

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

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Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	_	Type of Inspection / Genre d'inspection
Aug 19, 2013	2013_190159_0020	H-000398- 13	Complaint

Licensee/Titulaire de permis

DEVONSHIRE ERIN MILLS INC.

195 DUFFERIN AVENUE, SUITE 800, LONDON, ON, N6A-1K7

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

ERIN MILLS LODGE NURSING HOME

2132 DUNDAS STREET WEST, MISSISSAUGA, ON, L5K-2K7

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 a Complaint inspection.

This inspection was conducted on the following date(s): July 22, 23, 2013

During the course of the inspection, the inspector(s) spoke with the administrator, the Director of Care, registered staff, Personal Support Workers (PSWs), dietary staff, and residents.

During the course of the inspection, the inspector(s) observed meal service, reviewed health records, menus and policies and procedure specific to nutrition and hydration.

The following Inspection Protocols were used during this inspection:



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Dining Observation

Nutrition and Hydration

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.)	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 LTCHA, 2007 S.O. 2007, c.8, s. 11. Dietary services and hydration Specifically failed to comply with the following:

s. 11. (2) Without restricting the generality of subsection (1), every licensee shall ensure that residents are provided with food and fluids that are safe, adequate in quantity, nutritious and varied. 2007, c. 8, s. 11. (2).



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Findings/Faits saillants:

1. Residents were not provided with food that was adequate in quantity, nutritious and varied. The serving sizes posted on the menu were not followed. On July 22, 2013 residents were served at lunch 1/3 portion of the submarine sandwich instead of one whole sandwich portion listed on the menu. The protein content of the sandwich was not adequate in quantity and nutritional value. The observation was confirmed and validated by the administrator and the dietary staff. [s. 11. (2)]

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 ensuring that the residents are provided with food and fluids that are safe, adequate in quantity, nutritious and varied, to be implemented voluntarily.

WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 71. Menu planning

Specifically failed to comply with the following:

s. 71. (4) The licensee shall ensure that the planned menu items are offered and available at each meal and snack. O. Reg. 79/10, s. 71 (4).

Findings/Faits saillants:



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1. On July 22, 2013 and July 23, 2013 residents on pureed diet were not offered all planned menu items at lunch. The pureed bread was listed on the planned menu, however bread was not served/offered to residents. The dietary staff confirmed that the pureed bread was on the menu but was not sent from the kitchen. Fruit cocktail dessert was listed on the planned menu, residents were served pineapple titbits for lunch dessert on July 23, 2013.

On July 22, 2013, and July 23, 2013 the planned lunch menu for the texture modified diets (minced and pureed diets) was not prepared and served. The food served at lunch did not offer a choice of hot and cold menu. Several menu changes (i.e pureed ham, mashed potatoes and corn was served instead of cottage cheese fruit plate) were made resulting in lack of variety and compromised food quality. The planned menu choices for pureed diets posted on week 2 cycle menu were not prepared and offered to residents.

The observations were validated by the dietary staff and the administrator. [s. 71. (4)]

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 ensuring that each resident is offered planned menu items at each meal and snack, to be implemented voluntarily.

WN #3: The Licensee has failed to comply with O.Reg 79/10, s. 72. Food production

Specifically failed to comply with the following:

s. 72. (3) The licensee shall ensure that all food and fluids in the food production system are prepared, stored, and served using methods to, (a) preserve taste, nutritive value, appearance and food quality; and O. Reg. 79/10, s. 72 (3).

Findings/Faits saillants:



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1. The texture of the minced and pureed beef, ham, and zucchini served at lunch meal July 22 2013 were not prepared to preserve taste, nutritive value, appearance and food quality. The consistency of the pureed food was sticky, and glossy. The texture of the minced lemon tart dessert was lumpy and not eye appealing. The pureed food served had an excessive amount of thickener and liquid added to it, affecting the texture, taste, appearance and nutritive value (reduced protein content). [s. 72. (3) (a)]

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 all food and fluids are prepared, stored, and served using methods which preserves taste, nutritive value, appearance and food quality, to be implemented voluntarily.

WN #4: The Licensee has failed to comply with O.Reg 79/10, s. 73. Dining and snack service

Specifically failed to comply with the following:

s. 73. (2) The licensee shall ensure that,

(b) no resident who requires assistance with eating or drinking is served a meal until someone is available to provide the assistance required by the resident. O. Reg. 79/10, s. 73 (2).

Findings/Faits saillants:

1. July 2013 on a specified date during the lunch meal service an identified resident was served meal who required assistance with eating, however the staff was not readily available to provide such help. The resident was left unattended for more than 10 minutes with the food on the table. The food awaiting assistance was found cold when the inspector touched the food plate. The resident was provided assistance only after the inspector spoke to the registered nurse. The "Eating" focus of the resident's plan of care directed staff that the resident needed to be totally feed by 1 staff. The Minimum Data Set assessment coded G1hA+4 identified the resident for total dependence. [s. 73. (2) (b)]



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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 ensuring residents who require assistance with eating or drinking only served a meal when someone is available to provide the assistance, to be implemented voluntarily.

Issued on this 20th day of August, 2013

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

Asha Sehgal