



**Inspection Report
under the *Long-Term
Care Homes Act, 2007***

**Rapport d'inspection
prévue le *Loi de 2007
les foyers de soins de
longue durée***

Ministry of Health and Long-Term Care
Health System Accountability and Performance Division
Performance Improvement and Compliance Branch

Toronto Service Area Office
55 St. Clair Avenue West, 8th Floor
Toronto ON M4V 2Y7

Bureau régional de services de Toronto
55, avenue St. Clair Ouest, 8^{ième} étage
Toronto, ON M4V 2Y7

**Ministère de la Santé et des Soins de
longue durée**

Telephone: 416-325-9297
1-866-311-8002

Téléphone: 416-325-9297
1-866-311-8002

Division de la responsabilisation et de la performance du
système de santé
Direction de l'amélioration de la performance et de la
conformité

Facsimile: 416-327-4486

Télécopieur: 416-327-4486

Licensee Copy/Copie du Titulaire Public Copy/Copie Public

Date(s) of inspection/Date de l'inspection November 8, 2010	Inspection No/ d'inspection 2010_132_2924_08Nov171956	Type of Inspection/Genre d'inspection Other (Critical Incident)
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Licensee/Titulaire
Markhaven, Inc.

Long-Term Care Home/Foyer de soins de longue durée
Markhaven Inc.

Name of Inspector(s)/Nom de l'inspecteur(s)
Rosemary Lam (#132)

Inspection Summary/Sommaire d'inspection

The purpose of this inspection was to conduct an Other (Critical Incident) inspection.

During the course of the inspection, the inspector(s) spoke with: Director of Care, RN Supervisor, Registered Practical Nurses.

During the course of the inspection, the inspector(s): Reviewed relevant medical records and policies, observed staff administering medications, visited residents in their rooms.

The following Inspection Protocols were used in part or in whole during this inspection:

- Critical Incident Inspection Protocol
- Medication Inspection Protocol

Findings of Non-Compliance were found during this inspection. The following action was taken:

- 2 WN
- 1 VPC



NON- COMPLIANCE / (Non-respectés)

Definitions/Définitions

WN – Written Notifications/Avis écrit
VPC – Voluntary Plan of Correction/Plan de redressement volontaire
DR – Director Referral/Régleuseur envoyé
CO – Compliance Order/Ordres de conformité
WAO – Work and Activity Order/Ordres: travaux et activités

The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.

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 suivant constitue un avis d'écrit de l'exigence prévue le paragraphe 1 de section 152 de les foyers de soins de longue durée.

Non-respect avec les exigences sur le *Loi de 2007 les foyers de soins de longue durée* à trouvé. (Une exigence dans le loi comprend les exigences contenues dans les points énumérés dans la définition de "exigence prévue par la présente loi" au paragraphe 2(1) de la loi.

WN #1: The Licensee has failed to comply with O.Reg 79/10. **131. (1)** Every licensee of a long-term care home shall ensure that no drug is used by or administered to a resident in the home unless the drug has been prescribed for the resident.

Findings:

1. A medication was administered to an identified resident in error. The medication error was discovered by the home's staff 2 days after it occurred.
2. The staff involved denied committing the mistake the home thought that the staff mistook another resident for the correct resident as both looked alike. Reviewed of medication administration record (MAR) found that staff signed to indicate the nitro patch was given to the right resident. Another staff signed to have removed a nitro patch from the right resident on the same evening; it was unclear if staff signed to have removed a nitro patch from the resident when in fact she did not.

Since the incident, the home has implemented the following corrective action:

- a. Each resident's picture has been placed on each resident's MAR.

Additional Required Actions:

None

WN #2: The Licensee has failed to comply with LTCHA 2007, c. 8, s. 73. Every licensee of a long-term care home shall ensure that all the staff of the home, including the persons mentioned in sections 70 to 72,
(a) have the proper skills and qualifications to perform their duties; and
(b) possess the qualifications provided for in the regulations.

Findings:

As of November 8, 2010, the home did not have a process in place to ensure the agency staff hired has the proper skills and qualifications to administer medications.

1. Evidence of the agency registered practical nurse (RPN) holding a record of completion of a required medication administration course was not available. The Home kept a 2009 College of Nurses registration for the agency RPN, current 2010 registration was not available and year of graduation was not known.
2. The home could not confirm whether the agency RPN received the 2 hrs orientation program prior to commencement of work. On occasions, the agency would keep the orientation record, as of December 14, 2010, the record was not available from the agency. No record was available on the home's file.



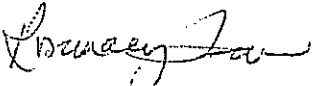
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Additional Required Actions:

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 with developing a process to ensure the agency staff hired has the proper qualification and orientation before the person begins performing their responsibilities. This plan of correction is to be implemented voluntarily.

Signature of Licensee or Representative of Licensee Signature du Titulaire du représentant désigné	Signature of Health System Accountability and Performance Division representative/Signature du (de la) représentant(e) de la Division de la responsabilisation et de la performance du système de santé.
	Rosemary Lam 
Title: _____ Date: _____	Date of Report: (if different from date(s) of inspection). December 13, 2010