

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

Rapport d'inspection en vertu
de la Loi de 2007 sur les
foyers de soins de longue
durée

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

Division des opérations relatives aux
soins de longue durée
Inspection de soins de longue durée

Ottawa Service Area Office
347 Preston St Suite 420
OTTAWA ON K1S 3J4
Telephone: (613) 569-5602
Facsimile: (613) 569-9670

Bureau régional de services d'Ottawa
347 rue Preston bureau 420
OTTAWA ON K1S 3J4
Téléphone: (613) 569-5602
Télécopieur: (613) 569-9670

Amended Public Copy/Copie modifiée du rapport public

Report Date(s)/ Date(s) du Rapport	Inspection No/ No de l'inspection	Log #/ No de registre	Type of Inspection / Genre d'inspection
Mar 31, 2022	2022_779641_0004 (A1)	019055-21	Complaint

Licensee/Titulaire de permis

The Corporation of the County of Prince Edward
603 Highway 49 R.R. #2, Hallowell Township Picton ON K0K 2T0

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

H.J. McFarland Memorial Home
603 Highway 49, R.R. #2, Hallowell Township Picton ON K0K 2T0

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

Amended by CATHI KERR (641) - (A1)

Amended Inspection Summary/Résumé de l'inspection modifié

**Inspection Report under
the Long-Term Care
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durée**

On March 29, 2022, a written request was received from the Executive Director of H. J. McFarland Memorial Home requesting an extension to Compliance Order #001 issued as a result of Complaint Inspection # 2022_779641_0004. The Executive Director indicated that progress has been made towards compliance, however, due to extenuating circumstances related to the COVID-19 pandemic, an extension was requested. This licensee inspection report has been revised to reflect an extension to the compliance due date to May 4, 2022.

Issued on this 31st day of March, 2022 (A1)

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

Original report signed by the inspector.

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the Long-Term Care
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603 Highway 49 R.R. #2, Hallowell Township Picton ON K0K 2T0

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

H.J. McFarland Memorial Home
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Name of Inspector(s)/Nom de l'inspecteur ou des inspecteurs

Amended by CATHI KERR (641) - (A1)

Amended Inspection Summary/Résumé de l'inspection

**Inspection Report under
*the Long-Term Care
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The purpose of this inspection was to conduct a Complaint inspection.

This inspection was conducted on the following date(s): January 14, 19, 20, 21, 24, 25, 2022.

This inspection was conducted in reference to complaint intake #019055-21, related to resident care and safety in the home.

During the course of the inspection, the inspector(s) spoke with the Administrator, the Director of Care, Registered Nurses, Registered Practical Nurses, Personal Support Workers, the Recreation Supervisor, the Manager of Human Resources, Housekeeping staff and residents.

During this inspection the Inspector completed a tour of the home, observed residents' environments, the provision of care and services to residents, reviewed relevant resident health care records, and policies and procedures related to Infection Prevention and Control, Medication Management, Skin and Wound Care, Animal and Pet Immunization and Least Restraint.

The following Inspection Protocols were used during this inspection:

Medication

Minimizing of Restraining

Safe and Secure Home

Skin and Wound Care

During the course of the original inspection, Non-Compliances were issued.

- 1 WN(s)**
- 0 VPC(s)**
- 1 CO(s)**
- 0 DR(s)**
- 0 WAO(s)**

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES	
<p>Legend</p> <p>WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order</p>	<p>Légende</p> <p>WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités</p>
<p>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.)</p> <p>The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.</p>	<p>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.)</p> <p>Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.</p>

WN #1: The Licensee has failed to comply with O.Reg 79/10, s. 50. Skin and wound care

Specifically failed to comply with the following:

- s. 50. (2) Every licensee of a long-term care home shall ensure that,**
- (b) a resident exhibiting altered skin integrity, including skin breakdown, pressure ulcers, skin tears or wounds,
 - (i) receives a skin assessment by a member of the registered nursing staff, using a clinically appropriate assessment instrument that is specifically designed for skin and wound assessment,**
 - (ii) receives immediate treatment and interventions to reduce or relieve pain, promote healing, and prevent infection, as required,**
 - (iii) is assessed by a registered dietitian who is a member of the staff of the home, and any changes made to the resident's plan of care relating to nutrition and hydration are implemented, and**
 - (iv) is reassessed at least weekly by a member of the registered nursing staff, if clinically indicated; O. Reg. 79/10, s. 50 (2).****

Findings/Faits saillants :

**Inspection Report under
*the Long-Term Care
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foyers de soins de longue
durée**

1. The licensee failed to ensure that residents exhibiting altered skin integrity, including skin breakdown, pressure ulcers, skin tears or wounds, had been reassessed at least weekly by a member of the registered nursing staff, when clinically indicated.

