

Ministry of Long-Term Care

Long-Term Care Operations Division
Long-Term Care Inspections Branch

Central East District

33 King Street West, 4th Floor
Oshawa, ON, L1H 1A1
Telephone: (844) 231-5702

Original Public Report

Report Issue Date: February 5, 2024

Inspection Number: 2024-1629-0001

Inspection Type:

Proactive Compliance Inspection

Licensee: Glen Hill Terrace Christian Homes Inc.

Long Term Care Home and City: Glen Hill Terrace, Whitby

Lead Inspector

Julie Dunn (706026)

Inspector Digital Signature

Additional Inspector(s)

Sheri Williams (741748)

INSPECTION SUMMARY

The inspection occurred January 8-12 and 15-17, 2024, with January 8, 10-12, and 15-17, 2024 conducted onsite and January 9, 2024 conducted offsite.

The following intake(s) were inspected:

- Intake: #00105641 - Proactive Compliance Inspection (PCI) Inspection

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

- Skin and Wound Prevention and Management
- Resident Care and Support Services
- Residents' and Family Councils
- Food, Nutrition and Hydration
- Medication Management
- Infection Prevention and Control
- Prevention of Abuse and Neglect
- Quality Improvement
- Residents' Rights and Choices
- Pain Management
- Falls Prevention and Management

INSPECTION RESULTS

WRITTEN NOTIFICATION: QUARTERLY EVALUATION

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

Non-compliance with: O. Reg. 246/22, s. 124 (1)

Quarterly evaluation

s. 124 (1) Every licensee of a long-term care home shall ensure that an interdisciplinary team, which must include the Medical Director, the Administrator, the Director of Nursing and Personal Care and the pharmacy service provider, meets at least quarterly to evaluate the effectiveness of the medication management system in the home and to recommend any changes necessary to improve the system. O. Reg. 246/22, s. 124 (1).

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The licensee failed to ensure that an interdisciplinary team including the Medical Director and the Director of Nursing and Personal Care met at least quarterly to evaluate the effectiveness of the medication management system in the home.

Rationale and Summary

During the Proactive Compliance Inspection (PCI), the long-term care home was asked to provide a copy of their quarterly medication management evaluations.

The Professional Advisory Committee (PAC) meeting minutes documented the quarterly medication management evaluations. The PAC minutes for two meetings in 2023 listed the Medical Director as not attending. The PAC minutes also listed that the Director of Care (DOC) did not attend one of the 2023 meetings.

The DOC and Administrator acknowledged the home's expectation was for the Medical Director and DOC to attend the PAC meetings for the quarterly evaluation of the medication management program.

Failing to ensure that a quarterly evaluation of the effectiveness of the medication management program included the Medical Director and the DOC caused risk of harm that the medication management system did not identify improvements for safe administration of medication.

Sources: Professional Advisory Committee meeting minutes, interviews with DOC and Administrator.

[741748]

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WRITTEN NOTIFICATION: ANNUAL EVALUATION

NC #002 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 125 (1)

Annual evaluation

s. 125 (1) Every licensee of a long-term care home shall ensure that an interdisciplinary team, which must include the Medical Director, the Administrator, the Director of Nursing and Personal Care, the pharmacy service provider and a Registered Dietitian who is a member of the staff of the home, meets annually to evaluate the effectiveness of the medication management system in the home and to recommend any changes necessary to improve the system.

The licensee has failed to ensure that an interdisciplinary team, including a Registered Dietitian who was a member of the staff of the home, met annually to evaluate the effectiveness of the medication management system.

Rationale and Summary

The Professional Advisory Committee (PAC) meeting minutes indicated that a Registered Dietitian did not attend the annual evaluation of the medication management system in 2023.

The DOC and Administrator acknowledged that they were aware that an annual evaluation of the medication management program was required to be interdisciplinary and that the home's Registered Dietician did not attend.

Failing to include the Registered Dietician in the annual evaluation of the effectiveness of the home's medication management system did not provide an interdisciplinary review with all members of the home's interdisciplinary team.

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Sources: Professional Advisory Committee meeting minutes, Terms of Reference for Professional Advisory Committee, and interviews with the DOC and Administrator.
[741748]

WRITTEN NOTIFICATION: Continuous quality improvement committee

NC #003 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 166 (2) 5.

Continuous quality improvement committee

s. 166 (2) The continuous quality improvement committee shall be composed of at least the following persons:

5. The home's registered dietitian.

The licensee failed to ensure that the Registered Dietitian was included in the LTC Home's Continuous Quality Improvement Committee.

Rationale and Summary

During the Proactive Compliance Inspection (PCI), the long-term care home was asked to provide a copy of their Continuous Quality Improvement Committee meeting minutes.

The LTC Home's Continuous Quality Improvement Committee meeting minutes that were provided did not include a Registered Dietitian (RD) in the meeting attendees, and did not list the RD in the regrets.

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The Director of Quality and Innovation acknowledged that the RD should be included in the Continuous Quality Improvement Committee and indicated that they forgot to add the RD to the meeting invitation.

The Administrator confirmed that the Director of Quality and Innovation had made an administrative error and had forgotten to include the RD in the Continuous Quality Improvement Committee meeting invitations.

Failing to include the Registered Dietitian in the home's Continuous Quality Improvement Committee meetings risks lacking the RD's professional input and feedback in the home's continuous quality improvement plan and actions.

Sources: Interviews with Administrator and Director of Quality and Innovation, LTC home's Continuous Quality Improvement Committee Meeting minutes.
[706026]