



Ministry of Health and Long-Term Care
Health Care Programs Division

Ministère de la Santé et des Soins de longue durée
Division des programmes des soins de santé

Report of Unmet Standards or Criteria

Rapport sur les normes ou critères non respectés

Regional Office/Bureau régional

Central East Region, Health Care Programs
300 Water St., 2nd Fl., S. Tower, Peterborough ON K9J 8M5
(705) 755-4500 or (800) 567-1045

Date of review/Date de l'inspection
April 30, May 1, 2, 4, 7, 9(exit), 2007

Long-Term Care Facility/Établissement de soins de longue durée
York Region Newmarket Health Care Centre

Address/Adresse

194 Eagle Street, Newmarket, Ontario, L3Y 1J6

Name and title of LTC Division representative/Nom et fonction du(de la) représentant(e) de la Division
Marsha Hardwick RN, BScN, CON(C)

Type of review/Genre d'inspection

☒ Annual Annuelle	☐ Complaint Investigation Enquête à la suite d'une plainte	☐ Post-sale Postérieure à la vente
☒ Follow-up Suivi	☐ Complaint investigation Follow-up Suivi d'une enquête à la suite d'une plainte	☐ Pre-license Préalable à la délivrance du permis
☐ Referral Visite d'un(e) conseiller(ère)	☐ Pre-sale Préalable à la vente	☐ Other (specify) Autre (précisez) _____

The following statements reflect the results of the facility operational review as based on Ministry of Health standards and criteria for resident care, programs and services in Long-Term Care facilities.

Les observations suivantes illustrent les résultats de l'inspection des opérations de l'établissement effectuée sur la base des normes et critères du ministère de la Santé en matière de soins aux Pensionnaires et de programmes et de services offerts dans les établissements de soins de longue durée.

Standards or criteria Normes ou critères	Review results Résultats de l'inspection	Date for corrective action Date de la mesure corrective
	The unmet standard/criteria B2.4 issued during the Annual Review of March 3, 6, 7, 8, 9, 10, 2006 was found to be in compliance at the time of the review. No unmet Standards or Criteria are issued as a result of this review.	

Received for the Facility by/Reçu pour l'établissement par

Signature of Health Care Programs Division representative/Signature
du (de la) Représentant(e) de la Division des programmes des soins de santé

Marsha Hardwick

Original: Health Care Programs Division
Original: Division des programmes des soins de santé

Copy: Long-Term Care Facility
Copie: Établissement de soins de longue durée



Ministry of Health
and Long-Term Care

Health System Accountability and
Performance Division

Facility Review Report

Ministère de la
Santé et des Soins de
longue durée

Division de la responsabilisation et
de la performance du système de
santé

Rapport 'inspection d'établissement

Long-Term Care Facility / Établissement de soins de longue durée

York Region Newmarket Health Care Centre

Governing body / Organisme responsable

REGIONAL MUNICIPALITY OF YORK

Administrator / Directeur général/directrice générale

Ms. Marlene Parsons

Approved capacity / Nombre de lits autorisés

132 beds

Type of review / Genre d'inspection

> Annual Review & Follow-up

Review date / Date de l'inspection

June 5, 2007

Facility Review Report

The mandate of the Ministry of Health is to ensure that residents in Ontario Long-Term Care Facilities receive quality care and service.

In order to achieve this goal, the Ministry has implemented its **Long-Term Care Facility Review Program** to monitor the quality of resident care and facilities services. Where Long-Term Care Facilities do not meet Ministry standards, as determined by facility reviews, the home is expected to correct any unmet standards or criteria.

The Long-Term Care Division of the Ministry of Health conducts ongoing quality of care reviews in all Long-Term Care Facilities throughout the Province of Ontario.

The **Report of Unmet Standards or Criteria** outlines the Ministry's review findings and the facility's review plan for corrective action. Reports are public documents and must be prominently displayed in all Long-Term Care facilities.

Any inquiries related to this program may be directed to:

Manager
Ministry of Health and Long-Term Care
Health System Accountability and Performance
Division
Performance Improvement and Compliance Branch
465 Davis Drive, 3rd Floor
Newmarket ON L3Y 8T2
Telephone – (905) 954-4700
Facsimile – (905) 954-4702

Toll Free – 1-800-486-4935

Rapport d'inspection d'établissement

Le mandat du ministère de la Santé est d'assurer aux pensionnaires des établissements de soins de longue durée de l'Ontario des soins et des services de qualité.