Inspector #641 reviewed three residents' health care records who were receiving wound care treatments for altered skin integrity.

It was noted by the Nurse Practitioner (NP) that a resident had a wound. No reassessment was documented of the wound until 18 days later. Three wound reassessments were done and then another reassessment was not completed for 21 days.

Another resident was noted to have a wound. It was reassessed twice during the next month and then no documentation of another wound reassessment was completed until 52 days later, when it was noted to have deteriorated. There were no further notes documenting the wound's status or assessment of the wound after this assessment.

A third resident was noted to have wounds. A review of the resident's wound care was noted. The wounds were reassessed 59 days later, then 22 days later, 19 days later, and then 41 days later. The wounds were noted to have deteriorated at that time. There was no documentation of a reassessment of the wounds for a period of 35 days during the next two months.

A Registered Practical Nurse (RPN) was designated as the wound care lead for the home. The RPN advised that they looked after most of the wound care and did all of the weekly reassessments of the wounds. The RPN stated that they only did reassessments if there was a change in the status of the wound, so they were not doing weekly reassessments on all of the residents' wounds.

There was harm to the residents as the lack of weekly reassessments of the residents' wounds allowed for further deterioration of the wounds.

Source: residents' health care records, interviews with staff and Director of Care, policies and procedures related to the licensee's Skin and Wound program. [s. 50. (2) (b) (iv)]

Additional Required Actions:

CO # - 001 will be served on the licensee. Refer to the “Order(s) of the Inspector”.

**(A1)
The following order(s) have been amended / Le/les ordre(s) suivant(s) ont été
modifiés: CO# 001**

Issued on this 31st day of March, 2022 (A1)

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

Original report signed by the inspector.

Order(s) of the Inspector

Pursuant to section 153 and/or
section 154 of the *Long-Term
Care Homes Act, 2007*, S.O.
2007, c. 8

Ordre(s) de l'inspecteur

Aux termes de l'article 153 et/ou de
l'article 154 de la *Loi de 2007 sur les
foyers de soins de longue durée*, L.O.
2007, chap. 8

Long-Term Care Operations Division
Long-Term Care Inspections Branch
Division des opérations relatives aux
soins de longue durée
Inspection de soins de longue durée

Amended Public Copy/Copie modifiée du rapport public

**Name of Inspector (ID #) /
Nom de l'inspecteur (No) :** Amended by CATHI KERR (641) - (A1)

**Inspection No. /
No de l'inspection :** 2022_779641_0004 (A1)

**Appeal/Dir# /
Appel/Dir#:**

**Log No. /
No de registre :** 019055-21 (A1)

**Type of Inspection /
Genre d'inspection :** Complaint

**Report Date(s) /
Date(s) du Rapport :** Mar 31, 2022(A1)

**Licensee /
Titulaire de permis :** The Corporation of the County of Prince Edward
603 Highway 49, R.R. #2, Hallowell Township,
Picton, ON, K0K-2T0

**LTC Home /
Foyer de SLD :** H.J. McFarland Memorial Home
603 Highway 49, R.R. #2, Hallowell Township,
Picton, ON, K0K-2T0

**Name of Administrator /
Nom de l'administratrice
ou de l'administrateur :** Kyle Cotton

Order(s) of the Inspector

Pursuant to section 153 and/or
section 154 of the *Long-Term
Care Homes Act, 2007*, S.O.
2007, c. 8

Ordre(s) de l'inspecteur

Aux termes de l'article 153 et/ou de
l'article 154 de la *Loi de 2007 sur les
foyers de soins de longue durée*, L.O.
2007, chap. 8

To The Corporation of the County of Prince Edward, you are hereby required to
comply with the following order(s) by the date(s) set out below:

Order(s) of the Inspector

Pursuant to section 153 and/or section 154 of the *Long-Term Care Homes Act, 2007*, S.O. 2007, c. 8

Ordre(s) de l'inspecteur

Aux termes de l'article 153 et/ou de l'article 154 de la *Loi de 2007 sur les foyers de soins de longue durée*, L.O. 2007, chap. 8

