721)

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

- Medication Management
- Infection Prevention and Control
- Staffing, Training and Care Standards
- Falls Prevention and Management

INSPECTION RESULTS

WRITTEN NOTIFICATION: Medication Management

NC #001 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 123 (3) (a)

The licensee has failed to ensure that written policies and protocols were implemented for medication verification of first and second checks for new medication orders for a resident.

Rationale and Summary

A resident received a new medication order for a medication upon admission. This medication order had a documented first check on a specific date by a Registered Practical Nurse and order confirmation in the Electronic Medication Administration Record (EMAR) on the following day, by a second Registered Nurse (RN). With the order confirmation by the RN, the medication parameters were not entered into the EMAR as per the admission orders resulting in the incorrect medication amounts being administered to a resident until the error was discovered two days later after the initial order by an RPN. The documented second check for this order was another two days later, by a second RPN.

It was confirmed by the Administrator that a resident received the incorrect medication amounts on two days as a result of the incorrect entry of the medication parameters by an RN . As per RPN #109 and Director of Care (DOC), the first check for new medication orders is to be completed during the shift when the order is received and the second check is to be completed by the next shift. RPN #109

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confirmed that the first and second checks were not completed as per policy for the medication order.

By not completing first and second checks as required on new medication orders, residents are placed at increased risk of harm from a medication incident.

Sources

Resident #002's physician orders, progress notes and Point Click Care (PCC) medication orders, Ordering Medication Policy 4-2-1 revised 9/19 and interviews with Administrator #106, DOC #107 and RPN #109.

[719340]



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**Inspection Report Under the
Fixing Long-Term Care Act, 2021**

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