

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

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## Public Copy/Copie du public

Date(s) of inspection/Date(s) de l'inspection	Inspection No/ No de l'inspectio	d'inspection	
Mar 6, 7, 8, 2012	2012_038197_0009	Complaint	
Licensee/Titulaire de permis			
Glen Hill Terrace Christian Homes Inc 200 Glen Hill Drive South, WHITBY, C Long-Term Care Home/Foyer de soi	N, L1N-9W2		
STRATHAVEN LIFECARE CENTRE 264 King Street East, Bowmanville, Ol	N, L1C-1P9		
Name of Inspector(s)/Nom de l'insp	ecteur ou des inspecteurs		
JESSICA PATTISON (197)			
In	spection Summary/Résumé de l'ins	spection	

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

During the course of the inspection, the inspector(s) spoke with the acting Director of Care, the Food Service Manager, cooks, dietary staff and residents.

During the course of the inspection, the inspector(s) reviewed resident council and food council meeting minutes and the March 2012 food temperature log and observed the lunch meal.

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	WN – Avis écrit			
VPC - Voluntary Plan of Correction	VPC – Plan de redressement volontaire			
DR - Director Referral	DR – Aiguillage au directeur			
CO - Compliance Order	CO – Ordre de conformité			
WAO – Work and Activity Order	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 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:

1. The following findings indicate that the licensee has failed to comply with O. Reg. 79/10 s. 73(1)6 in that food is not being served at a temperature that is palatable to residents.

On March 7, 2012 residents were selected at random and asked what they thought of the food served in the home. Nine residents stated that hot food items were not hot enough when delivered to their tables at meal service. Two of the nine residents had the hot entree at the lunch meal on March 7, 2012 and stated it was not hot enough.

The head cook stated on March 7, 2012 that at the beginning of meal service the hot foods are typically around 180-185 degrees Celsius, but by the end of the meal they are usually down to 160-165 degrees Celsius.

The assistant cook took the temperature of the beets at the end of the lunch meal service on March 7, 2012 and the temperature was 139 degrees Celsius. The temperature of the beets at the beginning of the meal service was recorded as 180 degrees Celsius.

During an interview with the Food Service Manager on March 7, 2012 she stated that food temperature has been an ongoing complaint from residents in the home and that they have been working to correct the problem.

## 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 food and fluids are being served at a temperature that is safe and palatable to residents, to be implemented voluntarily.



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Issued on this 8th day of March, 2012

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

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