



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

London Service Area Office
291 King Street, 4th Floor
LONDON, ON, N6B-1R8
Telephone: (519) 675-7680
Facsimile: (519) 675-7685

Bureau régional de services de London
291, rue King, 4ième étage
LONDON, ON, N6B-1R8
Téléphone: (519) 675-7680
Télécopieur: (519) 675-7685

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

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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
Jul 24, 2013	2013_182128_0019	L-000384-13	Complaint

Licensee/Titulaire de permis

OAKWOOD RETIREMENT COMMUNITIES INC.
325 Max Becker Drive, Suite 201, KITCHENER, ON, N2E-4H5

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

THE VILLAGE OF RIVERSIDE GLEN
60 WOODLAWN ROAD EAST, GUELPH, ON, N1H-8M8

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

RUTH HILDEBRAND (128)

Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct a Complaint inspection.

This inspection was conducted on the following date(s): July 15, 2013

During the course of the inspection, the inspector(s) spoke with the General Manager, Acting Director of Care, Assistant Director of Care, 1 Neighbourhood Coordinator, 1 RPN, 4 Personal Support Workers, Registered Dietitian, Assistant Director Food Service, 1 Food Service Aide and 1 Resident.

During the course of the inspection, the inspector(s) observed a partial lunch meal and partial afternoon snack, and reviewed the clinical record for one resident.

The following Inspection Protocols were used during this inspection:



Dining Observation
Nutrition and Hydration
Snack Observation

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

Table with 2 columns: Legend and Legendé. Legend includes WN, VPC, DR, CO, WAO. Legendé includes Avis écrit, Plan de redressement volontaire, Aiguillage au directeur, Ordre de conformité, Ordres : travaux et activités. The table also contains detailed descriptions of non-compliance with LTCHA requirements and the definition of written notification.

WN #1: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 6. Plan of care

Specifically failed to comply with the following:

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. 2007, c. 8, s. 6 (7).



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Findings/Faits saillants :

1. The licensee has failed to ensure that the care set out in the plan of care was provided to the resident as specified in the plan.

An identified resident was offered food that was not in keeping with his/her diet, at the afternoon snack, on July 15, 2013. Three Personal Support Workers acknowledged that they were not aware of the planned menu that was on the snack cart. They indicated that they had not been provided education to ensure that each resident was offered food according to the planned menu and/or their plans of care.

The Registered Dietitian, the Assistant Director of Care and the Assistant Director of Food Services indicated that the expectation is that residents are provided care set out in their plan of care and that the planned menu is followed. They also acknowledged that further education related to the snack cart was required. [s. 6. (7)]

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 each resident as specified in the plan and that all staff are aware of the process to ensure that each resident receives the correct diet and menu items on the planned menu, to be implemented voluntarily.

Issued on this 24th day of July, 2013

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

RUTH HILDEBRAND