



Ministry of Health and  
Long-Term Care

Ministère de la Santé et des  
Soins de longue durée

Inspection Report under  
the Long-Term Care  
Homes Act, 2007

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  
performance du système de santé  
Direction de l'amélioration de la  
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<b>Report Date(s) / Date(s) du Rapport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / Registre no</b>	<b>Type of Inspection / Genre d'inspection</b>
Dec 18, 2012	2012_191107_0006	H-001741- 12	Complaint

**Licensee/Titulaire de permis**

REGENCY LTC OPERATING LP ON BEHALF OF REGENCY  
100 Milverton Drive, Suite 700, MISSISSAUGA, ON, L5R-4H1

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

THE WILLOWGROVE  
1217 Old Mohawk Road, ANCASTER, ON, L9K-1P6

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

MICHELLE WARRENER (107)

**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): December 13, 2012

Complaint inspection H-001741-12

During the course of the inspection, the inspector(s) spoke with Residents, front line dietary staff, the Nutrition Manager, and the Administrator

During the course of the inspection, the inspector(s) Reviewed temperature monitoring records in all home areas, food temperatures were measured in one home area, reviewed relevant policies and procedures

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

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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<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>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>The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.</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 O.Reg 79/10, s. 8. Policies, etc., to be followed, and records**

**Specifically failed to comply with the following:**

- s. 8. (1) Where the Act or this Regulation requires the licensee of a long-term care home to have, institute or otherwise put in place any plan, policy, protocol, procedure, strategy or system, the licensee is required to ensure that the plan, policy, protocol, procedure, strategy or system,**
- (a) is in compliance with and is implemented in accordance with applicable requirements under the Act; and O. Reg. 79/10, s. 8 (1).**
  - (b) is complied with. O. Reg. 79/10, s. 8 (1).**

**Findings/Faits saillants :**



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1. [O.Reg. 79/10, s. 8(1)(a)]

The licensee did not ensure that the home's policies and procedures were in compliance with and implemented in accordance with all applicable requirements under the Act.

a) Many of the home's policies in the Dietary Services Manual were not revised to be consistent with current legislative references. The policies reference the previous Nursing Home Act and Program Standards Manual. Some examples: NHS-V-02 - Menu Planning, NHS-V-03 Guidelines for Menu Planning, Consultation with Residents, NHS-V-05 Menu Posting, NHS-V-06 Menu Filing, NHS-V-07 Nourishment Menu, NHS-V-10 Dietary Supplier List, NHS-V-16 - Food Preparation of Therapeutic and Texture Modified diet, NHS-V-18 Pureed Food program, NHS-V-19 Softened Cereal, NHS-V-20 Nourishment Preparation, NHS-V-23 Use and Storage of Leftovers. [s. 8. (1) (a)]

2. [O.Reg. 79/10, s. 8(1)(b)]

The licensee did not ensure that the home's policy and procedure "Food Temperatures: NHS-V-24 - effective date Feb 07" was complied with by staff serving food in the serveries. The policy stated that hot food must be maintained at temperatures not below 60 degrees Celsius (C)/140 degrees Fahrenheit (F) and cold food must be held at 4 degrees Celsius (40 degrees F). Temperatures were to be taken of all foods served to residents with a digital/manual thermometer. The cook or designate in each kitchen would be responsible for taking and recording all initial food temperatures before delivery to the serveries. The Homemaker would take and record food temperatures once the food was placed on the hot top/steam table, on the Food Temperature Log form. The Food Service Worker would compare the reading with acceptable values. If the food temperature did not fall into the acceptable range, remove product and reheat to appropriate temperature in the microwave for 15 seconds. Take temperature again. Repeat as required.

a) Not all food temperatures were taken and recorded by staff serving food. Food temperature monitoring records were reviewed from November 19 to December 13, 2012 with numerous food temperatures not recorded in multiple dining areas.

b) Food temperatures for the texture modified menu (pureed) were not consistently recorded on the temperature monitoring records. Numerous days in multiple home areas the pureed food temperatures were not recorded at the breakfast meal.

c) Food temperatures were also not recorded the morning of the inspection in three home areas. Staff stated that the temperatures were taken, however, not recorded due to staffing shortages. Resident interview identified concerns with occasional cold



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food and they questioned if food temperatures were taken when the home was short staffed.

d) Staff noted that the boiled eggs were not at temperature, however, action was not taken to correct the cold temperatures and the eggs were served to residents in one home area.

e) Staff interview (Management and front line staff) confirmed that if cold food temperatures were identified that corrective action taken was to be recorded on the food temperature monitoring records. Cold food was identified on the food temperature monitoring records on three occasions, however, action taken was not recorded on the monitoring records. [s. 8. (1) (b)]

***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 with ensuring that the home's policies and procedures are in compliance with all applicable requirements under the Act and that the home's policies are complied with, to be implemented voluntarily.***

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**WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 73. Dining and snack service**

**Specifically failed to comply with the following:**

**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:**

**6. Food and fluids being served at a temperature that is both safe and palatable to the residents. O. Reg. 79/10, s. 73 (1).**

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**Findings/Faits saillants :**



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1. [O.Reg. 79/10, s.73(1)6]

a) Not all food was served at a temperature that was both safe and palatable to the residents at the breakfast meal December 13, 2012. The boiled eggs were probed at 80-85 degrees Fahrenheit (F) in one identified Home Area. The home's policy for food temperatures stated hot foods were to be served at a minimum of 140 degrees F. A resident stated the eggs were too cold and sent the item back to the servery. During interview, the resident stated they often received cold food at meals.

b) Not all thermometers in the serveries were calibrated and accurate. Two manual thermometers in the same servery were noted to have a 20 degrees F difference. The Nutrition Manager stated that thermometers were to be calibrated monthly. [s. 73. (1) 6.]

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Issued on this 18th day of December, 2012

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

A handwritten signature in cursive script that reads "H. Wanner, RD". The signature is written in black ink on a white background within a rectangular box.