Order # /

No d'ordre: 001

Order Type /

Genre d'ordre : Compliance Orders, s. 153. (1) (a)

Pursuant to / Aux termes de :

O.Reg 79/10, s. 50. (2) Every licensee of a long-term care home shall ensure that,

(a) a resident at risk of altered skin integrity receives a skin assessment by a member of the registered nursing staff,

(i) within 24 hours of the resident's admission,

(ii) upon any return of the resident from hospital, and

(iii) upon any return of the resident from an absence of greater than 24 hours;

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

(i) receives a skin assessment by a member of the registered nursing staff, using a clinically appropriate assessment instrument that is specifically designed for skin and wound assessment,

(ii) receives immediate treatment and interventions to reduce or relieve pain, promote healing, and prevent infection, as required,

(iii) is assessed by a registered dietitian who is a member of the staff of the home, and any changes made to the resident's plan of care relating to nutrition and hydration are implemented, and

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

(c) the equipment, supplies, devices and positioning aids referred to in subsection (1) are readily available at the home as required to relieve pressure, treat pressure ulcers, skin tears or wounds and promote healing; and

(d) any resident who is dependent on staff for repositioning is repositioned every two hours or more frequently as required depending upon the resident's condition and tolerance of tissue load, except that a resident shall only be repositioned while asleep if clinically indicated. O. Reg. 79/10, s. 50 (2).

Order / Ordre :

Order(s) of the Inspector

Pursuant to section 153 and/or section 154 of the *Long-Term Care Homes Act, 2007*, S.O. 2007, c. 8

Ordre(s) de l'inspecteur

Aux termes de l'article 153 et/ou de l'article 154 de la *Loi de 2007 sur les foyers de soins de longue durée*, L.O. 2007, chap. 8

The licensee must be compliant with s. 50 (2) (b) (iv) of O. Reg. 79/10.

Specifically, the licensee must:

1. Ensure that residents areas of altered skin integrity are reassessed weekly by a member of the registered nursing staff, if clinically indicated, using a clinically appropriate assessment instrument specifically designed for skin and wound assessment.
2. Complete a weekly audit of all residents where a weekly wound assessment is clinically indicated to ensure weekly assessments are being completed and documented. The audits are to be completed for a minimum of one month, or until all staff are compliant with the process.
3. Maintain documentation of the audits, including when the audit was completed, who completed the audit, the findings and any corrective actions taken.
4. Conduct education on the licensee's Skin and Wound Care Management protocol and the use of a clinically appropriate assessment instrument specifically designed for skin and wound assessments, with the Wound Care lead and any other registered nursing staff designated to complete weekly wound assessments.
5. Maintain documentation of the education, including the names of the staff, their designation, and date training was provided.

Grounds / Motifs :

1. The licensee failed to ensure that residents exhibiting altered skin integrity, including skin breakdown, pressure ulcers, skin tears or wounds, had been reassessed at least weekly by a member of the registered nursing staff, when clinically indicated.

Inspector #641 reviewed three residents' health care records who were receiving wound care treatments for altered skin integrity.

It was noted by the Nurse Practitioner (NP) that a resident had a wound. No

Order(s) of the Inspector

Pursuant to section 153 and/or section 154 of the *Long-Term Care Homes Act, 2007*, S.O. 2007, c. 8

Ordre(s) de l'inspecteur

Aux termes de l'article 153 et/ou de l'article 154 de la *Loi de 2007 sur les foyers de soins de longue durée*, L.O. 2007, chap. 8

reassessment was documented of the wound until 18 days later. Three wound reassessments were done and then another reassessment was not completed for 21 days.

Another resident was noted to have a wound. It was reassessed twice during the next month and then no documentation of another wound reassessment was completed until 52 days later, when it was noted to have deteriorated. There were no further notes documenting the wound's status or assessment of the wound after this assessment.

A third resident was noted to have wounds. A review of the resident's wound care was noted. The wounds were reassessed 59 days later, then 22 days later, 19 days later, and then 41 days later. The wounds were noted to have deteriorated at that time. There was no documentation of a reassessment of the wounds for a period of 35 days during the next two months.

A Registered Practical Nurse (RPN) was designated as the wound care lead for the home. The RPN advised that they looked after most of the wound care and did all of the weekly reassessments of the wounds. The RPN stated that they only did reassessments if there was a change in the status of the wound, so they were not doing weekly reassessments on all of the residents' wounds.

