

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

Ottawa District
347 Preston Street, Suite 410
Ottawa, ON, K1S 3J4
Telephone: (877) 779-5559

Original Public Report

Report Issue Date: July 19, 2024
Inspection Number: 2024-1551-0003
Inspection Type: Follow up
Licensee: Corporation of the City of Cornwall
Long Term Care Home and City: Glen-Stor-Dun Lodge, Cornwall

INSPECTION SUMMARY

This inspection report is being issued as part of the amendment related to Licensee Report 2024-1551-0001.

The inspection occurred onsite on the following date(s): February 22-23, 2024, Feb 26-29, 2024, March 1, 2024, March 4-8, 2024, and March 11-15, 2024.

The following intake(s) were inspected:

- Intake: #00100658 - Follow-up #: 1 - O. Reg. 246/22 - s. 55 (2) (b) (ii)
- Intake: #00100659 - Follow-up #: 1 - O. Reg. 246/22 - s. 55 (2) (b) (iv)

Previously Issued Compliance Order(s)

The following previously issued Compliance Order(s) were found NOT to be in compliance:

Order #002 from Inspection #2023-1551-0004 related to O. Reg. 246/22, s. 55 (2)

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

Ottawa District
347 Preston Street, Suite 410
Ottawa, ON, K1S 3J4
Telephone: (877) 779-5559

(b) (ii).

Order #003 from Inspection #2023-1551-0004 related to O. Reg. 246/22, s. 55 (2)

(b) (iv).

The following Inspection Protocols were used during this inspection:

Skin and Wound Prevention and Management

INSPECTION RESULTS

WRITTEN NOTIFICATION: Conditions of licence.

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

Non-compliance with: FLTCA, 2021, s. 104 (4)

Conditions of licence

s. 104 (4) Every licensee shall comply with the conditions to which the licence is subject.

The licensee has failed to comply with Compliance Order (CO) #002 specific to O. Reg. 246/22, s. 55 (2) (b) (ii) from Inspection #2023-1551-0004 served on November 10, 2023, with a compliance due date of January 30, 2024.

The required auditing process required to ensure that residents who required wound treatment, received their treatment as per orders, was not developed or implemented.

Rationale and Summary

A review of the licensee's follow-up documentation related to CO #002 indicated that there were no audits documented specifically to ensure that residents who

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

Ottawa District
347 Preston Street, Suite 410
Ottawa, ON, K1S 3J4
Telephone: (877) 779-5559

required wound treatment received their treatment as per orders.

During an interview on March 4, 2024, staff stated that they used the Medication Administration Record (MAR) to audit that the residents' treatments were being administered as ordered, however, they did not keep a documented record of their audits.

Sources: CO #002 from #2023-1551-0004; the licensee's compliance order documentation; and interviews with staff.

An Administrative Monetary Penalty (AMP) is being issued on this written notification AMP #001

NOTICE OF ADMINISTRATIVE MONETARY PENALTY (AMP)

The Licensee has failed to comply with FLTCA, 2021
Notice of Administrative Monetary Penalty AMP #001
Related to Written Notification NC #001

Pursuant to section 158 of the Fixing Long-Term Care Act, 2021, the licensee is required to pay an administrative penalty of \$1100.00, to be paid within 30 days from the date of the invoice.

In accordance with s. 349 (6) and (7) of O. Reg. 246/22, this administrative penalty is being issued for the licensee's failure to comply with an order under s. 155 of the Act.

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

Ottawa District
347 Preston Street, Suite 410
Ottawa, ON, K1S 3J4
Telephone: (877) 779-5559

Compliance History:

Prior non-compliance with O. Reg. 246/22 s. 55 (2) (b) (ii) resulting in CO #002, in inspection #2023-1551-0004 issued on November 10, 2023.

This is the first AMP that has been issued to the licensee for failing to comply with this requirement.

Invoice with payment information will be provided under a separate mailing after service of this notice.

Licensees must not pay an AMP from a resident-care funding envelope provided by the Ministry [i.e., Nursing and Personal Care (NPC); Program and Support Services (PSS); and Raw Food (RF)]. By submitting a payment to the Minister of Finance, the licensee is attesting to using funds outside a resident-care funding envelope to pay the AMP.

WRITTEN NOTIFICATION: Conditions of licence.

