



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

**Rapport d'inspection
prévue le *Loi de 2007
les foyers de soins de
longue durée***

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

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**Ministère de la Santé et des Soins de
longue durée**

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Licensee Copy/Copie du Titulaire Public Copy/Copie Public

Date(s) of inspection/Date de l'inspection
November 4th, 5th and 8th, 2010

Inspection No/ d'inspection

2010_110_2586_03Nov151705

Type of Inspection/Genre d'inspection

Follow-up - T-2872

Licensee/Titulaire

The Royal Crest Lifecare Group Inc., c/o Ernst and Young Inc. - 222 Bay Street, TD Centre, P.O. Box 251
Toronto, ON, M5K 1J7

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

Yorkview Lifecare Centre, 2045 Finch Avenue West, North York, ON M3N 1M9

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

Diane Brown (#110) and Lynn Parsons (#153) on November 4th and 5th, 2010

Inspection Summary/Sommaire d'inspection

The purpose of this inspection was to conduct a follow-up dietary inspection.

During the course of the inspection, the inspector(s) spoke with: Administrator, Director of resident care, Food Services Manager, Cooks, Dietary Aides, registered Dietitian, charge nurses, personal care support workers and residents.

During the course of the inspection, the inspector(s): observed food preparation, breakfast and lunch meal service; reviewed resident health records; spoke with staff and residents.

The following Inspection Protocols were used in part or in whole during this inspection:

X Findings of Non-Compliance were found during this inspection. The following action was taken:

3 WN

3 VPC

Corrected Non-Compliance is listed in the section titled Corrected Non-Compliance.



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NON- COMPLIANCE / (Non-respectés)

Definitions/Définitions

WN – Written Notifications/Avis écrit
VPC – Voluntary Plan of Correction/Plan de redressement volontaire
DR – Director Referral/Régleur 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.

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

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.)

Non-respect avec les exigences sur le *Loi de 2007 les foyers de soins de longue durée* à trouvé. (Une exigence dans la 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 :

LTCHA S.O. 2007, c. 8, s. 11(2) Without restricting the generality of subsection (1), every licensee shall ensure that residents are provided with food and fluids that are safe, adequate in quantity, nutritious and varied. 2007, c. 8, s. 11 (2).

Findings:

During lunch preparation on November 4th, 2010 two dietary staff members did not follow portioning requirements according to the planned menu reducing the quantity of food served.

- The chocolate raspberry pudding cake was cut into 1/20th size pieces when directions required 1/10th serving sizes
- Sandwich filling was portioned with a #16 scoop while directions require staff to use #10 scoops. The #16 scoop provides less sandwich filling than the planned #10 scoop.

Inspector ID #: 110

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 foods are adequate in quantity, to be implemented voluntarily.

[copy the box below for each WN, changing the WN number as appropriate]

WN #2: The Licensee has failed to comply with

O.Reg. 79/10, s. 72. (1) Every licensee of a long-term care home shall ensure that there is an organized food production system in the home. O. Reg. 79/10, s. 72 (1).

(2) The food production system must, at a minimum, provide for,



(d) preparation of all menu items according to the planned menu;

Findings:

November 4th, 2010 lamb souvlaki was not prepared according to the standardized recipe. Cook stated 10 kilograms (2 cases) of lamb was used when the directions required 5.9kilograms. The resulting change would alter the protein density and negatively impact those residents on restricted protein diets e.g. renal diets.

Inspector ID #: 110

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 preparation of all menu items according to the planned menu be implemented voluntarily.

WN #3: The Licensee has failed to comply with :

O.Reg. 79/10, 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:

(2) (b) The licensee shall ensure that no resident who requires assistance with eating or drinking is served a meal until someone is available to provide the assistance required by the resident. O. Reg. 79/10, s. 73 (2).

Findings:

At breakfast on November 5th, 2010

Resident A who requires total assistance with eating and drinking was served her beverages at 8:14 am.

Assistance was not provided until 8:40am

Resident B who requires total assistance with eating and drinking was served her beverages at 8:15

Assistance was not provided until 8:44am.

Resident C who requires total assistance with eating and drinking was served her beverages at 8:15.

Assistance was not provided until 8:36 am.

Inspector ID #: 110

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 no resident who



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requires assistance with eating or drinking is served a meal until someone is available to provide the assistance required by the resident to be implemented voluntarily.

[Delete this table if there are no corrected actions]

CORRECTED NON-COMPLIANCE Non-respects à Corrigé				
REQUIREMENT EXIGENCE	TYPE OF ACTION/ORDER	ACTION/ ORDER #	INSPECTION REPORT #	INSPECTOR ID #
NHA, R.S.O., Chapter N7, section 2(2)1, 2, 6ii			July 21, 2009	
Regulation 832 s.5(2)			May 19, 2009	
NHA, R.S.O. 1990, Chapter N7, s.20.10 (a) (b) (c) (e)			March 18 th , 2009	
NHA, R.S.O. 1990, Chapter N7, s.20.11			July 21, 2009	

Signature of Licensee or Representative of Licensee 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).	
		November 30, 2010	