

Ministry of Health and Long-Term Care

Inspection Report under the Long-Term Care Homes Act, 2007 Ministère de la Santé et des Soins de longue durée

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

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 performance et de la conformité Ottawa Service Area Office 347 Preston St, 4th Floor OTTAWA, ON, K1S-3J4 Telephone: (613) 569-5602 Facsimile: (613) 569-9670 Bureau régional de services d'Ottawa 347, rue Preston, 4iém étage OTTAWA, ON, K1S-3J4 Téléphone: (613) 569-5602 Télécopieur: (613) 569-9670

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Date(s) of inspection/Date(s) de l'inspection	Inspection No/ No de l'inspection	Type of Inspection/Genre d'inspection
Feb 6, 7, 2012	2012_044161_0010	Complaint
Licensee/Titulaire de permis	-	
THE GOVERNING COUNCIL OF THE 2 OVERLEA BLVD., TORONTO, ON,		
Long-Term Care Home/Foyer de so	ins de longue durée	

THE SALVATION ARMY OTTAWA GRACE MANOR 1156 WELLINGTON STREET, OTTAWA, ON, K1Y-2Z3

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

KATHLEEN SMID (161)

Inspection Summary/Résumé de l'inspection

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

During the course of the inspection, the inspector(s) spoke with the Executive Director, a Registered Practical Nurse, a Dietary Aide and a Personal Support Worker.

During the course of the inspection, the inspector(s) observed residents on an identified unit at breakfast as well as the resident rooms and reviewed the health records of four identified residents.

The following Inspection Protocols were used during this inspection:

Personal Support Services

Findings of Non-Compliance were found during this inspection.

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



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Non-compliance with requirements under the Long-Term Care 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 fovers de Homes Act, 2007 (LTCHA) was found. (A requirement under the 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 O.Reg 79/10, s. 73. Dining and snack service Specifically failed to comply with the following subsections:

- 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:
- 1. Communication of the seven-day and daily menus to residents.
- 2. Review, subject to compliance with subsection 71 (6), of meal and snack times by the Residents' Council.
- 3. Meal service in a congregate dining setting unless a resident's assessed needs indicate otherwise.
- 4. Monitoring of all residents during meals.
- 5. A process to ensure that food service workers and other staff assisting residents are aware of the residents' diets, special needs and preferences.
- 6. Food and fluids being served at a temperature that is both safe and palatable to the residents.
- 7. Sufficient time for every resident to eat at his or her own pace.
- 8. Course by course service of meals for each resident, unless otherwise indicated by the resident or by the resident's assessed needs.
- 9. Providing residents with any eating aids, assistive devices, personal assistance and encouragement required to safely eat and drink as comfortably and independently as possible.
- 10. Proper techniques to assist residents with eating, including safe positioning of residents who require assistance.
- 11. Appropriate furnishings and equipment in resident dining areas, including comfortable dining room chairs and dining room tables at an appropriate height to meet the needs of all residents and appropriate seating for staff who are assisting residents to eat. O. Reg. 79/10, s. 73 (1).

Findings/Faits saillants:



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- 1. As per section r. 73(1)9, the Licensee failed to provide two residents with personal assistance and encouragement at a meal service.
- 2. Resident # 1 has been identified as being at high nutritional risk by the home's Dietician at the Annual Care Conference in January 2012.
- 3. Resident # 1 Plan of Care in November 2011 states that the resident requires "intermittent encouragement and the physical assistance of one staff."
- 4. On February 6, 2012 resident # 1 did not receive personal assistance nor encouragement with breakfast. Resident was observed for 41 minutes with breakfast on the table in front of her/him and no staff was observed to provide personal assistance nor encouragement. At the end of 41 minutes resident was assisted out of the dining room.
- 5. Resident # 1 did not eat breakfast.
- 6. Resident # 2 has been identified at moderate nutritional risk by the home's Dietician at the Annual Care Conference in May 2011.
- 7. Resident #2 Care Plan dated November 2011 states that the resident requires "lots of encouragement and physical assistance".
- 8. On February 6, 2012 resident #2 did not receive personal assistance nor encouragement with breakfast. Resident was observed for 41 minutes with breakfast on the table in front of her/him and no staff was observed to provide personal assistance nor encouragement. At the end of 41 minutes resident was assisted out of the dining room.
- 9. Resident # 2 did not eat breakfast.

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 home has a dining service that includes providing residents with any personal assistance and encouragement required to safely eat and drink as comfortably and independently as possible, to be implemented voluntarily.

Issued on this 7th day of February, 2012

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

Aller Smid