Ontario

Ministry of Health and Long-Term Care

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

Ministère de la Santé et des Soins de longue durée

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

Health System Accountability and Performance Division
Performance Improvement and Compliance Branch

Division de la responsabilisation et de la performance du système de santé
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Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Mar 25, 2014	2013_215123_0021	H-001372-12,H-000672-13	Complaint

Licensee/Titulaire de permis

ST. PETER'S CARE CENTRES
125 Redfern Ave, HAMILTON, ON, L9C-7W9

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

ST. PETER'S RESIDENCE AT CHEDOKE
125 Redfern Avenue, HAMILTON, ON, L9C-7W9

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

MELODY GRAY (123)

Inspection Summary/Résumé de l'inspection

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The purpose of this inspection was to conduct a Complaint inspection.

This inspection was conducted on the following date(s): November 13, 14, 15, 18, 19, 20, 21, 22, and 26, 2013

Concurrent Inspection 2013_215123_0020/H-H-001500-12,H-000634-13

During the course of the inspection, the inspector(s) spoke with the Directors of Care (DOC), the Administrator, registered staff, the resident's Power of Attorney (POA).

During the course of the inspection, the inspector(s) reviewed the home's records including the policies and procedures and incident record. Reviewed resident's records including progress notes, Physician's Order forms and Quarterly Medication Review. Medication administration was also observed.

The following Inspection Protocols were used during this inspection:
Medication

Findings of Non-Compliance were found during this inspection.

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

WN #1: The Licensee has failed to comply with O.Reg 79/10, s. 8. Policies, etc., to be followed, and records

Specifically failed to comply with the following:

s. 8. (1) Where the Act or this Regulation requires the licensee of a long-term care home to have, institute or otherwise put in place any plan, policy, protocol, procedure, strategy or system, the licensee is required to ensure that the plan, policy, protocol, procedure, strategy or system,
(a) is in compliance with and is implemented in accordance with applicable requirements under the Act; and O. Reg. 79/10, s. 8 (1).
(b) is complied with. O. Reg. 79/10, s. 8 (1).

Findings/Faits saillants :

1. The licensee did not ensure that any plan, policy, protocol, procedure, strategy or system instituted or otherwise put in place is:
(b) complied with.
Resident # 002 record was reviewed and the documentation indicated that the medication was discontinued by the physician. The following month, the resident's Power of Attorney (POA) inquired about the resident taking the medication and was informed that it was discontinued by the physician. The resident's POA was upset about not being informed about the order.
The home's records including incident records and policies and procedures were reviewed. It was noted that the medication was discontinued by the physician as above and that consent was not obtained. The family/POA was not informed. The POA did not want medication stopped. The home's policy Informed Consent Number 1-6 indicates that the health practitioner proposing a treatment must ensure that consent has been obtained. One health practitioner, on behalf of all the caregivers involved in a plan of treatment, can: propose the plan of treatment to the resident; determine the resident's capacity to consent to the plan of treatment; obtain consent or refusal from a capable resident or from an incapable resident's substitute decision maker. The home's definition of plan of treatment includes: Providing for the administration of various treatments or for the withholding, or the withdrawal of treatment, in the light of the resident's condition.
The Director of Care was interviewed and reported that the medication was discontinued by the physician as above and that the home's staff did not notify the resident's POA as per the home's policy.
The home failed to ensure that any plan, policy, protocol, procedure, strategy or system instituted or otherwise put in place is complied with. [s. 8. (1)]

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Issued on this 25th day of March, 2014

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

M. GRAY