



**Inspection Report
under the Long-Term
Care Homes Act, 2007**

**Rapport d'inspection
prévus le Loi de 2007
les foyers de soins de
longue durée**

Ministry of Health and Long-Term Care
Health System Accountability and Performance Division
Performance Improvement and Compliance Branch

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**Ministère de la Santé et des Soins de
longue durée**

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Public Copy/Copie Public

Date(s) of inspection/Date de l'inspection	Inspection No/ d'inspection	Type of Inspection/Genre d'inspection
Dec. 20 & 21, 2010	2010_135_9549_07Dec163106	L-01724-Dietary Complaint

Licensee/Titulaire

Corporation of the County of Grey 595 9th Avenue East Owen Sound Ontario, N4K 3E3

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

Lee Manor Home, 875 6th St. East Owen Sound ,Ontario N4K 5W5

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

Bonnie MacDonald #135

Inspection Summary/Sommaire d'inspection

The purpose of this inspection was to conduct a Dietary complaint review related to the home running out of food and resident losing weight.

During the course of the inspection, the inspector spoke with: Administrator, Director of Care, Food Services Manager, Dietitian, Registered Nursing staff, Dietary staff, and Residents and Complainant.
A review of resident's record was completed. Dinner and snack service were observed on the secured unit on first floor on Dec. 20 and 21, 2010.

The following Inspection Protocols were used in part or in whole during this inspection:

Food Quality
Dining Observations
Snack Observation
Nutrition and Hydration

☒ Findings of Non-Compliance were found during this inspection. The following actions were taken:

WN=3
VPC=2

NON- COMPLIANCE / (Non-respectés)

Definitions/Définitions

WN – Written Notifications/Avis écrit
VPC – Voluntary Plan of Correction/Plan de redressement volontaire
DR – Director Referral/Régisseur envoyé
CO – Compliance Order/Ordres de conformité
WAO – Work and Activity Order/Ordres: travaux et activités

The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.

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 suivant constituer un avis d'écrit de l'exigence prévue le paragraphe 1 de section 152 de les foyers de soins de longue durée.

Non-respect avec les exigences sur le *Loi de 2007 les foyers de soins de longue durée* à trouvé. (Une exigence dans le loi comprend les exigences contenues dans les points énumérés dans la définition de "exigence prévue par la présente loi" au paragraphe 2(1) de la loi.

WN #1: The Licensee has failed to comply with O.Reg. 79/10, s. 71(4)

The licensee shall ensure that the planned menu items are offered and available at each meal and snack.

Findings:

1. Dec. 21/10 Pm. Snack Service on secured unit first floor; grape juice was not provided on the snack cart as per the planned snack menu.
2. Dinner Dec. 20/10 on the secured unit first floor dining room; the following items were not available according to the planned menu: Puree noodles, glazed parsnips, minced parsnips and chopped roast potato.

Inspector ID #: 135

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 menu items as per the planned menu are available at snack and meals, to be implemented voluntarily.

WN #2: The Licensee has failed to comply with O.Reg. 79/10, s. 72(2)(d)(g)

The food production system must, at a minimum, provide for,
(d) preparation of all menu items according to the planned menu;
(g) documentation on the production sheet of any menu substitutions.

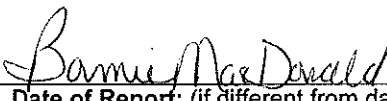
Findings:

1. Dinner Dec. 20/10 the following items were not prepared according to the planned menu: Puree noodles, glazed parsnips, minced parsnips and chopped roast potato.
2. Nov. 29-Dec 5/10-11 menu changes were not documented on the production sheets used to guide staff in food production. i.e. Mon. Nov. 29/10 Banana parfait at lunch changed to Tapioca pudding. Tues. Nov. 30/10 iced brownies at lunch changed to assorted squares. Lunch Thurs. Dec. 2/10 vegetable Lasagna changed to cheese cannelloni and Sunday Dec. 5/10, Cream of Asparagus soup changed to Chicken and Rice Soup.



Inspector ID #:	135
Additional Required Actions: VPC - pursuant to the <i>Long-Term Care Homes Act, 2007</i> , 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 all menu items are prepared according to the planned menu and menu substitutions are documented on food production sheets, to be implemented voluntarily.	

WN #3: The Licensee has failed to comply with O.Reg. 79/10, s. 73(1)5.9. Every licensee of a long-term care home shall ensure that the home has a dining and snack service that includes, at a minimum, the following elements: 5. A process to ensure that food service workers and other staff assisting residents are aware of the residents' diets, special needs and preferences. 9. Providing residents with any eating aids, assistive devices, personal assistance and encouragement required to safely eat and drink as comfortably and independently as possible	
Findings: 5. Dinner Dec. 20, 2010 in the secured dining room, 13 of 24 residents (54.2%) observed did not receive the correct diet/special needs as per their Nutritional Plans of Care. i.e. Resident who is allergic to mushrooms received vegetables of snow peas and mushrooms. Two residents did not receive double portions and two residents received 125 mls. of milk, rather than the 250 mls. as per the diet list. 9. Dinner Dec. 20/10 in the secured dining room 1st floor; three residents were not provided the following assistive eating devices as per their Plans of Care: i.e. One did not receive a gripper mat; one was not provided curved soup spoons or lipped plate, and one was provided a two handled cup that did not have a lid.	
Inspector ID #:	135
Additional Required Actions: VPC - pursuant to the <i>Long-Term Care Homes Act, 2007</i> , 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 are provided the correct diets, special needs and assistive devices as per their plans of care, to be implemented voluntarily.	

Signature of Licensee or Representative of Licensee Signature du Titulaire du représentant désigné		Signature of Health System Accountability and Performance Division representative/Signature du (de la) représentant(e) de la Division de la responsabilisation et de la performance du système de santé.	
			
Title:	Date:	January 14, 2011 Date of Report: (if different from date(s) of inspection).	