



**Ministry of Health and  
Long-Term Care**

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

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

**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  
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**Division de la responsabilisation et de la  
performance du système de santé  
Direction de l'amélioration de la  
performance et de la conformité**

**Public Copy/Copie du public**

<b>Report Date(s) / Date(s) du Rapport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / Registre no</b>	<b>Type of Inspection / Genre d'inspection</b>
Mar 6, 2014	2014_200148_0008	O-000123- 14	Complaint

**Licensee/Titulaire de permis**

1663432 ONTARIO LTD.  
2212 GLADWIN CRESCENT, UNIT A-9, SUITE 200, OTTAWA, ON, K1B-5N1

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

MANOIR MAROCHEL  
949 MONTREAL ROAD, OTTAWA, ON, K1K-0S6

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

AMANDA NIXON (148)

**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): February 28 and March 3, 2014, on site.**

**During the course of the inspection, the inspector(s) spoke with the home's Administrator, Director of Care, Nutritional Manager, Cooks, Food Service Workers (FSW), Personal Support Workers and residents.**

**During the course of the inspection, the inspector(s) reviewed the home's menu cycle, menu approval, production sheets and food temperature monitoring documents. The Inspector also observed two meal services over the course of the inspection. In addition, the home's complaints process was reviewed.**

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

**Food Quality**

**Nutrition and Hydration**

**Reporting and Complaints**

**Findings of Non-Compliance were found during this inspection.**



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**NON-COMPLIANCE / NON - RESPECT DES EXIGENCES**

<b>Legend</b>	<b>Legendé</b>
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 O.Reg 79/10, s. 72. Food production**

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

**s. 72. (2) The food production system must, at a minimum, provide for, (d) preparation of all menu items according to the planned menu; O. Reg. 79/10, s. 72 (2).**

**Findings/Faits saillants :**



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1. The licensee failed to ensure that the food production system must, at a minimum, provide for, preparation of all menu items according to the planned menu.

The lunch meal service was observed on Friday, February 28, 2014. The planned menu for the puree texture modification included the preparation of puree macaroni in tomato sauce and puree fish sticks, along with puree bread. As observed at the lunch meal, puree fish sticks were not prepared as per the planned menu. A FSW, responsible for serving the meal, reported that resident's on a puree texture modification would be served puree macaroni in tomato sauce and that there was no second choice of puree entree. In addition, no puree bread was prepared as per the planned menu and was therefore not available for resident's receiving a puree texture modification.

The inspector spoke with the cook responsible for the preparation of the lunch meal on February 28, 2014. The cook reported that he/she does not prepare any puree bread as he/she understands that resident's do not like or consume the puree bread. In addition, the cook reported that the puree fish item was not prepared due to the fact that only 1-2 portions are needed and he/she would have needed to open a new bag of fish sticks to prepare the puree portions. [s. 72. (2) (d)]

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**WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 100. Every licensee of a long-term care home shall ensure that the written procedures required under section 21 of the Act incorporate the requirements set out in section 101. O. Reg. 79/10, s. 100.**

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**Findings/Faits saillants :**



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1. The licensee failed to comply with O. Regulation 79/10, s.100, whereby the licensee did not ensure that the written procedures for complaints, as required by section 21 of the Act, incorporates the requirements set out in section 101 of Regulations 79/10.

In accordance with LTCHA 2007, S.O. 2007, c.8, s.21 and O. Regulation 79/10, s. 100 and s.101, every licensee shall ensure that there are written procedures for initiating and dealing with complaints. The written procedure must include the requirements outlined in section 101 of the Regulations.

Upon request for the home's complaints procedure, the home's Administrator provided a policy entitled Complaints Procedure effective, January 2014. The policy describes the steps for residents and family members, to initiate a complaint through staff members, management, resident council, a suggestions/concerns mail box or the Ministry of Health and Long Term Care.

The policy does not contain information related to how complaints will be dealt with in the home or the requirements of section 101 of the Regulations. [s. 100.]

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**Issued on this 6th day of March, 2014**

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

*Amanda Nixon RD*