



**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  
performance du système de santé  
Direction de l'amélioration de la  
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**Public Copy/Copie du public**

| <b>Report Date(s) /<br/>Date(s) du apport</b> | <b>Inspection No /<br/>No de l'inspection</b> | <b>Log # /<br/>Registre no</b> | <b>Type of Inspection /<br/>Genre d'inspection</b> |
|-----------------------------------------------|-----------------------------------------------|--------------------------------|----------------------------------------------------|
| Apr 22, 2015                                  | 2015_264609_0023                              | 002337-15                      | Complaint                                          |

**Licensee/Titulaire de permis**

BLUEWATER REST HOME INC.  
37792 Zurich-Hensall Rd RR #3 ZURICH ON N0M 2T0

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

BLUE WATER REST HOME  
LOT 21, HWY 84 R. R. #3 ZURICH ON N0M 2T0

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

CHAD CAMPS (609)

**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): April 16, 2015**

**During the course of the inspection, the inspector(s) spoke with two Cooks, one Food Service Manager (FSM) and three Residents.**

**The inspector(s) also reviewed standardized recipes, temperature logs, food committee minutes, voluntary plans of correction, took food temperatures and made dining room observations.**

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

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

**1 WN(s)**

**1 VPC(s)**

**0 CO(s)**

**0 DR(s)**

**0 WAO(s)**

| <b>NON-COMPLIANCE / NON - RESPECT DES EXIGENCES</b>                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                    |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Legend</b>                                                                                                                                                                                                                                                           | <b>Legendé</b>                                                                                                                                                                                                                                                                                     |
| WN – Written Notification<br>VPC – Voluntary Plan of Correction<br>DR – Director Referral<br>CO – Compliance Order<br>WAO – Work and Activity Order                                                                                                                     | WN – Avis écrit<br>VPC – Plan de redressement volontaire<br>DR – Aiguillage au directeur<br>CO – Ordre de conformité<br>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). | 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. |
| The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.                                                                                                                                                         | 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. 8. Policies, etc., to be followed, and records**

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

**s. 8. (1) Where the Act or this Regulation requires the licensee of a long-term care home to have, institute or otherwise put in place any plan, policy, protocol, procedure, strategy or system, the licensee is required to ensure that the plan, policy, protocol, procedure, strategy or system,**

**(a) is in compliance with and is implemented in accordance with applicable requirements under the Act; and O. Reg. 79/10, s. 8 (1).**

**(b) is complied with. O. Reg. 79/10, s. 8 (1).**



## Findings/Faits saillants :

1. The Licensee has failed to ensure that where the Act or the Regulation requires the licensee of a long-term care home to have, institute or otherwise put in place any plan, policy, protocol, procedure, strategy or system, the licensee is required to ensure that the plan, policy, protocol, procedure, strategy or system, is complied with.

During an interview an identified resident shared that the vegetables served at lunch and dinner are often cold.

Review of the November and December 2014 as well as the March 2015 Resident's Food Council minutes identified food temperatures as a concern.

Review of the home's policy titled "Temperature Records" revised September 2014 indicates temperatures are to be taken and recorded on the server Food Temperature Form before serving.

Food Temperature Forms revealed 67 percent of the log entries were not completed in a single server for the week of March 2-8, 2015. In another server 53 percent of the log entries were not completed for the week of March 23-29, 2015 and 43 percent of the log entries were not completed for the week of April 6-12, 2015 in another server.

The Food Service Manager confirmed in an interview that it is the home's expectation that the temperatures of all foods are to be taken and recorded in the server before serving and that this did not occur on the weeks of March 23-29, 2015, March 2-8, 2015 and April 6-12, 2015. [s. 8. (1) (b)]

## **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 the home's Temperature Records policy is complied with, to be implemented voluntarily.***



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**Issued on this 22nd day of April, 2015**

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

**Original report signed by the inspector.**