

# 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

### **Ottawa District**

347 Preston Street, Suite 420 Ottawa, ON, K1S 3J4 Telephone: (877) 779-5559

# **Original Public Report**

Report Issue Date: March 30, 2023
Inspection Number: 2023-1417-0002
mspection Number: 2023 1417 0002

## Inspection Type:

Complaint Critical Incident System

Licensee: Royal Ottawa Health Care Group

Long Term Care Home and City: Royal Ottawa Place, Ottawa

Lead Inspector Megan MacPhail (551) Inspector Digital Signature

Additional Inspector(s)

## **INSPECTION SUMMARY**

The inspection occurred on the following date(s): February 6, 8, 9, 14, 15, 16 and 17, 2023, on-site, and March 3, 2023, off-site.

The following intake(s) were inspected:

- Intake: #00001117 was related to concerns about the care of a resident.
- Intake: #00001194 was related to an applicant's admission to be home not being approved.
- Intake: #00017082 2933-000010-22 was related to the unexpected death of a resident.

The following Inspection Protocols were used during this inspection:

Resident Care and Support Services Continence Care Medication Management Infection Prevention and Control Palliative Care Admission, Absences and Discharge



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# **INSPECTION RESULTS**

## WRITTEN NOTIFICATION: Medication Management System

NC #001 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 79/10, s. 114 (3) (a)

The licensee failed to comply with the system to ensure that a specific medication was used in accordance with the current Health Canada regulations.

### Introduction

In accordance with O. Reg 79/10, s. 8 (1) (b), the licensee is required to ensure that written policies and protocols, for the medication management system, are developed, implemented, evaluated and updated in accordance with evidence-based practices and, if there are none, in accordance with prevailing practices, and they must be complied with.

Specifically staff did not comply with a medication therapy policy which was included in the licensee's medication management system.

A specific medication therapy policy stated:

### 2 POLICY STATEMENT:

The Royal Ottawa Health Care Group (ROHCG) will ensure that the medication is used in strict accordance with the current Health Canada regulations. As such, physicians, patients, pharmacists, laboratories and local case coordinators must be registered with, and adhere to, the appropriate monitoring system and dispensing protocol for the medication. This policy is developed in accordance with Health Canada regulations, specifically in regards to the risk for a change in blood chemistry, and Provincial Legislation and regulations regarding the medication.

### 6.0 PROCEDURE:

### 6.3 Mandatory Blood Monitoring:

6.3.1 Health Canada mandates specific blood monitoring Complete Blood Count (CBC) based on patient blood results while on the medication therapy.

6.3.3 Medication can be dispensed by the pharmacy if the current period blood work has been performed, as indicated on the manufacturer's Website or by other means of verification (i.e. blood diary, lab receipt or faxes from monitoring agency).

Appendix 1- Blood Monitoring Schedule

Blood monitoring:

Every week for the first 26 weeks

Every 2 weeks for the subsequent 26 weeks\*



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• Every 4 weeks thereafter\*°

6.4 Interdisciplinary Roles and Responsibilities:

6.4.1 The ROHCG Attending

Physician is expected to:

• Prescribe the medication as per Health Canada's guidelines and prescribed schedule only when the hematological status and the manufacturer's registry history of the patient has been verified.

Rationale and Summary

A resident was registered with a brand specific medication registry.

As part of the resident's admission blood work, a CBC was completed.

After four (4) weeks, a CBC was not completed, and the medication was dispensed by the pharmacy and administered to the resident without the bloodwork.

Several weeks later (more than 4), blood work was completed.

After four (4) weeks, a CBC was not completed, and the medication was dispensed by the pharmacy and administered to the resident without the bloodwork.

Several weeks later (more than 4), a CBC was completed, and the resident was put on a schedule for blood work monitoring every 4 weeks.

An RN stated that when the resident was admitted, a schedule for bloodwork monitoring every 4 weeks should have been implemented, as is required for all residents on the medication, and that such a schedule was not implemented until several months after their admission.

Not following the mandatory blood work schedule for the medication potentially increased the resident's risk of a change in blood chemistry.

Sources: A medication therapy policy, a resident's health care record and interview with an RN.

[551]



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