

#### **Ministry of Long-Term Care**

Long-Term Care Operations Division Long-Term Care Inspections Branch

#### **North District**

159 Cedar St, Suite 403 Sudbury, ON, P3E 6A5 Telephone: (800) 663-6965

### **Original Public Report**

Report Issue Date: September 13, 2024

**Inspection Number**: 2024-1360-0001

**Inspection Type:** 

Proactive Compliance Inspection

**Licensee:** Lady Dunn Health Centre

Long Term Care Home and City: Lady Dunn Health Centre (Wawa), Wawa

### **INSPECTION SUMMARY**

The inspection occurred onsite on the following date(s): August 19, 20, 21, 22, 2024

The following intake(s) were inspected:

Intake: #00123859 - Proactive Compliance Inspection

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

Resident Care and Support Services

Skin and Wound Prevention and Management

Food, Nutrition and Hydration

Residents' and Family Councils

Medication Management

Infection Prevention and Control

Safe and Secure Home

Prevention of Abuse and Neglect

Staffing, Training and Care Standards

Quality Improvement



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Residents' Rights and Choices Pain Management

### **INSPECTION RESULTS**

### **Non-Compliance Remedied**

**Non-compliance** was found during this inspection and was **remedied** by the licensee prior to the conclusion of the inspection. The inspector was satisfied that the non-compliance met the intent of section 154 (2) and requires no further action.

NC # remedied pursuant to FLTCA, 2021, s. 154 (2)

Non-compliance with: O. Reg. 246/22, s. 271 (1) (e)

Website

s. 271 (1) Every licensee of a long-term care home shall ensure that they have a website that is open to the public and includes at a minimum,

(e) the current report required under subsection 168 (1);

The licensee has failed to ensure that their website contained a copy of their continuous quality improvement report.

### **Rationale and Summary**

The home's website did not contain a copy of the continuous quality improvement report. The Quality Assurance lead indicated that they would post a copy of the home's quality improvement report once they could ensure that there were no privacy concerns within the report.

There was no risk to residents due to the home not having the continuous quality improvement report posted on the website.



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**Sources:** Review of the home's website; and, an interview with the Quality Assurance lead.

Date Remedy Implemented: August 21, 2024

### **COMPLIANCE ORDER CO #001 Food production**

NC #001 Compliance Order pursuant to FLTCA, 2021, s. 154 (1) 2.

Non-compliance with: O. Reg. 246/22, s. 78 (2) (c)

Food production

s. 78 (2) The food production system must, at a minimum, provide for,

(c) standardized recipes and production sheets for all menus;

## The inspector is ordering the licensee to comply with a Compliance Order [FLTCA, 2021, s. 155 (1) (a)]:

The licensee shall create a plan that ensures standardized recipes and production sheets for all menus are developed. The plan shall include but is not limited to:

- 1) A detailed description of how the home will ensure that the standardized recipes and production sheets are developed in a timely manner, including anticipated date of completion and who will participate in the development;
- 2) Develop a process identifying how the home's menu will be approved for nutritional adequacy by the home's Registered Dietitian, taking into account the current Dietary Reference Intakes as required by the Regulations and,
- 3) Develop an audit system to ensure that all cooks are utilizing the standardized



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recipes accurately under the guidance of the Dietary Services Manager or the RD. The auditing system that is developed must include a process for documenting deficiencies and implementing corrective action if deficiencies are identified.

#### Grounds

The licensee has failed to ensure that the food production system, at a minimum provided for, standardized recipes and production sheets for all menus.

During an interview with the Registered Dietitian (RD) they indicated that the menu was evaluated by utilizing the Canada Food Guide and the Best Practice guidelines of the Dietitians of Canada. The RD also stated that they could not evaluate the nutritional adequacy of the menu accurately as the home did not have standardized recipes and productions sheets for all menus.

An observation was conducted in the kitchen with the RD and the Inspector. There were no standardized recipes available.

While there was no immediate impact to the residents' at the time of the inspection, the home's failure to have standardized recipes and production sheets for all menus potentially placed the residents at risk for not receiving meals with adequate nutritional value and prevented the home's RD from being able to assess the nutritional adequacy of the menu.

Sources: Interviews with the RD and the cook and documents related to the current recipes being used in the kitchen.

This order must be complied with by November 22, 2024



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### REVIEW/APPEAL INFORMATION

**TAKE NOTICE**The Licensee has the right to request a review by the Director of this (these) Order(s) and/or this Notice of Administrative Penalty (AMP) in accordance with section 169 of the Fixing Long-Term Care Act, 2021 (Act). The licensee can request that the Director stay this (these) Order(s) pending the review. If a licensee requests a review of an AMP, the requirement to pay is stayed until the disposition of the review.

Note: Under the Act, a re-inspection fee is not subject to a review by the Director or an appeal to the Health Services Appeal and Review Board (HSARB). The request for review by the Director must be made in writing and be served on the Director within 28 days from the day the order or AMP was served on the licensee.

The written request for review must include:

- (a) the portions of the order or AMP in respect of which the review is requested;
- (b) any submissions that the licensee wishes the Director to consider; and
- (c) an address for service for the licensee.

The written request for review must be served personally, by registered mail, email or commercial courier upon:

#### **Director**

c/o Appeals Coordinator Long-Term Care Inspections Branch Ministry of Long-Term Care 438 University Avenue, 8<sup>th</sup> floor Toronto, ON, M7A 1N3



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e-mail: MLTC.AppealsCoordinator@ontario.ca

If service is made by:

- (a) registered mail, is deemed to be made on the fifth day after the day of mailing (b) email, is deemed to be made on the following day, if the document was served after 4 p.m.
- (c) commercial courier, is deemed to be made on the second business day after the commercial courier received the document

If the licensee is not served with a copy of the Director's decision within 28 days of receipt of the licensee's request for review, this(these) Order(s) is(are) and/or this AMP is deemed to be confirmed by the Director and, for the purposes of an appeal to HSARB, the Director is deemed to have served the licensee with a copy of that decision on the expiry of the 28-day period.

Pursuant to s. 170 of the Act, the licensee has the right to appeal any of the following to HSARB:

- (a) An order made by the Director under sections 155 to 159 of the Act.
- (b) An AMP issued by the Director under section 158 of the Act.
- (c) The Director's review decision, issued under section 169 of the Act, with respect to an inspector's compliance order (s. 155) or AMP (s. 158).

HSARB is an independent tribunal not connected with the Ministry. They are established by legislation to review matters concerning health care services. If the licensee decides to request an appeal, the licensee must give a written notice of appeal within 28 days from the day the licensee was served with a copy of the order, AMP or Director's decision that is being appealed from. The appeal notice must be given to both HSARB and the Director:



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#### **Health Services Appeal and Review Board**

Attention Registrar 151 Bloor Street West, 9<sup>th</sup> Floor Toronto, ON, M5S 1S4

#### **Director**

c/o Appeals Coordinator
Long-Term Care Inspections Branch
Ministry of Long-Term Care
438 University Avenue, 8<sup>th</sup> Floor
Toronto, ON, M7A 1N3
e-mail: MLTC.AppealsCoordinator@ontario.ca

Upon receipt, the HSARB will acknowledge your notice of appeal and will provide instructions regarding the appeal and hearing process. A licensee may learn more about the HSARB on the website <a href="https://www.hsarb.on.ca">www.hsarb.on.ca</a>.