



**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
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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
Sep 3, 2013	2013_217137_0023	L-000630-13	Complaint

Licensee/Titulaire de permis

VISION '74 INC
229 WELLINGTON STREET, SARNIA, ON, N7T-1G9

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

VISION NURSING HOME
229 WELLINGTON STREET, SARNIA, ON, N7T-1G9

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

MARIAN MACDONALD (137)

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): August 29, 2013

During the course of the inspection, the inspector(s) spoke with Director of Care, Staffing Coordinator, five Registered Practical Nurses, seven Health Care Aides/Personal Support Workers, residents and family members.

During the course of the inspection, the inspector(s) observed residents on all home areas, observed lunch and supper meals, bedtime routines, toileting routines, Falls Prevention Program, staffing schedules, Complaint Log and Lift/Transfer Policy and residents' clinical records.

The following Inspection Protocols were used during this inspection:

Dignity, Choice and Privacy

Dining Observation

Falls Prevention

Medication

Sufficient Staffing

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES	
Legend	Legendé
WN – Written Notification	WN – Avis écrit
VPC – Voluntary Plan of Correction	VPC – Plan de redressement volontaire
DR – Director Referral	DR – Aiguillage au directeur
CO – Compliance Order	CO – Ordre de conformité
WAO – Work and Activity Order	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. 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 :



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1. The Licensee failed to ensure that steps are taken to ensure the security of the drug supply including all areas where drugs are stored shall be kept locked at all times, when not in use, as evidenced by:

Inspector # 137 observed 16 prescription creams, for various residents, in a plastic storage container, left on Huron's nursing desk, with no staff member in attendance. Also, a treatment cart was observed unattended and unlocked, in the hallway, between Superior Home Area dining room and Lounge area. There were prescription creams and scissors, on top of the cart, as well as prescription creams and scissors in the bottom drawer, which were accessible to residents.

Two Registered Practical Nurses and the Director of Care confirmed, that the expectation is these prescription creams are to be locked in a medication/treatment room/cart when not in use, that treatment carts are to be locked, if unattended, with no items on top and should be stored in the locked medication/treatment room and these items should not be been accessible to residents. [s. 130. 1.]

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 steps are taken to ensure the security of the drug supply, including all areas where drugs are stored shall be kept locked at all times, when not in use, to be implemented voluntarily.

Issued on this 3rd day of September, 2013

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

Marian C. MacDonald