

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 performance du système de santé Direction de l'amélioration de la performance et de la conformité

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Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
2012_108110_0032	T-926-12	Complaint
permis		
	No de l'inspection 2012_108110_0032	No de l'inspection Registre no 2012_108110_0032 T-926-12 permis

50 SAMOR ROAD, SUITE 205, TORONTO, ON, M6A-1J6

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

HAWTHORNE PLACE CARE CENTRE

2045 FINCH AVENUE WEST, NORTH YORK, ON, M3N-1M9

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

DIANE BROWN (110)

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 4th, 6th, 7th, 10th, 11th, 18th, 2012

During the course of the inspection, the inspector(s) spoke with Administrator, Assistant Director of Care, Food Service Manager and Food Service Supervisor, Registered Dietitian, Registered Staff, personal support workers, cooks, food service workers, residents.

During the course of the inspection, the inspector(s) Observed food production and the food service program; observed meal service
This inspection relates to LOG #T-926-12

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				
Legendé				
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 LTCHA, 2007 S.O. 2007, c.8, s. 6. Plan of care

Specifically failed to comply with the following:

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).

Findings/Faits saillants:

1. The licensee did not ensure that the care set out in residents' plan of care was provided as specified in the plan.

At lunch on December 4th four residents with individualized nutritional care needs, according to the Resident Diet Listing report, were observed and the following care was not provided;

Resident #2 ,was not provided double portions of everything at lunch and dinner; resident was served single servings of all foods.

Resident #3 was not provided an individualized fluid intervention.

Resident #4 was not provided an assistive feeding aid.

Resident #5 was not provided the appropriate minced with pureed meat textured meal. A regular textured entrée was provided.

At breakfast on December 7th, 2012 Resident #1 was not provided 250mls of diet juice but 250mls of regular juice. [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 nutritional care is provided as specified in Resident's #1, #2, #3, #4 and #5's plan of care, to be implemented voluntarily.

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, (d) preparation of all menu items according to the planned menu; O. Reg. 79/10, s. 72 (2).
- s. 72. (2) The food production system must, at a minimum, provide for, (e) menu substitutions that are comparable to the planned menu; O. Reg. 79/10, s. 72 (2).
- 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:



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1. The licensee did not ensure that menu items were prepared according to the planned menu. Standardized recipes were not followed with ingredients unavailable, omitted or substituted by staff altering the flavour, nutrient value and appearance of the planned menu items.

Interviews with the homes RD's revealed that they were unaware of the changes to the approved menu and expect staff to follow the approved menu and standardized recipes.

The following menus items were not prepared according to the planned menu Fresh Yams were replaced with canned yams

Fresh oranges wedges were replaced with canned mandarin oranges
Green Pepper Slaw did not include fresh green peppers, fresh onions or fresh celery
Summer Berry flan did not include the two fruits identified in the recipe
Cheese Dream Bun entree did not include fresh bacon but replaced with bacon bits
Turkey a la king recipe did not include pimento or fresh green peppers
Gingered Pork chops did not include minced ginger root or roasted garlic concentrate
Fettuccine primavera did not include fresh carrots, fresh sliced mushrooms or fresh
parley

Fruit Trifle did not include orange zest
Roast turkey did not include poultry seasoning
Recipes requiring fresh produce were substituted with frozen or canned

A review of the homes' food procurement system and interviews with the Food Service Supervisor confirmed the above omissions and substitutions were a regular practice in the home.

The June 26th, 2012 Food Council Meeting Minutes raised the following concern "Products on the menu are often mislabelled. Example Viennese wine schnitzel becomes breaded pork slice."

The following observations were made on the first day of the unannounced inspection. December 4th, 2012 the lunch the menu states unsweetened fruit cocktail as a first choice dessert for all diet types including diabetics; Fruit cocktail in a light syrup was offered to residents. An interview Food Service supervisor and review of the food order guide confirmed that all canned fruit purchased is in a light syrup and not unsweetened. The menu requires the following canned fruit to be unsweetened: mandarin oranges, diced pineapples, fruit cocktail, tropical fruit cocktail, pears, and



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peaches.

December 4th, 2012 the lunch menu states tapioca and diet tapioca pudding as the second choice dessert. Diet tapioca was not prepared. Regular Tapioca pudding was offered to all residents including diabetics.

On two observed occasions Tuesday December 4th, 2012 and Friday December 7th, 2012 hot entrees were prepared, minced and pureed 2.5 hours in advance of meal service. Recipes for texture modified foods state "for optimal food safety and nutrient retention, texture modification should be done within one hour of service". An interview with the Food Service Manager confirmed that cooks are expected to prepare minced and pureed food within one hour of meal service.

December 4th, 2012 pureed cream of mushroom soup was prepared with an unmeasured amount of commercial thickener. The recipe requires bread to thicken the soup and not commercial thickener. [s. 72. (2) (d)]

2. The menu substitutions made on the December 7th, 2012 were not comparable to the planned menu.

The pureed diabetic dessert was not prepared according to the menu but substituted with an unplanned, unsuitable dessert choice for diabetics. The second choice dessert, unsweetened canned fruit, was substituted for sweetened canned fruit unsuitable for diabetics.

Unsweetened canned fruit was not provided according to the menu on December 4th, 5th, 7th, 10th, 11th, 2012 observed during the inspection. Staff interviews confirmed that unsweetened canned fruit is regularly substituted with sweetened fruits for all residents including those who are diabetic.

An interview with the home's registered dietitian (s) revealed that they were not aware of the ongoing menu substitutions. [s. 72. (2) (e)]

3. The licensee did not ensure that there is an organized food production system includes documentation on the production sheet of any menu substitutions. The breakfast menu on December 4th, 2012 identified fresh orange wedges; canned mandarin oranges were observed to be served. The substitution was not marked on the production menu.

The dinner menu on December 7th, 2012 identified chocolate mania cake for dessert; an alternative dessert was substituted for all pureed textured diets. The substitution



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was not marked on the production menu.

An interview with the Food Service Manager revealed that staff are to communicate to a supervisor any required substitutions and obtain approval. The Food Service Manager and residents were not made aware of the pureed dessert substitution. An interview with a cooking staff revealed a lack of awareness to document menu changes on the homes production sheet.

The April 25th, 2012 Food Council Meeting Minutes included the following comment "Food doesn't correspond with what is on the menu"; June 26th, 2012 minutes "Menu is wrong". [s. 72. (2) (g)]

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 all menu items are prepared according to the planned menu; menu substitutions are comparable to the planned menu and menu substitutions are documented on the production sheet, to be implemented voluntarily.

Issued on this 10th day of January, 2013

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

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