Source: residents' health care records, interviews with staff and Director of Care, policies and procedures related to the licensee's Skin and Wound program.

Severity: There was harm to the residents as the lack of weekly reassessments of the residents' wounds allowed for further deterioration of the wounds.

Scope: This non-compliance was widespread as weekly skin assessments were not completed for three residents when clinically indicated.

Compliance History: 12 Written Notifications (WNs), and 8 Voluntary Plans of Correction (VPCs) were issued to the home related to different sub-sections of the legislation in the past 36 months.

(641)

Order(s) of the Inspector

Pursuant to section 153 and/or
section 154 of the *Long-Term
Care Homes Act, 2007*, S.O.
2007, c. 8

Ordre(s) de l'inspecteur

Aux termes de l'article 153 et/ou de
l'article 154 de la *Loi de 2007 sur les
foyers de soins de longue durée*, L.O.
2007, chap. 8

**This order must be complied with by /
Vous devez vous conformer à cet ordre d'ici le :**

May 04, 2022(A1)

Order(s) of the Inspector

Pursuant to section 153 and/or
section 154 of the *Long-Term
Care Homes Act, 2007*, S.O.
2007, c. 8

Ordre(s) de l'inspecteur

Aux termes de l'article 153 et/ou de
l'article 154 de la *Loi de 2007 sur les
foyers de soins de longue durée*, L.O.
2007, chap. 8

REVIEW/APPEAL INFORMATION

TAKE NOTICE:

The Licensee has the right to request a review by the Director of this (these) Order(s) and to request that the Director stay this (these) Order(s) in accordance with section 163 of the Long-Term Care Homes Act, 2007.

The request for review by the Director must be made in writing and be served on the Director within 28 days from the day the order was served on the Licensee.

The written request for review must include,

- (a) the portions of the order in respect of which the review is requested;
- (b) any submissions that the Licensee wishes the Director to consider; and
- (c) an address for services for the Licensee.

The written request for review must be served personally, by registered mail, commercial courier or by fax upon:

Director
c/o Appeals Coordinator
Long-Term Care Inspections Branch
Ministry of Long-Term Care
438 University Avenue, 8th Floor
Toronto, ON M7A 1N3
Fax: 416-327-7603

When service is made by registered mail, it is deemed to be made on the fifth day after the day of mailing, when service is made by a commercial courier it is deemed to be made on the second business day after the day the courier receives the document, and when service is made by fax, it is deemed to be made on the first business day after the day the fax is sent. If the Licensee is not served with written notice of the Director's decision within 28 days of receipt of the Licensee's request for review, this(these) Order(s) is(are) deemed to be confirmed by the Director and the Licensee is deemed to have been served with a copy of that decision on the expiry of the 28 day period.

The Licensee has the right to appeal the Director's decision on a request for review of an Inspector's Order(s) to the Health Services Appeal and Review Board (HSARB) in accordance with section 164 of the Long-Term Care Homes Act, 2007. The HSARB is an independent tribunal not connected with the Ministry. They are established by legislation to review matters concerning health care services. If the Licensee decides to request a hearing, the Licensee must, within 28 days of being served with the notice of the Director's decision, give a written notice of appeal to both:

Order(s) of the Inspector

Pursuant to section 153 and/or
section 154 of the *Long-Term
Care Homes Act, 2007*, S.O.
2007, c. 8

Ordre(s) de l'inspecteur

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l'article 154 de la *Loi de 2007 sur les
foyers de soins de longue durée*, L.O.
2007, chap. 8

Health Services Appeal and Review Board and the Director

Attention Registrar
Health Services Appeal and Review Board
151 Bloor Street West, 9th Floor
Toronto, ON M5S 1S4

Director
c/o Appeals Coordinator
Long-Term Care Inspections Branch
Ministry of Long-Term Care
438 University Avenue, 8th Floor
Toronto, ON M7A 1N3
Fax: 416-327-7603

Upon receipt, the HSARB will acknowledge your notice of appeal and will provide instructions regarding the appeal process. The Licensee may learn more about the HSARB on the website www.hsarb.on.ca.

