



**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  
performance du système de santé  
Direction de l'amélioration de la  
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## Public Copy/Copie du public

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<b>Report Date(s) / Date(s) du apport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / Registre no</b>	<b>Type of Inspection / Genre d'inspection</b>
Mar 6, 2015	2015_343585_0003	H-001676-14	Complaint

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### **Licensee/Titulaire de permis**

PARK LANE TERRACE LIMITED  
284 CENTRAL AVENUE LONDON ON N6B 2C8

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

PARK LANE TERRACE  
295 GRAND RIVER STREET NORTH PARIS ON N3L 2N9

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

LEAH CURLE (585)

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## 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): January 26, 27, 2015**

**During the course of the inspection, the inspector(s) spoke with residents, dietary staff, the Food Service Supervisor, Registered nursing staff, unregulated nursing staff, the office manager, the staffing/ward clerk, the Director of Care, and the Administrator.**

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

**During the course of this inspection, Non-Compliances were issued.**

**1 WN(s)**

**1 VPC(s)**

**0 CO(s)**

**0 DR(s)**

**0 WAO(s)**



**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 O.Reg 79/10, s. 77. Food service workers, minimums**



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

- s. 77. (1) Every licensee of a long-term care home shall ensure that there are sufficient food service workers for the home to meet the minimum staffing hours as calculated under subsection (2) for,**
- (a) the preparation of resident meals and snacks; O. Reg. 79/10, s. 77 (1).**
  - (b) the distribution and service of resident meals; O. Reg. 79/10, s. 77 (1).**
  - (c) the receiving, storing and managing of the inventory of resident food and food service supplies; and O. Reg. 79/10, s. 77 (1).**
  - (d) the daily cleaning and sanitizing of dishes, utensils and equipment used for resident meal preparation, delivery and service. O. Reg. 79/10, s. 77 (1).**

**Findings/Faits saillants :**

1. The licensee failed to ensure that there were sufficient food service workers for the home to meet the minimum staffing hours in accordance to what was outlined in O. Reg 79/10 s. 77 (2).

The home had a licensed bed capacity of 132 beds, which was confirmed by the Administrator.

Based on O. Reg 79/10 s. 77 (2), the minimum staffing hours for food service workers required by the licensee were as follows:

$M = A \times 7 \times 0.45$ , where 'M' was the minimum number of staffing hours per week, and 'A' was the licensed bed capacity in the home, if the home was at an occupancy of 97% or more. At an occupancy of 97% or more, the licensee was required to provide a minimum of 415.8 food service worker hours per week.

A) The home's scheduling documentation, 'Unit Employee Schedule – Park Lane Terrace Dietary', which identified shifts and hours worked by food service workers and cooks, was reviewed and revealed that the home was not meeting the minimum requirements for dietary staffing hours.

- i) In the week of November 24–30, 2014, 359.5 food service worker hours were provided, resulting in a shortage of 56.3 hours.
- ii) In the week of December 1-7, 2014, 330.25 food service worker hours were provided, resulting in a shortage of 85.55 hours.



iii) In the week of December 8-14, 2014, 291.25 food service worker hours were provided, resulting in a shortage of 124.55 hours.

iv) In the week of December 15-21, 2014, 230.75 food service worker hours were provided, resulting in a shortage of 185.05 hours.

The Administrator and Food Service Supervisor reported that the home was experiencing difficulty holding a sufficient amount of dietary staff to fulfill the required food service worker hours. The home attempted to make up additional food service worker hours where possible but were not able to make up all of the hours. At the time of the inspection, the home was working with their corporate consultants to develop a new deployment model and recruitment plan to address the food service worker shortages.

B) The home's supper meal service was scheduled for 1700 hours in all four dining areas.

On January 26, 2015, in the Twin River dining room, a dietary aide reported that from November 2014 to the beginning of January 2015, approximately twice a week, there was a shortage of dietary staff to serve meals on time. During a shortage, the Twin River dining room would be served at 1630 or 1645 hours to ensure other dining rooms were served at 1700 hours. One resident reported that there were occasions when supper was served before 1700 hours. Registered nursing staff in this home area also reported that when the dietary department was short staffed, meals were served before 1700 hours. The Staffing/Ward Clerk and Food Service Supervisor confirmed this was the practice in the home. The Administrator stated meals were not to be served before 1700 hours.

In review of the home's dietary staffing schedule, three dietary staff worked during the supper hours on November 24, November 27, and December 1, 2014. The Food Service Supervisor and Staffing/Ward Clerk reported that at minimum, four dietary staff were required make it possible for supper meal service to occur at 1700 hours in all four dining rooms.

C) The staffing schedule was reviewed and identified that:

i) On December 12, 2014, no food service worker worked the grocery shift.

ii) On December 13 and 14, 2014 no cook worked the 1000 to 1800 hour shifts.

The Food Service Supervisor stated that when the dietary department was short staffed,



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they would cook or do the grocery shift to cover the shortage. This resulted in the Food Service Supervisor being taken away from completing their supervisor duties. [s. 77. (1)]

***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 and ensuring that there are sufficient food service workers for the home to meet the minimum staffing hours as calculated under subsection (2) for, (a) the preparation of resident meals and snacks; (b) the distribution and service of resident meals; (c) the receiving, storing and managing of the inventory of resident food and food service supplies; and (d) the daily cleaning and sanitizing of dishes, utensils and equipment used for resident meal preparation, delivery and service, to be implemented voluntarily.***

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Issued on this 6th day of March, 2015

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

**Original report signed by the inspector.**