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

Non-compliance with: FLTCA, 2021, s. 104 (4)

Conditions of licence

s. 104 (4) Every licensee shall comply with the conditions to which the licence is subject.

The licensee has failed to comply with Compliance Order (CO) #003 specific to O. Reg. 246/22, s. 55 (2) (b) (iv) from Inspection #2023-1551-0004 served on November 10, 2023, with a compliance due date of January 30, 2024.

The required auditing process to ensure that weekly wound assessments were completed for all residents who were clinically indicated; documentation of the

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

Ottawa District
347 Preston Street, Suite 410
Ottawa, ON, K1S 3J4
Telephone: (877) 779-5559

corrective actions taken for incomplete weekly wound assessments; education on the licensee's Skin and Wound Program policies, and the use of a clinically appropriate assessment instrument specifically designed for skin and wound assessments were not fully implemented.

Rationale and Summary

The licensee did not complete all required audits, documentation, and education to ensure that weekly wound assessments were being completed for all clinically indicated residents. A review of the audits over a four-week period between November 10, 2023, to December 10, 2023, noted omissions in the audits for multiple residents. Two weekly wound assessments for a resident were not completed and the documentation of corrective action could not be located. Education was not provided to all the registered nursing staff designated to complete weekly wound assessments and the education did not include the Skin and Wound Program policies as required.

During an interview, staff acknowledged that there were omissions in the audits and weekly wound assessments, however, did not know what corrective action was being implemented, or where the information was documented. The education was specific to the two-part tool being used to perform weekly wound assessments, however, did not include the licensee's policies related to the Skin and Wound Program. All registered staff would be involved in completing weekly wound assessments, however one RPN had received the education.

Sources: CO #003 from Inspection #2023-1551-0004; the licensee's compliance order documentation; and interviews with staff.

An Administrative Monetary Penalty (AMP) is being issued on this written notification AMP #002

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

Ottawa District
347 Preston Street, Suite 410
Ottawa, ON, K1S 3J4
Telephone: (877) 779-5559

NOTICE OF ADMINISTRATIVE MONETARY PENALTY (AMP)

The Licensee has failed to comply with FLTCA, 2021
Notice of Administrative Monetary Penalty AMP #002
Related to Written Notification NC #002

Pursuant to section 158 of the Fixing Long-Term Care Act, 2021, the licensee is required to pay an administrative penalty of \$1100.00, to be paid within 30 days from the date of the invoice.

In accordance with s. 349 (6) and (7) of O. Reg. 246/22, this administrative penalty is being issued for the licensee's failure to comply with an order under s. 155 of the Act.

Compliance History:

Prior non-compliance with O. Reg. 246/22, s. 55 (2) (b) (iv) resulting in CO #003 in inspection #2023-1551-0004 issued on November 10, 2023.

This is the first AMP that has been issued to the licensee for failing to comply with this requirement.

Invoice with payment information will be provided under a separate mailing after service of this notice.

Licensees must not pay an AMP from a resident-care funding envelope provided by the Ministry [i.e., Nursing and Personal Care (NPC); Program and Support Services (PSS); and Raw Food (RF)]. By submitting a payment to the Minister of Finance, the

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

Ottawa District
347 Preston Street, Suite 410
Ottawa, ON, K1S 3J4
Telephone: (877) 779-5559

licensee is attesting to using funds outside a resident-care funding envelope to pay the AMP.

WRITTEN NOTIFICATION: Skin and Wound Care.

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

Non-compliance with: O. Reg. 246/22, s. 55 (2) (b) (iv)

Skin and wound care

s. 55 (2) Every licensee of a long-term care home shall ensure that,

(b) a resident exhibiting altered skin integrity, including skin breakdown, pressure injuries, skin tears or wounds,

(iv) is reassessed at least weekly by a member of the registered nursing staff, if clinically indicated;

The licensee has failed to ensure that resident's wound was reassessed at least weekly by a member of the registered nursing staff.

Rationale and Summary

Review of a resident's weekly wound assessment documentation, indicated that one out of four weekly wound assessments was not completed.

During an interview, staff acknowledged that the resident's weekly wound assessments should have been completed.

By not completing weekly wound assessments, the risk that wound deterioration would go un-noticed may increase.

Sources: Review of resident weekly wound assessments; and interviews with staff.