

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

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

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

Health System Accountability and Performance Division Performance Improvement and Compliance Branch

Ministère de la Santé et des Soins de longue durée

Division de la responsabilisation et de la performance du système de santé Direction de l'amélioration de la performance et de la conformité Hamilton Service Area Office 119 King Street West, 11th Floor Hamilton ON L8P 4Y7

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	Licensee Copy/Copie du Titulaire Public Copy/Copie Public			
Date(s) of inspection/Date de l'inspection	Inspection No/ d'inspection	Type of Inspection/Genre d'inspection		
September 7, 2010	2010_171_2853_07Sep103158	Complaint – H-00683		
Licensee/Titulaire				
Liuna Local 837 Nursing Home (Hamilton) Corporation 44 Hughson Street South, Hamilton ON L8N 2A7 Fax: 905-522-9310				
Long-Term Care Home/Foyer de soins de longue durée				
Queen's Garden 80 Queen St North, Hamilton ON L8R 3P6 Fax: 905-972-8457				
Name of Inspector(s)/Nom de l'inspecteur(s)				
Elisa Wilson, LTC Homes Inspector – Dietary #171				
Inspection Summary/Sommaire d'inspection				



Ministry of Health and Long-Term Care

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The purpose of this inspection was to conduct a complaint inspection. The complaint was received by the Hamilton Services Area Office through the Info-line. The complainant's concern was in regards to food quality and the Home's response to complaints.

During the course of the inspection, the inspector spoke with: the administrator, the director of care, the foodservices manager, foodservices staff, registered staff, and residents.

During the course of the inspection, the inspector: observed lunch service on September 7, 2010 and reviewed resident council and food committee minutes from the past six months.

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

\boxtimes	Findings of Non-Compliance	were found during this inspection.	The following action was taken
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[1] WN [1] VPC

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 LTCHA, 2007, S.O. 2007, c. 8, s. 84.

Every licensee of a long-term care home shall develop and implement a quality improvement and utilization review system that monitors, analyzes, evaluates and improves the quality of the accommodation, care, services, programs and goods provided to residents of the long-term care home.

Findings:

1. The Home does not have a quality improvement and utilization review system for food services that monitors, analyzes, evaluates and improves the quality of service and goods provided to the residents. During the visit on September 7, 2010, seven randomly selected residents were asked if they had



Inspector ID #:

voluntarily.

Title:

171

Additional Required Actions

Ministry of Health and Long-Term Care

Date:

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participated in a foodservice quality survey or other data gathering methods to determine their satisfaction with the food and foodservices. None of the residents were aware of a survey or remember being asked for their opinion on the food or foodservices. Two registered staff were not able to recall a survey being provided to residents regarding the food or food services. There were no past survey results on file or any other evaluations of satisfaction, no written description of the system including goals, objectives, policies, procedures or protocols and no documentation regarding improvements made to quality and the names of persons who participated in evaluations. There was one documented food committee meeting attended by 4 residents in May 2010. The minutes of the meeting include some changes made to the menu based on resident comments but does not include monitoring, analyzing or evaluating the improvements suggested or improvements already completed.

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.
	Eliza Wilson

Date of Report: (if different from date(s) of inspection).

Oct 12,2010

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 c. 8, s. 84, to be implemented