



**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 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
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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
Mar 13, 2014	2014_290551_0010	O-000185- 14	Complaint

Licensee/Titulaire de permis

peopleCare Not-For-Profit Inc
2 OVERLEA BLVD., TORONTO, ON, M4H-1P4

Long-Term Care Home/Foyer de soins 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

MEGAN MACPHAIL (551)

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): March 7 and 11, 2014.

During the course of the inspection, the inspector(s) spoke with Personal Support Workers, Dietary Aides, Registered Nursing Staff, the Registered Dietitian, the Director of Food Services, the RAI co-ordinator, the Director of Care and the Executive Director.

During the course of the inspection, the inspector(s) observed lunch and supper meal service, reviewed health care records, reviewed selected policies in the Food Service Manual.

The following Inspection Protocols were used during this inspection:



Dining Observation
Nutrition and Hydration

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES	
<p>Legend</p> <p>WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order</p>	<p>Legendé</p> <p>WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités</p>
<p>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.)</p> <p>The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.</p>	<p>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.</p> <p>Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.</p>

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. (1) Every licensee of a long-term care home shall ensure that there is a written plan of care for each resident that sets out,**
- (a) the planned care for the resident; 2007, c. 8, s. 6 (1).**
 - (b) the goals the care is intended to achieve; and 2007, c. 8, s. 6 (1).**
 - (c) clear directions to staff and others who provide direct care to the resident. 2007, c. 8, s. 6 (1).**
- 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 written plan of care sets out clear directions to staff and others who provide direct care to the resident.

Resident #1 was admitted to the home in 2009. He/she is monitored quarterly by the Registered Dietitian (RD) and is assessed as being at moderate/high nutritional risk.

The Director of Food Services and RD were interviewed and stated that the information in the plan of care and the Salvation Army Ottawa Grace Manor Diet Binder should be consistent and match. The RD also stated that Resident #1 has been on a regular texture with soft choices diet since 2011, and that the diet has been continued based on good tolerance.

Resident #1's plan of care in effect at the time of the inspection directs staff to provide a regular diet with regular texture and to offer soft choices to ease any chewing difficulties. Resident #1 was assessed by the RD in March, 2014, and the Resident Assessment Protocol (RAP) for Assessment Protocol (AP) #12 Nutritional Status states that the resident receives a regular texture with soft choices diet. The Physician's Orders tab in Point Click Care states Resident #1's diet as Regular - Regular / Soft Choices. The diet sheet (a color coded document with the unit's residents listed in alphabetical order and located in the Salvation Army Ottawa Grace Manor Diet Binder) states Resident #1's diet as Regular Soft Choices.

Resident #1's individual diet sheet (in the Salvation Army Ottawa Grace Manor Diet Binder) states diet order as Regular Minced Meat. It also directs staff to provide therapeutic interventions at breakfast. The RAP for AP #12 Nutritional Status written in November 2012 states that these interventions would be discontinued.



Resident #1's MAR states diet as Reg Diet / Reg Texture. Resident #1's Medication Review states diet as Reg Diet / Reg Texture.

According to Resident #1's plan of care, Physician's Orders tab in Point Click Care and the diet sheet, he/she is on a regular texture with soft choices diet. According to Resident #1's individual diet sheet, he/she is on a minced meat texture diet and receives therapeutic interventions at breakfast. According to Resident #1's MAR and Medication Review, he/she is on a regular texture diet. Clear direction is not provided to staff and others who provide direct care to the resident. [s. 6. (1) (c)]

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

Resident #1's plan of care in effect at the time of the inspection directs staff to provide a regular diet with regular texture and to offer soft choices to ease any chewing difficulties. The Physician's Orders tab in Point Click Care states Resident #1's diet as: Regular - Regular / Soft Choices.

Policy FSB25 (Diet Guidelines): Regular Texture with Soft Choices directs staff to refer to the "Guidelines for Regular Texture - Soft Choices". This guideline indicates that hard vegetables that cannot be mashed with a fork are to be avoided and substituted with minced vegetables and that whole cuts of meat that cannot be cut with a fork are to be avoided and substituted with minced meat / gravy.

On a specified date in March, 2014 at supper, Resident #1 was served a regular texture meal including a piece of chicken that was cut up at the point of service. PSW #108 stated that Resident #1 eats regular texture on the evening shift and does not require any texture modification. On a specified date in March, 2014 at lunch, Resident #1 was served a soft filling sandwich with minced coleslaw, and PSW #106 stated that Resident #1 is on a soft choice diet.

The care set out in the plan of care was not provided to Resident #1 as specified in the plan. [s. 6. (7)]



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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 Resident #1's plan of care gives clear direction to staff in regards to his/her dietary needs and that the care set out in the plan of care is provided, to be implemented voluntarily.

Issued on this 14th day of March, 2014

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

Megan MacPhail, LTCH Inspector