Order(s) of the Inspector

Pursuant to section 153 and/or
section 154 of the *Long-Term
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2007, c. 8

Ordre(s) de l'inspecteur

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l'article 154 de la *Loi de 2007 sur les
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2007, chap. 8

**RENSEIGNEMENTS RELATIFS AUX RÉEXAMENS DE DÉCISION ET AUX
APPELS**

PRENEZ AVIS :

Le/la titulaire de permis a le droit de faire une demande de réexamen par le directeur de cet ordre ou de ces ordres, et de demander que le directeur suspende cet ordre ou ces ordres conformément à l'article 163 de la Loi de 2007 sur les foyers de soins de longue durée.

La demande au directeur doit être présentée par écrit et signifiée au directeur dans les 28 jours qui suivent la signification de l'ordre au/à la titulaire de permis.

La demande écrite doit comporter ce qui suit :

- a) les parties de l'ordre qui font l'objet de la demande de réexamen;
- b) les observations que le/la titulaire de permis souhaite que le directeur examine;
- c) l'adresse du/de la titulaire de permis aux fins de signification.

La demande de réexamen présentée par écrit doit être signifiée en personne, par courrier recommandé, par messagerie commerciale ou par télécopieur, au :

Directeur
a/s du coordonnateur/de la coordonnatrice en matière d'appels
Direction de l'inspection des foyers de soins de longue durée
Ministère des Soins de longue durée
438, rue University, 8^e étage
Toronto ON M7A 1N3
Télécopieur : 416-327-7603

Order(s) of the Inspector

Pursuant to section 153 and/or
section 154 of the *Long-Term
Care Homes Act, 2007*, S.O.
2007, c. 8

Ordre(s) de l'inspecteur

Aux termes de l'article 153 et/ou de
l'article 154 de la *Loi de 2007 sur les
foyers de soins de longue durée*, L.O.
2007, chap. 8

Quand la signification est faite par courrier recommandé, elle est réputée être faite le cinquième jour qui suit le jour de l'envoi, quand la signification est faite par messagerie commerciale, elle est réputée être faite le deuxième jour ouvrable après le jour où la messagerie reçoit le document, et lorsque la signification est faite par télécopieur, elle est réputée être faite le premier jour ouvrable qui suit le jour de l'envoi de la télécopie. Si un avis écrit de la décision du directeur n'est pas signifié au/à la titulaire de permis dans les 28 jours de la réception de la demande de réexamen présentée par le/la titulaire de permis, cet ordre ou ces ordres sont réputés être confirmés par le directeur, et le/la titulaire de permis est réputé(e) avoir reçu une copie de la décision en question à l'expiration de ce délai.

Le/la titulaire de permis a le droit d'interjeter appel devant la Commission d'appel et de révision des services de santé (CARSS) de la décision du directeur relative à une demande de réexamen d'un ordre ou des ordres d'un inspecteur ou d'une inspectrice conformément à l'article 164 de la Loi de 2007 sur les foyers de soins de longue durée. La CARSS est un tribunal autonome qui n'a pas de lien avec le ministère. Elle est créée par la loi pour examiner les questions relatives aux services de santé. Si le/la titulaire décide de faire une demande d'audience, il ou elle doit, dans les 28 jours de la signification de l'avis de la décision du directeur, donner par écrit un avis d'appel à la fois à :

la Commission d'appel et de révision des services de santé et au directeur

À l'attention du/de la registrateur(e)
Commission d'appel et de révision
des services de santé
151, rue Bloor Ouest, 9e étage
Toronto ON M5S 1S4

Directeur
a/s du coordonnateur/de la coordonnatrice en matière
d'appels
Direction de l'inspection des foyers de soins de longue durée
Ministère des Soins de longue durée
438, rue University, 8e étage
Toronto ON M7A 1N3
Télécopieur : 416-327-7603

À la réception de votre avis d'appel, la CARSS en accusera réception et fournira des instructions relatives au processus d'appel. Le/la titulaire de permis peut en savoir davantage sur la CARSS sur le site Web www.hsarb.on.ca.

Issued on this 31st day of March, 2022 (A1)

**Signature of Inspector /
Signature de l'inspecteur :**

**Name of Inspector /
Nom de l'inspecteur :**

Amended by CATHI KERR (641) - (A1)

Order(s) of the Inspector

Pursuant to section 153 and/or
section 154 of the *Long-Term
Care Homes Act, 2007*, S.O.
2007, c. 8

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Aux termes de l'article 153 et/ou de
l'article 154 de la *Loi de 2007 sur les
foyers de soins de longue durée*, L.O.
2007, chap. 8

**Service Area Office /
Bureau régional de services :**

Ottawa Service Area Office