

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

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

Sudbury Service Area Office 159 Cedar Street, Suite 403 SUDBURY, ON, P3E-6A5 Telephone: (705) 564-3130 Facsimile: (705) 564-3133

Bureau régional de services de Sudbury 159, rue Cedar, Bureau 403 SUDBURY, ON, P3E-6A5 Téléphone: (705) 564-3130 Télécopieur: (705) 564-3133

Public Copy/Copie du public

Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection		Type of Inspection / Genre d'inspection
Nov 8, 2013	2013_246196_0014	S-000866-12	Follow up
Licensee/Titulaire de	•		

208 Cartier Road, TERRACE BAY, ON, P0T-2W0

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

WILKES TERRACE

208 Cartier Road, TERRACE BAY, ON, P0T-2W0

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

LAUREN TENHUNEN (196)

Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct a Follow up inspection.

This inspection was conducted on the following date(s): October 16, 2013

During the course of the inspection, the inspector(s) spoke with Director of Nursing (DON), Registered Practical Nurses (RPN), Personal Support Workers (PSW), Housekeeping staff, Residents

During the course of the inspection, the inspector(s) conducted a tour of all resident care areas, observed staff to resident interactions, reviewed the health care records of various residents

The following Inspection Protocols were used during this inspection: Minimizing of Restraining



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

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES				
Legend	Legendé			
WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order	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.)	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 O.Reg 79/10, s. 9. Doors in a home

Specifically failed to comply with the following:

- s. 9. (1) Every licensee of a long-term care home shall ensure that the following rules are complied with:
- 2. All doors leading to non-residential areas must be equipped with locks to restrict unsupervised access to those areas by residents, and those doors must be kept closed and locked when they are not being supervised by staff. O. Reg. 79/10, s. 9; O. Reg. 363/11, s. 1 (1, 2).



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

Findings/Faits saillants:

1. During the tour of resident home areas on October 16, 2013, the doors to the housekeeping room and a staff office, although equipped with locks, were found unlocked and unsupervised by staff. These rooms are non-residential areas in which residents would not customarily receive care and/or services.

The licensee failed to ensure that the following rules are complied with: 2. All doors leading to non-residential areas must be equipped with locks to restrict unsupervised access to those areas by residents, and those doors must be kept closed and locked when they are not being supervised by staff. [s. 9. (1) 2.]

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 that ensures that all doors leading to non-residential areas are equipped with locks to restrict unsupervised access to those areas by residents, and those doors are kept closed and locked when they are not being supervised by staff, to be implemented voluntarily.

WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 91. Every licensee of a long-term care home shall ensure that all hazardous substances at the home are labelled properly and are kept inaccessible to residents at all times. O. Reg. 79/10, s. 91.

Findings/Faits saillants:



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

1. On October 16, 2013, during a tour of the resident care areas, the door to the housekeeping room was unlocked and accessible to residents. Housekeeping staff member reported that the door locks if you pull tight on the door handle and staff member #101 stated the door to the housekeeping room doesn't lock on its own and needs to be pulled tight to close. Inside the room there was a bottle of "A-3 disinfectant", a large bottle of "Allbrite" cleaner, and a container of "bleach". The Therapy room door was also unlocked and had a bottle of "Betco" disinfectant on the counter top.

The licensee failed to ensure that all hazardous substances at the home are labelled properly and are kept inaccessible to residents at all times. [s. 91.]

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 that ensures all hazardous substances at the home are kept inaccessible to residents at all times, to be implemented voluntarily.

WN #3: The Licensee has failed to comply with O.Reg 79/10, s. 130. Security of drug supply

Every licensee of a long-term care home shall ensure that steps are taken to ensure the security of the drug supply, including the following:

- 1. All areas where drugs are stored shall be kept locked at all times, when not in use.
- 2. Access to these areas shall be restricted to,
- i. persons who may dispense, prescribe or administer drugs in the home, and ii. the Administrator.
- 3. A monthly audit shall be undertaken of the daily count sheets of controlled substances to determine if there are any discrepancies and that immediate action is taken if any discrepancies are discovered. O. Reg. 79/10, s. 130.

Findings/Faits saillants:



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

1. On October 16, 2013 at 1250hrs, an unlocked medication cart was observed behind the nursing desk, accessible to residents, without staff present. In addition, the door to the medication room had the keys in the lock apparatus. At 1420hrs, the keys were once again observed in the lock apparatus of the medication room door and no staff members were in the vicinity.

The licensee failed to ensure that steps are taken to ensure the security of the drug supply, including the following: 1. All areas where drugs are stored shall be kept locked at all times, when not in use. [s. 130. 1.]

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 that ensures all areas where drugs are stored are kept locked at all times, when not in use, to be implemented voluntarily.

THE FOLLOWING NON-COMPLIANCE AND/OR ACTION(S)/ORDER(S) HAVE BEEN COMPLIED WITH/

LES CAS DE NON-RESPECTS ET/OU LES ACTIONS ET/OU LES ORDRES SUIVANT SONT MAINTENANT CONFORME AUX EXIGENCES:

COMPLIED NON-COMPLIANCE/ORDER(S) REDRESSEMENT EN CAS DE NON-RESPECT OU LES ORDERS:					
REQUIREMENT/ EXIGENCE	TYPE OF ACTION/ GENRE DE MESURE	INSPECTION # / NO DE L'INSPECTION	INSPECTOR ID #/ NO DE L'INSPECTEUR		
O.Reg 79/10 s. 112.	CO #002	2012_104196_0013	196		



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

Issued on this 8th day of November, 2013

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

Lauren Lenhunen #196.