



**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  
Performance Improvement and Compliance Branch

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conformité

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Date(s) of inspection/Date de l'inspection	Inspection No/ d'inspection	Type of Inspection/Genre d'inspection
April 27-28, 2011	2011_171_2922_27Apr103452	Complaint – H-000775-11

**Licensee/Titulaire**  
Liuna Local 837 Nursing Home (Ancaster) Corporation, 44 Hughson Street South, Hamilton ON, L8N 2A7

**Long-Term Care Home/Foyer de soins de longue durée**  
Regina Gardens, 536 Upper Paradise, Hamilton ON, L9C 5E3

**Name of Inspector(s)/Nom de l'inspecteur(s)**  
Elisa Wilson (#171)

**Inspection Summary/Sommaire d'inspection**

The purpose of this inspection was to conduct a complaint inspection regarding food quality.

During the course of the inspection, the inspector spoke with: the administrator, the director of care, the foodservices manager, registered staff, dietary aides, personal support workers, residents and resident family members.

The inspector observed lunch meal service on April 27, 2011 in one Home area and taste tested all items being served to residents for all diets. The inspector reviewed details of selected resident plans of care, reviewed the therapeutic menus, the raw food budget and minutes from the food committee meetings. The inspector interviewed residents regarding food quality.

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. The following action was taken:  
3 WN  
3 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.6(7). The licensee shall ensure that the care set out in the plan of care is provided to the resident as specified in the plan.

**Findings:**

1. The plan of care for an identified resident indicates staff are to offer specific food items at meal time. At the lunch meal service on April 27, 2011 the resident was not offered these particular items. The resident and a staff person in the dining room confirmed these items were not offered. The food items were available in the servery and notes regarding the resident's preferences were listed on the Dining Service Report. This resident is at high nutrition risk and was not satisfied with the meal.
2. The plan of care for an identified resident indicates Enteric precautions are necessary if experiencing specific gastro-intestinal symptoms. The plan of care indicates that specific interventions are to be followed when the resident was experiencing symptoms, however enteric precautions were not employed and the specific interventions were not followed. The registered staff in the home area confirmed that enteric precautions were not being used at this time.

**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 to ensure that the care set out in the plan of care is provided to the resident as specified in the plan, to be implemented voluntarily.

**WN #2:** The Licensee has failed to comply with O. Reg. 79/10, s.26(4)(a)(b). The licensee shall ensure that a registered dietitian who is a member of the staff of the home,

- (a) completes a nutritional assessment for all residents on admission and whenever there is a significant change in a resident's health condition; and
- (b) The licensee shall ensure that a registered dietitian who is a member of the staff of the home, assesses the matters referred to in paragraphs 13 and 14 of subsection (3).

**Findings:**

1. The quarterly assessment in December 2010 for an identified resident in the MDS tab in Point Click Care indicated in Section K: Nutrition Status that the resident had difficulty eating, however the registered dietitian's progress note quarterly assessment of the resident's nutritional status did not address these risks related to nutrition care. .
2. In Section M: Skin Condition in December 2010 it is indicated that an identified resident is receiving nutrition or hydration interventions to manage skin problems, however nutrition interventions for skin integrity were not assessed in the registered dietitian's quarterly assessment.
3. There was a verbal referral to the dietitian noted regarding an identified resident's complaints about difficulties eating. The documented dietitian's assessment did not include an observation of the resident's actual abilities.

**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 to ensure that nutritional assessments include any risks related to nutrition care, to be implemented voluntarily.

**WN #3:** The Licensee has failed to comply with O.Reg. 79/10, s.73(1)5. 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.

**Findings:**

1. There is not a process in place to ensure that the staff serving soup are aware of the residents' diets, special needs and preferences. Information regarding the residents' diet needs are behind the steam table and not accessible to the staff serving soup.

**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 to ensure that there is a process to ensure staff assisting residents are aware of the residents' diets, special needs and preferences, 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.  <i>Elisa Wilson</i>	
Title:	Date:	Date of Report: (if different from date(s) of inspection).  <i>May 24, 2011</i>	