Afin d'atteindre cet objectif, le ministère a mis en oeuvre son **Programme d'inspections des établissements de soins de longue durée** pour surveiller la qualité des soins dispensés aux pensionnaires et des services offerts dans les établissements de soins de longue durée. Si, selon les inspections, les établissements de soins de longue durée ne satisfont pas aux normes du ministère, ils devront corriger tout cas de non-conformité aux normes et aux critères.

La Division des soins de longue durée du ministère de la Santé effectue régulièrement des inspections de la qualité des soins dans tous les établissements de soins de longue durée.

Le **Rapport sur les cas de non-conformité aux normes et aux critères** donne les résultats de l'inspection du ministère et le plan de l'établissement de soins de longue durée en ce qui a trait aux mesures correctives à prendre. Ce rapport est un document public et doit être affiché bien en vue dans l'établissement de soins de longue durée.

Pour de plus amples renseignements sur ce programme, écrivez à la personne suivante:

Directrice
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
465 Davis Drive, 3e étage
Newmarket ON L3Y 8T2
Téléphone: (905) 954-4700
Télécopier: (905) 954-4702

FACILITY REVIEW SUMMARY REPORT

Definition of Terms

The monitoring and evaluation process is based on the standards and criteria contained in the Long Term Care Facilities Program Manual. Each facility has a copy which the public may request to view.

The reviewer considers the following factors in concluding that a standard or criteria has not been met:

- ◆ Conditions have been observed that pose actual or potential serious risks to a resident's health, welfare or rights; and/or
- ◆ Conditions have been observed that are not as serious but are prevalent or recurring; and/or
- ◆ The facility has not made successful efforts to initiate corrective action; and/or
- ◆ Conditions have been identified during previous reviews, but have not been corrected within the negotiated time frame for corrective action.

STANDARD MET	STANDARD NOT MET
All criteria that were reviewed relating to the identified standard were found to meet the expectations.	One or more criteria that were reviewed relating to the identified standards, did not meet the expectations; and The identified deficiencies met the conditions for issuing a REPORT OF UNMET STANDARDS OR CRITERIA or AREA OF NON-COMPLIANCE .
RECOMMENDATION(S) DISCUSSED	REFERRAL MADE TO (appropriate discipline/specialty)
Criteria that were reviewed relating to the identified standard may or may not meet the expectations; but Identified deficiencies if applicable, do not meet the conditions for issuing a REPORT OF UNMET STANDARDS OR CRITERIA . Recommendations were discussed to enhance the quality of the care, programs and services provided to the residents.	Criteria reviewed relating to the identified standard may or may not meet the expectations. Criteria that were reviewed indicate the need for other expertise to determine compliance or to provide more in-depth review and assistance. A REPORT OF UNMET STANDARD OR CRITERIA may or may not be issued.

FACILITY REVIEW SUMMARY REPORT

Long-Term Care Facility: York Region Newmarket Health Centre

Date of Review: April 30, May 1, 2, 4, 7, 9, 2007

Type of Review: Annual Review & Follow-up

Updates on any care, programs and services being provided by the facility:

- Dr. Catherine Meunier, contracted Medical Director, May 2006
- Taz Karimjee appointed Coordinator Programs & Services, May 2006
- Tanja Schenkel appointed Registered Dietician, October 2006
- Awarded and implemented 8 additional beds for the New Convalescent Care Program, total beds 19
- Awarded Nursing Secretariat funding for Late Career Nurse Initiative for 8 nursing staff
- The following new equipment was purchased : 1 Sit to Stand lift, 11 hi-low beds, 11 high end mattresses, basins, housekeeping carts, 3 over bed tables, commodes, 20 lift slings & therapy equipment

All or some criteria related to the following standards were reviewed. Comments in the right column reflect the status of the standards at the time of the review AND ARE BASED ONLY ON CRITERIA WHICH WERE REVIEWED. Conclusions are based on observations and reviews of a selected sample of residents.

STANDARD	COMMENTS
Resident Safeguards	
There are mechanisms in place to promote and support residents' rights, autonomy, and decision-making.	Standard Met
There is a facility-specific written admission agreement in place to delineate the accommodation, care, services, programs and goods that will be provided to the resident and, the obligations of the resident with respect to their responsibilities and payment for service.	Standard Met

