

# Inspection Report Under the Fixing Long-Term Care Act, 2021

### 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 6, 2023	
Inspection Number: 2023-1011-0006	
Inspection Type:	
Complaint	
Licensee: 2629693 Ontario Inc.	
Long Term Care Home and City: Sarsfield Colonial Home, Sarsfield	
Lead Inspector	Inspector Digital Signature
Linda Harkins (126)	
Additional Inspector(s)	
Julienne Ngo Nloga (502)	

### **INSPECTION SUMMARY**

The inspection occurred onsite on the following date(s): June 20, 21, 22, 2023 The inspection occurred offsite on the following date(s): June 23 and July 4, 2023

The following intake(s) were inspected:

• Intake: #00088529 -related to care and services

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

Continence Care
Food, Nutrition and Hydration
Medication Management
Infection Prevention and Control

## **INSPECTION RESULTS**



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### **WRITTEN NOTIFICATION: Food Production**

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

Non-compliance with: O. Reg. 246/22, s. 78 (2) (c)

The licensee has failed to ensure that the food production system, at a minimum, provide for production sheets for all menus.

#### **Rationale and Summary**

Review of the food production records for the Spring Summer menu showed that the production sheets for all menu items were not made available for the food production.

Interviews with two dietary staff who stated that the production sheets have not implemented as part of their food production system.

As such, there was no production records to keep track of the food served for each diet type at each meal and snack every day.

Sources: Food production documents and interviews.

[502]

### **WRITTEN NOTIFICATION: Administration of drugs**

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

Non-compliance with: O. Reg. 246/22, s. 140 (2)

The licensee has failed to ensure that a specific drug was administered to the resident in accordance with the directions for the use specified by the prescriber.

#### **Rationale and Summary**

A resident was admitted on a specific day in 2022.

The next day, a registered nursing staff administered a specific laxative to the resident.

The Home's Bowel Management Protocol (BMP) dated March 2, 2018, directions are to administer a specific laxative, after three days without a Bowel Movement (BM).



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Interview held with the registered nursing staff, who indicated, that as per the BMP, the laxative could be administer to the resident, if they were three days without a BM and if it was documented and flagged by the night nurse in the report.

As such, the registered nursing staff did not administer the laxative as per the BMP protocol, which requires the resident to be three days without a BM and the resident had been in the home only for one day.

Sources: Interviews, progress notes and medication administration record. [126]



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