



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
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Table with 3 columns: Date(s) of inspection, Inspection No, Type of Inspection. Row 1: Aug 11, 16, 24, 2011; 2011\_043157\_0018; Complaint Log# 000438-11

Licensee/Titulaire de permis
REGENCY LTC OPERATING LP ON BEHALF OF REGENCY
100 Milverton Drive, Suite 700, MISSISSAUGA, ON, L5R-4H1

Long-Term Care Home/Foyer de soins de longue durée
THE WYNFIELD
451 Woodmount Drive, OSHAWA, ON, L1G-8E3

Name of Inspector(s)/Nom de l'inspecteur ou des inspecteurs
PATRICIA POWERS (157)

Inspection Summary/Résumé de l'inspection

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

During the course of the inspection, the inspector(s) spoke with the home's Administrator, the Director of Care, and the Nurse Manager.

During the course of the inspection, the inspector(s) reviewed the clinical health record for an identified resident, the home's policies related to medication administration, correspondence with the family of an identified resident.

The following Inspection Protocols were used in part or in whole during this inspection:

Medication

Reporting and Complaints

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON-RESPECT DES EXIGENCES

Table with 2 columns: Definitions, Définitions. Row 1: WN - Written Notification, Avis écrit; VPC - Voluntary Plan of Correction, Plan de redressement volontaire; DR - Director Referral, Aiguillage au directeur; CO - Compliance Order, Ordre de conformité; WAO - Work and Activity Order, 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. 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).**

**Findings/Faits sayants :**

1. Under O.Reg 79/10, s. 114(2), the home's written policies and protocols for Medication Pass - Digital MAR/TAR Sheets (Index#: 04-02-11, Updated: June 25, 2007) requires the following:

"When ever a medication is administered, the nurse or care provider must initial in the box opposite that medication for the date and the time given with the digital Pen"

"If a medication cannot be administered, the appropriate chart note must be used (e.g. 2=Drug Refused, 3=Absent from Home, etc.). Designated codes are printed at the bottom of each digiMAR/digiTar sheet"

The home's policy was not complied with in that the Medication Administration Record (MAR) for an identified resident did not indicate that prescribed medications were given or refused on February 21, 2011.

**WN #2: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 6. Plan of care**  
**Specifically failed to comply with the following subsections:**

**s. 6. (9) The licensee shall ensure that the following are documented:**

- 1. The provision of the care set out in the plan of care.**
- 2. The outcomes of the care set out in the plan of care.**
- 3. The effectiveness of the plan of care. 2007, c. 8, s. 6 (9).**

**Findings/Faits sayants :**

1. Documentation on February 21, 2011 for an identified resident does not indicate that the resident received the care set out in the plan of care.

Issued on this 26th day of August, 2011



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Rapport d'inspection  
prévus le Loi de 2007 les  
foyers de soins de longue

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

*Patricia A. Prewis*