Ontario

**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 sous la Loi de 2007 sur les foyers de soins de longue durée**


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

**Division des foyers de soins de longue durée**
**Inspection de soins de longue durée**

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**Public Copy/Copie du public**

| Report Date(s) / Date(s) du apport | Inspection No / No de l'inspection | Log # / No de registre | Type of Inspection / Genre d'inspection |
|---|---|---|---|
| Aug 15, 2017 | 2017_563670_0020 | 017646-17 | Resident Quality Inspection |

## Licensee/Titulaire de permis

REVERA LONG TERM CARE INC.
5015 Spectrum Way Suite 600 MISSISSAUGA ON 000 000

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

VILLAGE ON THE RIDGE
9 MYRTLE STREET P.O. BOX 1120 RIDGETOWN ON N0P 2C0

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

DEBRA CHURCHER (670), ALICIA MARLATT (590), CAROLEE MILLINER (144)

## Inspection Summary/Résumé de l'inspection

**The purpose of this inspection was to conduct a Resident Quality Inspection.**

**This inspection was conducted on the following date(s): August 8, 9, 10 and 11, 2017.**

**The following intakes were completed within the RQI:**
**Log# 006023-17 CIS# 2765-000004-17 related to responsive behaviors.**
**Log# 016511-16 CIS# 2765-000002-16 related to alleged staff to resident abuse.**
**Log# 029276-16 CIS# 2765-000007-16 related to a fall with injury.**
**Log# 008886-16 CIS# 2765-000013-15 related to alleged abuse and neglect.**

**During the course of the inspection, the inspector(s) spoke with 20+ Residents, the Family Council Representative, the Resident's Council Representative, the Administrator, the Administrative Assistant, two Registered Nurses, one Physiotherapist, two Registered Practical Nurses and nine Health Care Aides.**

**During the course of the inspection, the inspectors toured all resident home areas, medication rooms, observed medication administration and medication count, the provision of resident care, recreational activities, resident/staff interactions, infection prevention and control practices, reviewed resident clinical records, posting of required information and relevant policies and procedures.**

**The following Inspection Protocols were used during this inspection:**
**Continence Care and Bowel Management**
**Dignity, Choice and Privacy**
**Falls Prevention**
**Family Council**
**Infection Prevention and Control**
**Medication**
**Minimizing of Restraining**
**Nutrition and Hydration**
**Pain**
**Prevention of Abuse, Neglect and Retaliation**
**Residents' Council**
**Safe and Secure Home**
**Skin and Wound Care**

**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)**

| NON-COMPLIANCE / NON - RESPECT DES EXIGENCES | |
|---|---|
| Legend<br><br>WN – Written Notification<br>VPC – Voluntary Plan of Correction<br>DR – Director Referral<br>CO – Compliance Order<br>WAO – Work and Activity Order | Legendé<br><br>WN – Avis écrit<br>VPC – Plan de redressement volontaire<br>DR – Aiguillage au directeur<br>CO – Ordre de conformité<br>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).<br><br>The following constitutes written notification of non-compliance under paragraph 1 of section 152 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.<br><br>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. 131. Administration of drugs**

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

**s. 131. (2) The licensee shall ensure that drugs are administered to residents in accordance with the directions for use specified by the prescriber. O. Reg. 79/10, s. 131 (2).**

**Findings/Faits saillants :**

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

Review of the clinical record for a specific resident stated that a medication was to be administered twice daily. TAR (treatment administration record) was not signed for on five specific dates for the evening administration.

An RN (Registered Nurse) acknowledged that the medication was not signed for on the evening shift for five specific dates and stated that if it was not documented it was not administered.

The Administrator stated that if there was no signature for the administration it didn't happen.

The licensee has failed to ensure that drugs are administered to residents in accordance with the directions for use specified by the prescriber.

The severity of this non-compliance is minimum risk and the scope is isolated. The home has a history of one or more unrelated non-compliance in the last three years. [s. 131. (2)]

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**Issued on this 15th day of August, 2017**

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

**Original report signed by the inspector.**