



**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**

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<b>Report Date(s) / Date(s) du rapport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / Registre no</b>	<b>Type of Inspection / Genre d'inspection</b>
Jul 28, 2017	2017_654605_0012	026988-16, 028321-16, 028537-16, 030849-16, 030975-16, 030978-16, 031439-16, 003755-17, 006835-17, 006921-17, 007367-17	Complaint

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**Licensee/Titulaire de permis**

WEST PARK HEALTHCARE CENTRE  
82 BUTTONWOOD AVENUE TORONTO ON M6M 2J5

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

WEST PARK LONG TERM CARE CENTRE  
82 BUTTONWOOD AVENUE TORONTO ON M6M 2J5

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

SARAH KENNEDY (605), DEREGE GEDA (645)

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

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**The purpose of this inspection was to conduct a Complaint inspection.**

**This inspection was conducted on the following date(s): June 20, 21, 22, 23, 24, 27, 28, 30 July 3, 4, 5, 6, 7, 10, 11, 12, 13, 14, 17, 18, 19, 20, and 21, 2017.**

**The following complaint inspections were conducted: 028321-16 (related to staffing agency), 028537-16 (related to medication administration), 030849-16 (related to allegation of abuse), 030975-16 (related to medication administration), 031439-16 (related to multiple care concerns), 003755-17 (related to drug administration and staff training), 006835-17 (related to prevention of abuse and neglect), 006921-17 (related to medication error and other multiple care concerns), 007367-17 (related to dining, medication management and other multiple care concerns). Concurrently the following CIS were completed within the complaint: intake #026988-16 (related to abuse and reporting matters), and 030978-16 (Prevention of abuse and neglect).**

**During the course of the inspection, the inspector(s) spoke with residents, Executive Director, Director of Care, Acting Director of Care, Assistant Director of Care, Personal Support Workers, Registered Nurses, Dietary Manager, Registered Dietitian, RAI Coordinators, and Dietary Aide.**

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

**Food Quality**

**Medication**

**Prevention of Abuse, Neglect and Retaliation**

**Responsive Behaviours**

**Sufficient Staffing**

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

**1 WN(s)**

**1 VPC(s)**

**0 CO(s)**

**0 DR(s)**

**0 WAO(s)**



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

Legend

WN – Written Notification  
VPC – Voluntary Plan of Correction  
DR – Director Referral  
CO – Compliance Order  
WAO – Work and Activity Order

Legendé

WN – Avis écrit  
VPC – Plan de redressement volontaire  
DR – Aiguillage au directeur  
CO – Ordre de conformité  
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).

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.

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. 129. Safe storage of drugs**



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

- s. 129. (1) Every licensee of a long-term care home shall ensure that,**
- (a) drugs are stored in an area or a medication cart,**
    - (i) that is used exclusively for drugs and drug-related supplies,**
    - (ii) that is secure and locked,**
    - (iii) that protects the drugs from heat, light, humidity or other environmental conditions in order to maintain efficacy, and**
    - (iv) that complies with manufacturer's instructions for the storage of the drugs;**
- and O. Reg. 79/10, s. 129 (1).**
- (b) controlled substances are stored in a separate, double-locked stationary cupboard in the locked area or stored in a separate locked area within the locked medication cart. O. Reg. 79/10, s. 129 (1).**

**Findings/Faits saillants :**

The licensee has failed to ensure that drugs were stored in an area or a medication cart that is secure and locked.

A complaint was received on an identified date via the Ministry of Health and Long-Term Care (MOHLTC) INFOLINE. A review of the complaint revealed resident #022 reported a nurse left another resident's medication on his/her bedside table.

An interview with the complainant revealed and confirmed that the medication was left in his/her room and did not belong to him/her.

An interview with the nurse revealed that on the identified date, he/she entered resident's #002 room to answer his/her call bell. The nurse confirmed that he/she left the medication on the bedside table and exited the room. He/she stated that it is the expectation of the home to store medications safely prior to providing care to another resident to avoid medication error.

An interview with the Director of Care (DOC) confirmed that the nurse should have stored the medication safely before starting to provide care to another resident. The nurse left the medication on resident #022's bedside table. It was unsafe and could pose risk to other residents. As a result the nurse was disciplined and training on safe storage of drugs were provided.



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***Additional Required Actions:***

***VPC - pursuant to the Long-Term Care Homes Act, 2007, S.O. 2007, c.8, s.152(2) the licensee is hereby requested to prepare a written plan of correction for achieving compliance to ensure that drugs were stored in an area or a medication cart that is secure and locked, to be implemented voluntarily.***

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Issued on this 28th day of July, 2017

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

**Original report signed by the inspector.**