

Ministry of Long-Term Care

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

Toronto District

5700 Yonge Street, 5th Floor
Toronto, ON, M2M 4K5
Telephone: (866) 311-8002

Original Public Report

Report Issue Date: May 24, 2024

Inspection Number: 2024-1709-0002

Inspection Type:

Complaint
Critical Incident (CI)
Follow up

Licensee: Humber Meadows Long-Term Care Home

Long Term Care Home and City: Humber Meadows Long-Term Care Home,
Toronto

Lead Inspector

Manish Patel (740841)

Inspector Digital Signature

Additional Inspector(s)

Joy Ieraci (665)

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): May 16, 17, and 21 - 23, 2024.

The following intakes were inspected:

- Intake: #00109363 / Follow-Up Compliance Order #001 from Inspection #2024-1709-0001, related to administration of drugs;
- Intake: #00114178 / Complaint, related to medication management, continence care, resident care and services, and responsive behaviours;
- Intake: #00111205 / CI #3065-000021-24, related to medication management;

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- Intake: #00113408 / CI #3065-000025-24, related to injury of unknown cause and;
- Intake: #00111089 / CI #3065-000020-24, related to a fall with injury.

The following intakes were completed in the inspection:

- Intake: #00109684 / CI #3065-000015-24, Intake #00110225 / CI #3065-000017-24 and Intake #00114446 / CI #3065-000027-24, were all related to falls with injury.

Previously Issued Compliance Order(s)

The following previously issued Compliance Order(s) were found to be in compliance:

Order #001 from Inspection #2024-1709-0001 related to O. Reg. 246/22, s. 140 (2) inspected by Joy Ieraci (665)

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

Contenance Care
Resident Care and Support Services
Medication Management
Infection Prevention and Control
Responsive Behaviours
Falls Prevention and Management

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INSPECTION RESULTS

WRITTEN NOTIFICATION: RESIDENTS' DRUG REGIME

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

Non-compliance with: O. Reg. 246/22, s. 146 (c)

Residents' drug regimes

s. 146. Every licensee of a long-term care home shall ensure that,

(c) there is, at least quarterly, a documented reassessment of each resident's drug regime. O. Reg. 246/22, s. 146; O. Reg. 66/23, s. 29.

The licensee has failed to ensure that there was a quarterly documented reassessment of two residents' drug regime.

1) Rationale and Summary

The Ministry of Long-Term Care (MLTC) received a complaint that medication reviews were not completed for a resident. One quarterly medication reassessment was completed and three quarterly reassessments were not completed for the resident since admission.

The Director of Care (DOC) acknowledged that the quarterly medication reassessments were not completed as required.

Failure to conduct quarterly medication reviews may have had an impact on the management of the resident's drug regime.

Sources: Review of Medication Review Report, and resident's Physician Orders; and interviews with the DOC. [665]

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2) Rationale and Summary

Another resident required two quarterly medication reassessments, however only one was completed since admission.

The DOC acknowledged that the quarterly medication reassessment was not completed as required.

Failure to conduct quarterly medication reviews may have had an impact on the management of the resident's drug regime.

Sources: Review of Medication Review Report, and resident's Physician Orders; and interviews with the DOC. [665]