

Ministry of Long-Term Care

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

London District

130 Dufferin Avenue, 4th Floor
London, ON, N6A 5R2
Telephone: (800) 663-3775

Public Report

Report Issue Date: December 20, 2024

Inspection Number: 2024-1165-0008

Inspection Type:

Proactive Compliance Inspection

Licensee: Vision '74 Inc.

Long Term Care Home and City: Vision Nursing Home, Sarnia

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): December 9, 10, 12, and 13, 2024.

The following intake(s) were inspected:

- Intake: #00110932- 2024 Proactive Compliance Inspection

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

Resident Care and Support Services
Skin and Wound Prevention and Management
Food, Nutrition and Hydration
Medication Management
Residents' and Family Councils
Infection Prevention and Control
Safe and Secure Home
Prevention of Abuse and Neglect
Quality Improvement
Staffing, Training and Care Standards
Residents' Rights and Choices
Pain Management

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INSPECTION RESULTS

Non-Compliance Remedied

Non-compliance was found during this inspection and was **remedied** by the licensee prior to the conclusion of the inspection. The inspector was satisfied that the non-compliance met the intent of section 154 (2) and requires no further action.

NC #001 remedied pursuant to FLTCA, 2021, s. 154 (2)

Non-compliance with: O. Reg. 246/22, s. 148 (2) 1.

Drug destruction and disposal

s. 148 (2) The drug destruction and disposal policy must also provide for the following:

1. That drugs that are to be destroyed and disposed of shall be stored safely and securely within the home, separate from drugs that are available for administration to a resident, until the destruction and disposal occurs.

The licensee failed to ensure that drugs that were to have been destroyed and disposed of were stored safely and securely within the home.

Rationale and Summary:

The inspector observed that the home's controlled substance drug storage for destruction. The bin was noted to have been very full and the inspector could fit their hand through the opening, potentially pulling out discarded controlled substances.

The DOC indicated that the bin was not usually that full and when it was, they would rearrange the discarded controlled substances so that they drop lower inside the bin and were not accessible.

Sources: Observation of the controlled substances destruction box and interview

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with the DOC.

Date Remedy Implemented: December 11, 2024

WRITTEN NOTIFICATION: Residents' Council

NC #002 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: FLTCA, 2021, s. 63 (3)

Powers of Residents' Council

s. 63 (3) If the Residents' Council has advised the licensee of concerns or recommendations under either paragraph 6 or 8 of subsection (1), the licensee shall, within 10 days of receiving the advice, respond to the Residents' Council in writing.

Introduction:

The licensee failed to ensure that concerns brought forward by the Residents' Council, regarding food temperatures, were responded to in writing within ten business days.

Rationale and Summary:

A member of Residents' Council stated that during several meetings they had brought forward concerns of the food not being hot enough. The Residents' Council meeting minutes identified three separate meetings where this concern was brought up by Council. During an interview with the Program Services Manager, they stated that the home did not have a written record of responding to the Residents' Council concern.

The residents' pleasurable dining experience was impacted when the food temperature was not hot enough.

Sources: Residents' Council meeting minutes as well as interviews with a Residents' Council representative and the Program Services Manager.