Ontario

Inspection Report Under the
Fixing Long-Term Care Act, 2021

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: January 31, 2025

Inspection Number: 2025-1609-0001

Inspection Type:
Critical Incident

Licensee: County of Oxford

Long Term Care Home and City: Woodingford Lodge - Ingersoll, Ingersoll

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): January 29 - 31, 2025

The following intake(s) were inspected:

- Intake: #00136564/ Critical Incident (CI) #M614-000002-25 related to a medical event

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

Medication Management
Infection Prevention and Control

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INSPECTION RESULTS

WRITTEN NOTIFICATION: Documentation

NC #001 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.
Non-compliance with: O. Reg. 246/22, s. 34 (2)
General requirements
s. 34 (2) The licensee shall ensure that any actions taken with respect to a resident under a program, including assessments, reassessments, interventions and the resident's responses to interventions are documented.

The licensee failed to ensure that a staff member documented any assessments, interventions, and the resident's response to treatment for a medical event.

The resident's electronic records did not indicate practitioner consultation or prescribed treatment. According to the home's policy, staff must document a progress note for any medication incident.

Sources: review of resident's medication administration record and progress notes, LTCH policy "Medication Management Program", and interviews with staff.

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WRITTEN NOTIFICATION: Administration Of Drugs

NC #002 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.
Non-compliance with: O. Reg. 246/22, s. 140 (2)
Administration of drugs
s. 140 (2) The licensee shall ensure that drugs are administered to residents in accordance with the directions for use specified by the prescriber.

The licensee failed to ensure that a staff member administered medications according to the prescriber's specified directions. The staff member administered the incorrect medication during a medical event, which delayed the effective treatment as ordered by the practitioner.

Sources: Review of medication administration record, resident progress notes, and interviews with staff.