

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 prévue le Loi de 2007 les foyers de soins de longue

Health System Accountability and Performance Division Performance Improvement and Compliance Branch Division de la responsabilisation et de la performance du système de santé Direction de l'amélioration de la performance et de la

conformité

London Service Area Office 291 King Street, 4th Floor LONDON, ON, N6B-1R8 Telephone: (519) 675-7680 Facsimile: (519) 675-7685 Bureau régional de services de London 291, rue King, 4iém étage LONDON, ON, N6B-1R8 Téléphone: (519) 675-7680 Télécopieur: (519) 675-7685

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Date(s) of inspection/Date(s) de l'inspection	Inspection No/ No de l'inspection	Type of Inspection/Genre d'inspection
Oct 17, 18, 24, 2012	2012_185112_0006	Critical Incident
Licensee/Titulaire de permis		
REGENCY LTC OPERATING LP ON 100 Milverton Drive, Suite 700, MISSI Long-Term Care Home/Foyer de so	SSAUGA, ON, L5R-4H1	
THE WESTMOUNT 200 David Bergey Drive, KITCHENER	R, ON, N2E-3Y4	
Name of Inspector(s)/Nom de l'insp	ecteur ou des inspecteurs	
CAROLE ALEXANDER (112)		
	nspection Summary/Résumé de l'inspe	ection

The purpose of this inspection was to conduct a Critical Incident inspection.

During the course of the inspection, the inspector(s) spoke with the Director of Clinical Services and a Registered Nurse.

During the course of the inspection, the inspector(s) reviewed the following: a critical incident, home's internal investigation, a resident clinical record, policies and procedures related to Medication Administration and Registered Staff training.

The following Inspection Protocols were used during this inspection: Medication

Training and Orientation

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON-RESPECT DES EXIGENCES



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Legend	Legendé
	WN – Avis écrit
VPC – Voluntary Plan of Correction DR – Director Referral	VPC Plan de redressement volontaire DR Alguillage au directeur
CO – Compliance Order WAO – Work and Activity Order	CO = Ordre de conformité WAO - Ordres : travaux et activités
LTCHA includes the requirements contained in the items listed in	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.
The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.	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 LTCHA, 2007 S.O. 2007, c.8, s. 76. Training Specifically failed to comply with the following subsections:

- s. 76. (2) Every licensee shall ensure that no person mentioned in subsection (1) performs their responsibilities before receiving training in the areas mentioned below:
- 1. The Residents' Bill of Rights.
- 2. The long-term care home's mission statement.
- 3. The long-term care home's policy to promote zero tolerance of abuse and neglect of residents.
- 4. The duty under section 24 to make mandatory reports.
- 5. The protections afforded by section 26.
- 6. The long-term care home's policy to minimize the restraining of residents.
- 7. Fire prevention and safety.
- 8. Emergency and evacuation procedures.
- 9. Infection prevention and control.
- 10. All Acts, regulations, policies of the Ministry and similar documents, including policies of the licensee, that are relevant to the person's responsibilities.
- 11. Any other areas provided for in the regulations. 2007, c. 8, s. 76. (2).

Findings/Faits saillants:

1. The Licensee did not ensure that a Registered Practical Nurse received training relating to policies and procedures relevant to the responsibilities of medication administration prior to performing those tasks. [LTCHA, 2007 S.O. 2007,c.8,s.76 (2)10.]

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 ensuring staff receive training specific to their responsibilities by Nov. 18, 2012,, to be implemented voluntarily.

WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 8. Policies, etc., to be followed, and records Specifically failed to comply with the following subsections:

- s. 8. (1) Where the Act or this Regulation requires the licensee of a long-term care home to have, institute or otherwise put in place any plan, policy, protocol, procedure, strategy or system, the licensee is required to ensure that the plan, policy, protocol, procedure, strategy or system,
- (a) is in compliance with and is implemented in accordance with applicable requirements under the Act; and
- (b) is complied with. O. Reg. 79/10, s. 8 (1).



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Findings/Faits saillants:

A Registered Practical Nurse administered a medication to a resident, which was prescribed for another resident. The following home's Medication Administration policies were not complied with:

- 1) "Medication Administration LTCE-CNS-F-1"
- 2) "Emergency Drug Box LTCE-CNS-F-4"
- 3) "Medication Pass Procedure" "04-02-20"
- [O.Reg 79/10,s.8.(1)(b)]

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 with ensuring Medication administration policies and procedures are followed by November 18, 2012,, to be implemented voluntarily.

Issued on this 24th day of October, 2012

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