Ontario

Ministry of Health and Long-Term Care

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

Ministére de la Santé et des Soins de longue durée

Rapport d'inspection prévue le Loi de 2007 les foyers de soins de longue

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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Date(s) of inspection/Date(s) de l'inspection	Inspection No/ No de l'inspection	Type of Inspection/Genre d'inspection
Nov 7, 8, 9, Dec 13, 2012	2012_190159_0004	Other

Licensee/Titulaire de permis

MISSISSAUGA LONG TERM CARE FACILITY INC.
26 PETER STREET NORTH, MISSISSAUGA, ON, L5H-2G7

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

MISSISSAUGA LONG TERM CARE FACILITY
26 PETER STREET NORTH, MISSISSAUGA, ON, L5H-2G7

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

ASHA SEHGAL (159)

Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct an Other inspection.

During the course of the inspection, the inspector(s) spoke with Administrator/Licensee, Registered Practical Nurse(RPN), Food Service Supervisor, Personal Support Workers (PSWs), Maintenance Supervisor, dietary staff and residents.

During the course of the inspection, the inspector(s) conducted a tour of the home areas, observed the noon meal service and reviewed Residents' Council meeting minutes.(Log#H-002122-12)

The following Inspection Protocols were used during this inspection:

Dining Observation

Residents' Council

Findings of Non-Compliance were found during this inspection.

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
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 LTCHA, 2007 S.O. 2007, c.8, s. 85. Satisfaction survey

Specifically failed to comply with the following subsections:

s. 85. (3) The licensee shall seek the advice of the Residents' Council and the Family Council, if any, in developing and carrying out the survey, and in acting on its results. 2007, c. 8, s. 85. (3).

Findings/Faits saillants :

1. The licensee did not ensure that the advise of the residents' council was sought in developing and carrying out the survey and in acting on its results[LTCHA 2007, c. 8.s. 85(3)]

Interviews with the President of Residents' Council and the Administrator confirm that Residents' Council was not consulted in the development and carrying out of the satisfaction survey and in acting on its results.

WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 130. Security of drug supply

Every licensee of a long-term care home shall ensure that steps are taken to ensure the security of the drug supply, including the following:

1. All areas where drugs are stored shall be kept locked at all times, when not in use.

2. Access to these areas shall be restricted to,

i. persons who may dispense, prescribe or administer drugs in the home, and

ii. the Administrator.

3. A monthly audit shall be undertaken of the daily count sheets of controlled substances to determine if there are any discrepancies and that immediate action is taken if any discrepancies are discovered. O. Reg. 79/10, s. 130.

Findings/Faits saillants :

1. The licensee did not ensure that all areas where drugs are stored are kept locked all times, when not in use [O.Reg. 79/10 s. 130 (1)]
On November 8, 2012, at approximately 1010 hours sprinkler/drug storage room located in the basement where Government Drug Stock are stored was noted unlocked and the door was wide open. This room contained a stock supply of drugs. The Registered Practical Nurse was notified of unlocked drugs storage room.

The licensee did not ensure where drugs are stored the area is restricted to persons who may dispense, prescribe or administered drugs in the home, and the Administrator.[O.Reg.79/10, S.130 (2)i.ii]
On November 8, 2012, at 945 hours, the Maintenance Supervisor who is unable to dispense, prescribe or administered drugs unlocked the drug stock room door located in the basement for an external electrical contractor. Interview with the Registered Practical Nurse(RPN)comfirmed that the Maintenance Supervisor has the key and access to the sprikler/drug storage room.

Additional Required Actions:

VPC - pursuant to the Long-Term Care Homes Act, 2007, S.O. 2007, c.8, s.152(2) the licensee is hereby requested to prepare a written plan of correction for achieving compliance to ensure that all areas where drugs are stored are kept locked all times, when not in use [130.1]
ensure where drugs are stored are restricted to persons who may dispense, prescribe or administered drugs in the home, and the Administrator [130 (2)i.ii], to be implemented voluntarily.

Issued on this 13th day of December, 2012

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