



Ministry of Health and Long-Term Care
 Health System Accountability and Performance Division
 Performance Improvement and Compliance Branch

Ministère de la Santé et des Soins de longue durée
 Division de la responsabilisation et de la performance du système de santé
 Direction de l'amélioration de la performance et de la conformité

Hamilton Service Area Office
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Inspection Report under the LTC Homes Act, 2007 <input checked="" type="checkbox"/> Public Copy <input type="checkbox"/> Licensee Copy		Rapport d'inspection prévue de la Loi de 2007 les foyers de soins de longue durée <input type="checkbox"/> Copie du Titulaire <input checked="" type="checkbox"/> Copie de la Publique	
Date(s) of inspection/Date de l'inspection August 5, 2010		Inspection No/ d'inspection 2010_171_2581_03AU G150331	Type of Inspection/Genre d'inspection Complaint
Licensee/Titulaire Revera Long Term Care Inc. 55 Standish Court, 8 th floor Mississauga, ON L5R 4B2 Fax: 289-360-1201			
Long-Term Care Home/Foyer de soins de longue durée Versa-Care Centre Hamilton			
Name of Inspector(s)/Nom de l'inspecteur(s) Elisa Wilson – LTC Homes Inspector, Dietary – #171			
Inspection Summary/Sommaire d'inspection			

The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.

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.)

Le suivant constitue un avis d'écrit de l'exigences prévue le paragraphe 1 de section 152 de les foyers de soins de longue durée.

Non-respect avec les exigences sur le *Loi de 2007 les foyers de soins de longue durée* à trouvé. (Une exigence dans le loi comprend les exigences contenues dans les points énumérés dans la définition de "exigence prévue par la présente loi" au paragraphe 2(1) de la loi.

The purpose of this inspection was to conduct a complaint inspection. The complaint was received by the Hamilton Services Area office anonymously through the Info-line. The complainant's concern was in regards to the menu not being followed as posted.

The inspection was conducted by one inspector identified above.

The inspection occurred on August 5, 2010.

During the course of the inspection, the inspector(s) spoke with:
The Home administrator, foodservices director, residents and kitchen staff.

The following Inspection Protocols were used during this inspection:
Food Quality

1 Finding of Non-Compliance was found during this inspection. The following action was taken:
1 WN

NON- COMPLIANCE / (Non-respectés)

Definitions/Définitions

WN – Written Notifications/Avis écrit
VPC – Plan of correction/Plan de redressement
DR – Director Referral/Régisseur envoyé
CO – Compliance Order/Ordres de conformité
WAO – Work and Activity Order/Ordres: travaux et activités

The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.

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.)

Le suivant constitue un avis d'écrit de l'exigences prévue le paragraphe 1 de section 152 de les foyers de soins de longue durée.

Non-respect avec les exigences sur le *Loi de 2007 les foyers de soins de longue durée* à trouvé. (Une exigence dans le loi comprend les exigences contenues dans les points énumérés dans la définition de "exigence prévue par la présente loi" au paragraphe 2(1) de la loi.

WN#1: The Licensee has failed to comply with: O.Reg. 79/10, s.72(2)(g).

The food production system must, at a minimum, provide for, documentation on the production sheet of any menu substitutions.

Findings:

1. Menu substitutions were reviewed during this inspection with the food service manager. During the review it was noted that the menu item substitutions have been documented on menu sheets and not on the production sheets as per regulation.

Inspector ID#: 171

Required Compliance Date: August 20, 2010

Signature of Licensee of Designated Representative
Signature du Titulaire du représentant désigné

Signature of Health System Accountability and Performance Division
representative/Signature du (de la) représentant(e) de la Division de la
responsabilisation et de la performance du système de santé.



Title:

Date:

Date of Report (if different from date(s) of inspection).

16 AUG 2010