

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

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## Public Copy/Copie du public

Report Date(s) /	Inspection No /	Log # /	Type of Inspection / Genre d'inspection
Date(s) du Rapport	No de l'inspection	Registre no	
Dec 17, 2012	2012_049143_0055	O-002200- 12	Complaint

## Licensee/Titulaire de permis

COMMUNITY LIFECARE INC

1955 Valley Farm Road, 3rd Floor, PICKERING, ON, L1V-1X6

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

COMMUNITY NURSING HOME (PORT PERRY) 15941 Simcoe Street, Port Perry, ON, L9L-1N5

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

PAUL MILLER (143)

Inspection Summary/Résumé de l'inspection



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The purpose of this inspection was to conduct a Complaint inspection.

This inspection was conducted on the following date(s): December 11th, 12th and 13th, 2012

Four complaint inspections were completed: Log #O-002280-12, Log #O-001958-12, Log #O-001959-12 and Log #O-002200-12.

During the course of the inspection, the inspector(s) spoke with The Administrator, the Acting Director of Nursing, Registered Nurses, Registered Practical Nurses, Personal Support Workers, the Environmental Manager, the Dietary Manager, the Office Manager, the pharmacy Nurse Consultant, activity staff, residents and family members.

During the course of the inspection, the inspector(s) Reviewed resident health care records inclusive of progress notes, assessments, physician orders, care plans, medication administration records, admission policies and procedures, tested resident call bells and observed meal service.

The following Inspection Protocols were used during this inspection:
Admission Process
Dignity, Choice and Privacy
Food Quality
Medication
Nutrition and Hydration

Pain
Personal Support Services
Responsive Behaviours
Skin and Wound Care

Findings of Non-Compliance were found during this inspection.



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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. 71. Menu planning

Specifically failed to comply with the following:

s. 71. (3) The licensee shall ensure that each resident is offered a minimum of, (c) a snack in the afternoon and evening. O. Reg. 79/10, s. 71 (3).

Findings/Faits saillants :



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1. The following finding is related to log #O-002280-12:

On December 12, 2012 at 1415 hours the Stewart Lane snack cart was prepared for delivering for thirty seven residents. It was noted to contain eleven cookies, one sandwich, a small bowl of apple sauce, coffee, tea, milk, four nutritional supplements and juice. Two Personal Support Workers were interviewed who indicated the amount of snacks prepared was not enough for all the residents. These two staff were not aware that residents who attend programs off the unit are no longer offered snacks and drinks. Both staff indicated unless a resident asked for a snack and snack cart was put away then an offer of a snack would not be made. A specific resident was off unit on December 11, 2012 for an afternoon program and was not offered a snack upon returning to the unit.

The licensee has failed to comply with ON/Regulation 79/10 sec 71.(3)(c) by not offering all residents a snack in the afternoon. [s. 71. (3) (c)]

WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 129. Safe storage of drugs

Specifically failed to comply with the following:

- s. 129. (1) Every licensee of a long-term care home shall ensure that,
- (a) drugs are stored in an area or a medication cart,
- (i) that is used exclusively for drugs and drug-related supplies,
- (ii) that is secure and locked,
- (iii) that protects the drugs from heat, light, humidity or other environmental conditions in order to maintain efficacy, and
- (iv) that complies with manufacturer's instructions for the storage of the drugs; and O. Reg. 79/10, s. 129 (1).
- (b) controlled substances are stored in a separate, double-locked stationary cupboard in the locked area or stored in a separate locked area within the locked medication cart. O. Reg. 79/10, s. 129 (1).

Findings/Faits saillants:



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1. The following finding is related to log #O-002280-12:

It was observed on December 12, 2012 that three residents had controlled substances stored in their individual medication bins on the medication cart.

The licensee has failed to comply with ON/Regulation 79/10 by not ensuring that controlled substances are stored in a separate, double-locked stationary cupboard in a locked area or stored in a separate locked area within the locked medication cart. [s. 129. (1) (b)]

Issued on this 17th day of December, 2012

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