

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

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Report Date(s) / Inspection No / Log # / Type of Inspection / Registre no Genre d'inspection

Sep 10, 2013 200148_0029 O-000680- Complaint

Licensee/Titulaire de permis

458422 ONTARIO LIMITED

220 EMMA STREET, CORNWALL, ON, K6J-5V8

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

SANDFIELD PLACE

220 EMMA STREET, CORNWALL, ON, K6J-5V8

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

AMANDA NIXON (148)

Inspection Summary/Résumé de l'inspection

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

This inspection was conducted on the following date(s): August 7 and 8, 2013, on site.

During the course of the inspection, the inspector(s) spoke with the home's Administrator, Director of Care, Nutritional Manager, Head Cook, Food Service Workers, Registered Nursing staff, Personal Support Workers and residents.

During the course of the inspection, the inspector(s) observed meal service, reviewed the current Spring/Summer 2013 menu, the food production system including production sheets, therapeutics and diet lists.

The following Inspection Protocols were used during this inspection: Dining Observation

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES	
Legend	Legendé
WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order	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 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.)

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 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.

Ce qui suit constitue un avis écrit de nonrespect 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. 71. Menu planning

Specifically failed to comply with the following:

- s. 71. (1) Every licensee of a long-term care home shall ensure that the home's menu cycle,
- (a) is a minimum of 21 days in duration; O. Reg. 79/10, s. 71 (1).

Findings/Faits saillants:

- 1. The licensee failed to comply with O.Reg 79/10, s.71(1)(a), whereby the licensee did not ensure that the home's menu cycle is a minimum of 21 days in duration.
- O.Reg 79/10, s.71(1)(b), describes the home's menus to include both meals and snacks for regular, therapeutic and texture modified diets.

A review of the home's menus indicates that the home has a 4 week (28 day) menu cycle for meals. However, it was determined through this inspection that the home has a 1 week (7 day) menu cycle for snacks. The head cook on staff during this inspection confirmed that the home uses a 7 day menu cycle for snacks. [s. 71. (1) (a)]



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WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 72. Food production

Specifically failed to comply with the following:

s. 72. (2) The food production system must, at a minimum, provide for, (g) documentation on the production sheet of any menu substitutions. O. Reg. 79/10, s. 72 (2).

Findings/Faits saillants:

1. The licensee failed to comply with O.Reg 79/10, s.72 (2) (g), whereby the licensee did not ensure that the food production system must, at a minimum, provide for documentation on the production sheet of any menu substitutions.

Food production documents were reviewed and interviews were conducted with the home's Nutritional Manager and head cook. It was determined that the home does not currently have a consistent process to ensure that all menu substitutions are documented on the production sheet. When requested by the Inspector, the home was unable to provide documentation of all menu substitutions made for the months of June and July 2013. [s. 72. (2) (g)]

Issued on this 10th day of September, 2013

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