



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
Compliance Branch

Division de la responsabilisation et de la
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Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Aug 1, 2013	2013_191107_0008	H-000240- 13	Complaint

Licensee/Titulaire de permis

THE REGIONAL MUNICIPALITY OF NIAGARA
2201 ST. DAVID'S ROAD, THOROLD, ON, L2V-4T7

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

NORTHLAND POINTE
2 Fielden Avenue, PORT COLBORNE, ON, L3K-6G4

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

MICHELLE WARRENER (107)

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): July 29, 30, 2013

A follow up to an outstanding compliance order for regulation 73(1)9, issued on inspection H-001698-12, was also completed during this complaint inspection.

During the course of the inspection, the inspector(s) spoke with residents, family members, the Director of Care, Nutrition Manager, Registered Dietitian, Registered nursing staff, and front line nursing and dietary staff

During the course of the inspection, the inspector(s) observed two lunch and one dinner meal services, reviewed the clinical health records for several residents, reviewed relevant policies and procedures, and observed part of the food production system

The following Inspection Protocols were used during this inspection:

Dining Observation

Food Quality

Nutrition and Hydration

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES	
Legend	Legendé
WN – Written Notification	WN – Avis écrit
VPC – Voluntary Plan of Correction	VPC – Plan de redressement volontaire
DR – Director Referral	DR – Aiguillage au directeur
CO – Compliance Order	CO – Ordre de conformité
WAO – Work and Activity Order	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.)

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

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).

Findings/Faits saillants :

1. [LTCHA, 2007, S.O. 2007, c.8, s. 11.(2)]

Not all residents were provided with food and fluids that were safe at the lunch meal July 29 and the supper meal July 30, 2013.

1. Resident #002 required a certain consistency of thickened fluids (as per the dining room diet list and confirmation by staff), however, the resident was being fed a consistency of thickened fluids that was thinner than required at the supper meal. Nursing staff were not aware that the resident required thicker fluids and stated they had been given the fluids by the dietary staff. Dietary staff then stated that nursing staff were required to provide additional thickener at the table for this resident.

2. The texture of the pureed beef stir-fry at the lunch meal July 29, 2013 was too chunky and contained some chunky bits of foods (not smooth). The texture of the pureed apple crisp at the supper meal July 30, 2013 was too chunky and was not smooth, creating a risk for choking for residents requiring a pureed menu. [s. 11. (2)]



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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 with ensuring that 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 :



1. [O.Reg. 79/10, s. 71.(4)]

Not all residents were offered the planned menu items at the lunch meals July 29, 30, and supper meal July 30, 2013.

1. The planned portion size of some menu items was not offered to residents at three of three meals monitored.

The planned menu required a #8 scoop of minced eggs, however, a #6 scoop (larger) was used (direction on scoop size was not provided to staff for a resident who required a specialized menu); a #6 scoop was required for the beef stir fry, however, a #8 scoop was used (smaller); a #8 scoop was planned for the mashed potatoes, however, a #6 scoop was used (larger); 250ml of milk was planned, however, 125ml milk was offered to residents; a #8 scoop of mashed potatoes was required, however, a #12 scoop was used (smaller); a #10 scoop of minced broccoli was required, however, a #8 scoop was used (larger); a #10 scoop of minced pork with gravy was required, however, a #6 scoop was used (larger); a #10 scoop of pureed pork with gravy was required, however, a #12 scoop was used (smaller); a #10 scoop of minced carrots was required, however, a #8 scoop was used (larger); a #8 scoop was required for the pureed salad, however, a #10 scoop was used (smaller); a #10 scoop was required for the pureed salad, however, a #16 scoop was used (smaller).

2. The planned menu required whole wheat bread and pureed bread to be offered to residents with the supper meal July 30, 2013. The pureed bread was prepared, however, was not available for service and bread was only provided to one resident who specifically asked for it. The bread was not offered to residents according to the planned menu. [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 with ensuring that the planned menu items are offered and available 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



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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).

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).

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,
(b) prevent adulteration, contamination and food borne illness. O. Reg. 79/10, s.
72 (3).

Findings/Faits saillants :



1. [O.Reg. 79/10, s. 72.(2)(d)]

Not all menu items were prepared according to the planned menu.

1. Recipes were not consistent with the items being offered to residents at the lunch meals July 29, 30, and supper meal July 30, 2013.

i) The recipe for the sliced egg plate required 2 eggs, green lettuce leaf, carrot sticks, pickles and a fruit or vegetable item. The sliced egg plate offered to residents did not include the carrot sticks, fruit/vegetable item, or the lettuce leaf. Residents voiced concerns to the inspector about the egg plate looking "sparse" and "not very substantial".

ii) The mixed green salad recipes called for romaine and green leaf lettuce or iceberg lettuce with red pepper and green onion, or iceberg with cucumber, fresh carrots, and red peppers. The salad was the same at both lunch meals and contained only iceberg lettuce with a few shreds of carrot and/or red cabbage. Red pepper, green onions and carrots were not available nor used in the preparation of the salads.

