



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

**Rapport d'inspection  
prévus le *Loi de 2007  
les foyers de soins de  
longue durée***

**Ministry of Health and Long-Term Care**  
Health System Accountability and Performance Division  
Performance Improvement and Compliance Branch

London Service Area Office  
291 King Street, 4th Floor  
London ON N6B 1R8

Bureau régional de services de London  
291, rue King, 4<sup>ème</sup> étage  
London ON N6B 1R8

**Ministère de la Santé et des Soins de  
longue durée**

Division de la responsabilisation et de la performance du  
système de santé  
Direction de l'amélioration de la performance et de la  
conformité

Telephone: 519-675-7680  
Facsimile: 519-675-7685

Téléphone: 519-675-7680  
Télécopieur: 519-675-7685

☐ Licensee Copy/Copie du Titulaire ☒ Public Copy/Copie Public

| Date(s) of Inspection/Date de l'inspection | Inspection No/ d'inspection | Type of Inspection/Genre d'inspection |
|--------------------------------------------|-----------------------------|---------------------------------------|
| October 8, 2010                            | 2010-190-1115-08Oct093720   | Complaint L-00825                     |

**Licensee/Titulaire**

Copper Terrace Ltd. 284 Central Avenue, London, ON N6B 2C8

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

Copper Terrace 91 Tecumseh Road, Chatham, ON N7M 1B3

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

Sandra Fysh #190

**Inspection Summary/Sommaire d'inspection**

The purpose of this inspection was to conduct a complaint inspection related to medication.

During the course of the inspection, the inspector spoke with the Administrator, Director of Care, Resident, Registered Nursing staff and front line staff.

During the course of the inspection, the inspector reviewed the clinical record of one resident and reviewed policies related to medications administration.

The following Inspection Protocols were used in part or in whole during this inspection.

- Medication Inspection Protocol

☒ Findings of Non-Compliance were found during this inspection. The following action was taken:

2 WN

### NON- COMPLIANCE / (Non-respectés)

**Definitions/Définitions**

**WN** – Written Notifications/Avis écrit  
**VPC** – Voluntary Plan of Correction/Plan de redressement volontaire  
**DR** – Director Referral/Régisseur envoyé  
**CO** – Compliance Order/Ordres de conformité  
**WAO** – Work and Activity Order/Ordres: travaux et activités

The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.

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.)

Le suivant constituer un avis d'écrit de l'exigence prévue le paragraphe 1 de section 152 de les foyers de soins de longue durée.

Non-respect avec les exigences sur le *Loi de 2007 les foyers de soins de longue durée* à trouvé. (Une exigence dans le loi comprend les exigences contenues dans les points énumérés dans la définition de "exigence prévue par la présente loi" au paragraphe 2(1) de la loi.

**WN #1:** The Licensee has failed to comply with O.Reg.79/10,s.114(3)(a) The written policies and protocols must be, developed, implemented, evaluated and updated in accordance with evidence-based practices and, if there are none, in accordance with prevailing practices.

**Findings:**

The licensee has prepared a draft policy, but this policy has not been implemented yet. This policy will direct the staff when residents or family members request medications to be administered that have not been supplied by the home's pharmacy.

**Inspector ID #:** 190

**WN #2:** The Licensee has failed to comply with O.Reg.79/10,s.122(1)(a) and (b) Every licensee of a long-term care home shall ensure that no drug is acquired, received or stored by or in the home or kept by a resident under subsection 131 (7) unless the drug,  
 (a) has been prescribed for a resident or obtained for the purposes of the emergency drug supply referred to in section 123; and  
 (b) has been provided by, or through an arrangement made by, the pharmacy service provider or the Government of Ontario.

**Findings:**

The Registered Nursing staff of this home are administering medication that has not been provided by the pharmacy service provider.

**Inspector ID #:** 190

**Signature of Licensee or Representative of Licensee**  
**Signature du Titulaire du représentant désigné**

**Signature of Health System Accountability and Performance Division**  
**representative/Signature du (de la) représentant(e) de la Division de la**  
**responsabilisation et de la performance du système de santé.**

**Title:**

**Date:**

**Date of Report:** (If different from date(s) of inspection).