



**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**

**Long-Term Care Homes Division  
Long-Term Care Inspections Branch**

**Division des foyers de soins de  
longue durée  
Inspection de soins de longue durée**

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<b>Report Date(s) / Date(s) du rapport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / No de registre</b>	<b>Type of Inspection / Genre d'inspection</b>
Sep 14, 2017	2017_658178_0011	010176-17	Complaint

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**Licensee/Titulaire de permis**

CITY OF OTTAWA  
Community and Social Services, Long Term Care Branch 200 Island Lodge Road  
OTTAWA ON K1N 5M2

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

GARRY J. ARMSTRONG HOME  
200 ISLAND LODGE ROAD OTTAWA ON K1N 5M2

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

SUSAN LUI (178), AMANDA NIXON (148)

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**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): July 11, 12, 14, 16, 25, 26, 27, August 3, 4, 8, 10, 2017**

**During the course of the inspection, the inspector(s) spoke with residents, a resident's family member, the Program Manager of Resident Care, Registered Nurses (RNs), Registered Practical Nurses (RPNs), a Personal Support Worker (PSW), a Physiotherapist, a Physiotherapy Assistant.**

**During the course of the inspection the inspector also observed residents and resident care, reviewed resident health records, reviewed home records and policies.**

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

**Falls Prevention**

**Infection Prevention and Control**

**Medication**

**Pain**

**Personal Support Services**

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

**1 WN(s)**

**0 VPC(s)**

**0 CO(s)**

**0 DR(s)**

**0 WAO(s)**



**NON-COMPLIANCE / NON - RESPECT DES EXIGENCES**

Legend	Legendé
WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order	WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités
<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. 129. Safe storage of drugs**

**Specifically failed to comply with the following:**

**s. 129. (1) Every licensee of a long-term care home shall ensure that,**  
**(a) drugs are stored in an area or a medication cart,**  
**(i) that is used exclusively for drugs and drug-related supplies,**  
**(ii) that is secure and locked,**  
**(iii) that protects the drugs from heat, light, humidity or other environmental conditions in order to maintain efficacy, and**  
**(iv) that complies with manufacturer's instructions for the storage of the drugs;**  
**and O. Reg. 79/10, s. 129 (1).**  
**(b) controlled substances are stored in a separate, double-locked stationary cupboard in the locked area or stored in a separate locked area within the locked medication cart. O. Reg. 79/10, s. 129 (1).**

**Findings/Faits saillants :**

1. The licensee has failed to ensure that drugs are stored in an area or a medication cart that is secure and locked.

On July 25, 2017, at approximately 0900h, Inspector #178 observed what appeared to be a glycerine suppository in a plastic medication cup sitting on the handrail outside an identified resident room. No staff or residents were in the vicinity at the time. At approximately 1000h, the medication cup containing the suppository remained in the same place. RPN #100 accompanied Inspector #178 to view the medication cup and confirmed that it was a glycerine suppository, but she could not explain why it was sitting in the hallway, who had left it there, or how long it had been there. RPN #100 indicated that glycerine suppositories are stored in a cupboard in the locked medication room, and should not be left in the hallway.

On July 26, 2017, the home's Program Manager of Resident Care indicated to Inspector #178 that glycerine suppositories should be stored in the locked medication room.

(010176-17) [s. 129. (1) (a)]



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**Issued on this 14th day of September, 2017**

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

**Original report signed by the inspector.**