Resident Care and Services	
Each resident's needs for care and services are determined with the resident/representative through an interdisciplinary assessment process.	Standard Met
Each resident's care and services are planned with the resident/representative through an interdisciplinary planning process.	Standard Met Improved residents' plans of care
Each resident receives care and services consistent with his/her plan of care and with residents' rights outlined in the Bill of Rights.	Standard Met
There is ongoing monitoring and evaluation of each resident's care, services and care outcomes.	Standard Met
All significant information about each resident is documented in his/her record.	Standard Met Discussion held related to documentation in the residents' health care record
Nursing Services	
There is an organized program of nursing services to meet residents' nursing and personal care needs, consistent with the professional standards of practice of the College of Nurses of Ontario.	Standard Met Successful student placements including Seneca College, George Brown College, Board of Education & CDI College
Staff Education	
There is an organized orientation program that responds to the learning needs of new staff.	Standard Met
There is an organized in-service education program that responds to the assessed learning needs of staff.	Standard Met 60 staff attended Sensitivity Training 2 HCAs received RN diploma
Recreation and Leisure Services	
There are recreation and leisure services	Standard Met

organized to provide age-appropriate recreation, leisure, and education opportunities based on and responsive to the abilities, strengths, needs, interests and former lifestyle of the residents.	Implemented additional cross Resident Home Areas programming
Social Work Services	
There is an organized program of social work services, or arrangements are made to access available social work services to meet residents' psychosocial needs.	Standard Met
Spiritual and Religious Program	
There is an organized spiritual and religious care program to respond to the spiritual and religious needs and interests of the residents.	Standard Met
Therapy Services	
There is an organized program of therapy services or arrangements made to access available therapy services to meet residents' identified therapy needs.	Standard Met - Evidence of a strong physiotherapy program with very good documentation - Physiotherapy offered 6 days per week to Convalescent Care Residents
Volunteer Services	
There is an organized program of volunteer services.	Standard Met Strong volunteer program with 83 dedicated volunteers
Dental Services	
There is a co-ordinated program of dental services, or arrangements made to access dental services to meet residents' dental care needs.	Standard Met
Foot Care Services	
There is an organized program of foot care services, or arrangements are made to access foot care services to meet residents' needs.	Standard Met

Other Approved Programs	
Other programs/services provided by the facility are organized to provide services to respond to residents' identified needs/preferences.	Standard Met
Facility Organization and Administration	
The program and resources of the facility are organized to effectively manage the facility and each of its programs and services, in keeping with Ministry Acts Regulations, Policies and Directives.	Standard Met
There is a comprehensive, co-ordinated, facility-wide, program for monitoring, evaluating and improving the quality of accommodation, care, services, programs and goods provided by the facility.	Standard Met • Evidence of a strong CQI program • Continued participation on the CAO Benchmarking LTC Expert Panel
There are co-ordinated risk management activities designed to reduce and control actual or potential risks to the safety, security, welfare and health of individuals or to the safety and security of the facility.	Standard Met • Discussion held related to infection control • Participated in Regional Emergency Pandemic Exercise • Fall prevention classes offered two times per week
There is an organized system of records management which includes the components of collection, access, storage, retention and destruction of records.	Standard Met
Medical Services	
Medical services are organized to meet residents' medical needs, including assessment, planning and provision of residents' individualized medical care, consistent with professional standards of practice.	Standard Met • Evidence of regular physician assessment and documentation
Environmental Services	
Environmental services are organized to provide a safe, comfortable, clean, well-maintained environment for residents, staff and visitors.	Standard Met
The facility, including furnishings and	Standard Met

equipment, is maintained.	• Discussion held related to flooring
The facility, including furnishings and equipment, is kept clean.	Standard Met
Laundry services are organized to meet the linen and personal clothing needs of residents.	Standard Met
Dietary Services	
There is an organized program of dietary services to respond to residents' nutritional care needs and to provide safe, personally acceptable, nutritious food to residents.	Standard Met • Discussion held related food selection and safety • Food is enjoyed by the residents • Developed Fine Dining Task Force
Diagnostic Services	
The facility makes arrangements for diagnostic services to meet residents' needs as ordered by the residents' physicians.	Standard Met
Pharmacy Services	
There is an organized program for the provision of pharmacy services to meet the residents' identified needs.	Standard Met
There is an organized interdisciplinary pharmacy and therapeutics committee responsible for directing the facility's pharmacy program and services.	Standard Met
The prescription ordering and transmission of orders support the safe provision of drugs to residents.	Standard Met
The pharmacy service provides for the accurate, safe dispensing of prescription drugs and biologicals to meet residents' identified medication requirements.	Standard Met

A system of records for receipt and disposition of all drugs received by the facility is maintained in sufficient detail to enable accurate tracking, reconciliation and auditing, in accordance with applicable legislation.	Standard Met
All drugs and biologicals are stored under proper conditions of sanitation, temperature, light, humidity and security.	Standard Met
Disposal of drugs is in accordance with established Ministry policy.	Standard Met
There is a system for immediate reporting of each medication error and adverse drug reaction, with specific follow-up action to be taken.	Standard Met