iii) A specialized menu identified only peaches for the lunch meal July 29, 2013, however, mandarin magic was served for both the regular and specialized menu.

iv) The beef stir fry recipe included strips of mixed peppers, however, frozen chunks of peppers and onions were used. Once cooked, the vegetables reduced down in size and the plate again appeared sparse at the lunch meal July 29, 2013.

v) The recipe for the chicken sandwich identified only chicken and mayonnaise, however, other items were added to the sandwich and the recipe was not adjusted.

vi) The planned menu identified pureed garden salad to accompany the pureed spaghetti at the supper meal July 30, 2013, however, pureed potato salad was served with the spaghetti. Staff stated that the item was pureed garden salad and did not inform residents that it was potato salad. The meal combination served to residents (spaghetti and potato salad) provided varying nutritional content than that of the planned menu (more carbohydrates, calories, etc). [s. 72. (2) (d)]

2. [O.Reg. 79/10, s. 72.(3)(a)]

Not all food was prepared, stored, and served using methods that preserved taste, nutritive value, appearance and food quality.

1. The Nutrition Manager stated the home cooks some menu items the day prior to meal service, then cools the foods and reheats for service the next day. Food is exposed to heat on multiple occasions which reduces the nutritive value, taste and food quality.

2. The same level of quality was not provided for the modified texture diets (minced and pureed) as for some of the regular menu. Some foods for the regular menu were



prepared and served on the same day, just prior to the meal service. The texture modified menus were prepared from leftovers (food that was sent to the serveries, hot held during the meal service, and then returned to the kitchen) which were then cooled, texture modified, frozen and re-heated the next time the foods were on the menu. Foods were exposed to heat on multiple occasions, thereby reducing nutritive value, taste and food quality.

3. A protein choice (as per Canada's Food Guide) was not included in the supper meal July 30, 2013. Pasta with only tomato sauce was served at the supper meal. Residents voiced concerns to the inspector about not having a protein choice included with the meal. The original planned menu included a protein choice, however, this was removed, resulting in reduced nutritive value of the meal. [s. 72. (3) (a)]

3. [O.Reg. 72.(3)(b)]

Not all foods were prepared, stored and served using methods that prevented contamination and food borne-illness.

1. The home was using leftover food that had been hot held, used at meal service, cooled, texture modified, frozen and then reheated (and as per discussion with the Nutrition Manager, may also have been cooked and cooled the day prior to the first time it was served) for making minced and pureed meals. This method exposes foods to multiple steps and opportunities for the development of food borne-illness.

Temperatures were not taken during the cooling process. The home's method of preparing minced and pureed foods from leftovers incurs risk for food borne-illness.

2. The home's policy 'Leftovers D040517' did not include direction to staff on the use of leftovers with respect to texture modified foods nor on the additional risks related to texture modified foods. [s. 72. (3) (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 with ensuring compliance with regulations, s. 72.(2)(d), s. 72.(3)(a), and s. 72.(3)(b), to be implemented voluntarily.

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



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Specifically failed to comply with the following:

s. 73. (1) 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:

6. Food and fluids being served at a temperature that is both safe and palatable to the residents. O. Reg. 79/10, s. 73 (1).

s. 73. (1) 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:

8. Course by course service of meals for each resident, unless otherwise indicated by the resident or by the resident's assessed needs. O. Reg. 79/10, s. 73 (1).

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. [O.Reg. 79/10, s. 73.(1)6]

Not all food and fluids were served at a temperature that was both safe and palatable to the residents. Five trays were portioned for residents eating in their rooms during the supper meal service July 30, 2013. Hot entrees and beverages were portioned onto trays on a cart and then the cart was taken through an identified home area to the residents' rooms. Not all of the food and beverages were covered to help maintain the food temperatures and to prevent contamination. Foods were portioned at 1738 hours and later probed by the inspector prior to the last tray being delivered at 1804 hours. The temperature of the coffee was 94 degrees Fahrenheit (F) and the entree was probed at 102 degrees F. Residents in the dining rooms had their meals served at 180 degrees F (as per the temperature monitoring records) and coffee was served fresh and hot. The home's 'Temperature, Presentation, Taste Recording policy D040516 page 3' stated that hot beverages were to be served at 185 degrees F and entrees were to be served at 150 degrees F. [s. 73. (1) 6.]

2. [O.Reg. 79/10, s. 73.(1)8]

The lunch meal July 29, 2013 was not served course by course for some residents in an identified home area. Residents who were being assisted by staff with eating had their entrees placed on the tables while eating their soup and their desserts placed on the table prior to completion of the entree. The service appeared rushed and the soup was cold by the time it was taken at the end of the meal. [s. 73. (1) 8.]

3. [O.Reg.79/10, s. 73.(2)(b)]

Beverages were placed on tables in three of three dining areas reviewed, at least 15 minutes prior to meal service and when residents were not yet in the dining area. Residents requiring assistance with eating had their beverages placed prior to assistance being available. [s. 73. (2) (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 with regulations, s. 73.(1)6, s. 73.(1)8, and s. 73.(2)(b), to be implemented voluntarily.



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Issued on this 19th day of August, 2013

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

M Warren, RD