

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

Amended Public Report Cover Sheet (A1)

Amended Report Issue Date: May 14, 2025

Original Report Issue Date: May 1, 2025

Inspection Number: 2025-1519-0005 (A1)

Inspection Type:

Complaint

Critical Incident

Licensee: The Perley and Rideau Veterans' Health Centre

Long Term Care Home and City: The Perley and Rideau Veterans' Health Centre,
Ottawa

AMENDED INSPECTION SUMMARY

This report has been amended to:

Reflect a change for the issued legislative reference for compliance order #001, issued May 1, 2025, from Ontario Regulation 246/22 s. 139 1. to Ontario Regulation 246/22 s. 138 (1) (a) (ii).

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INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): April 29, 30, 2025 and May 1, 2025

The following intake(s) were inspected:

- Intake: #00143521 Fall of resident resulting in injury with change in condition.

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- Intake: #00144064 Complainant with concerns regarding menu planning in the home.
- Intake: #00144349 Enteric - outbreak declared 05APR25 - Finalized 16APR25 - Rideau R1S

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

Food, Nutrition and Hydration
Medication Management
Infection Prevention and Control
Safe and Secure Home
Falls Prevention and Management

AMENDED INSPECTION RESULTS

WRITTEN NOTIFICATION: Reports re critical incidents

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

Non-compliance with: O. Reg. 246/22, s. 115 (3) 4.

Reports re critical incidents

s. 115 (3) The licensee shall ensure that the Director is informed of the following incidents in the home no later than one business day after the occurrence of the incident, followed by the report required under subsection (5):

4. Subject to subsection (4), an incident that causes an injury to a resident for which the resident is taken to a hospital and that results in a significant change in the resident's health condition.

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The licensee has failed to ensure that an incident that resulted in a resident injury causing hospitalization and change in condition was reported to the Director within one business day. Specifically, a resident sustained a fall with injury which resulted in a change in condition. Per an interview with a Manager of Resident Care, the Critical Incident (CI) related to the incident was not submitted to the Director until two business days after the occurrence.

Sources:

CI and an interview with a Manager of Resident Care

(A1)

The following non-compliance(s) has been amended: NC #002

COMPLIANCE ORDER CO #001 Safe storage of drugs

NC #002 Compliance Order pursuant to FLTCA, 2021, s. 154 (1) 2.

Non-compliance with: O. Reg. 246/22, s. 138 (1) (a) (ii)

Safe storage of drugs

s. 138 (1) Every licensee of a long-term care home shall ensure that,

(a) drugs are stored in an area or a medication cart,

(ii) that is secure and locked,

**The inspector is ordering the licensee to comply with a Compliance Order
[FLTCA, 2021, s. 155 (1) (a)]:**

The licensee shall:

A) Provide training to all registered nursing staff, who can administer medications in the Rideau Veterans' Residence, on safe storage of medication requirements according to Ontario Regulation 246/22 s. 138 and 139. A written list of all registered

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nursing staff who require training, the training materials, the name of staff members trained, and date(s) of training must be kept for determination of compliance with the order.

B) Audit, for a period of four consecutive weeks in the Rideau Veterans' Residence, staff compliance with safe storage and security of drug supply legislative requirements for all medication storage areas. At minimum, one audit must be conducted on each shift twice weekly. If non-compliance with safe storage of medication requirements is determined during any audits, responsible staff members must be provided immediate re-education on medication safe storage practices.

C) A written record must be kept of each audit recording the auditing procedure, the name of the auditor, the date and time of the audit, the determination of staff compliance or non-compliance with medication safe storage requirements, and what corrective action, if necessary, was provided including the name(s) of the re-trained staff members.

Grounds

The licensee has failed to ensure that drugs are stored in an area or medication cart that is secure and locked. Specifically, the licensee has failed to ensure that medication carts were kept locked when not in use. During the inspection, the inspector observed a medication cart outside on Rideau 1 South unlocked without any staff members using the cart or directly observing it. The Registered Practical Nurse (RPN), who was using the cart, was in a resident's room at the time of observation and not directly using or observing the cart.

Later that day, the inspector observed in the Rideau 1 South dining room, a medication cart unlocked without a staff member directly using or supervising the medication cart. The RPN, who was using the medication cart, was down the hallway and not directly using or observing the medication cart. During both

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observations the inspector was able to open the medication cart and medications were easily accessible.

Sources:

Observations of medication carts on Rideau 1 South and Rideau 1 North

This order must be complied with by July 28, 2025

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REVIEW/APPEAL INFORMATION

TAKE NOTICE The Licensee has the right to request a review by the Director of this (these) Order(s) and/or this Notice of Administrative Penalty (AMP) in accordance with section 169 of the Fixing Long-Term Care Act, 2021 (Act). The licensee can request that the Director stay this (these) Order(s) pending the review. If a licensee requests a review of an AMP, the requirement to pay is stayed until the disposition of the review.

Note: Under the Act, a re-inspection fee is not subject to a review by the Director or an appeal to the Health Services Appeal and Review Board (HSARB). 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 or AMP was served on the licensee.

The written request for review must include:

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

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

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e-mail: MLTC.AppealsCoordinator@ontario.ca

If service is made by:

- (a) registered mail, is deemed to be made on the fifth day after the day of mailing
- (b) email, is deemed to be made on the following day, if the document was served after 4 p.m.
- (c) commercial courier, is deemed to be made on the second business day after the commercial courier received the document

If the licensee is not served with a copy of the Director's decision within 28 days of receipt of the licensee's request for review, this(these) Order(s) is(are) and/or this AMP is deemed to be confirmed by the Director and, for the purposes of an appeal to HSARB, the Director is deemed to have served the licensee with a copy of that decision on the expiry of the 28-day period.

Pursuant to s. 170 of the Act, the licensee has the right to appeal any of the following to HSARB:

- (a) An order made by the Director under sections 155 to 159 of the Act.
- (b) An AMP issued by the Director under section 158 of the Act.
- (c) The Director's review decision, issued under section 169 of the Act, with respect to an inspector's compliance order (s. 155) or AMP (s. 158).

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 an appeal, the licensee must give a written notice of appeal within 28 days from the day the licensee was served with a copy of the order, AMP or Director's decision that is being appealed from. The appeal notice must be given to both HSARB and the Director:

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Health Services Appeal and Review Board

Attention Registrar
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
e-mail: MLTC.AppealsCoordinator@ontario.ca

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