



**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  
performance et de la conformité**

Hamilton Service Area Office  
119 King Street West, 11th Floor  
HAMILTON, ON, L8P-4Y7  
Telephone: (905) 546-8294  
Facsimile: (905) 546-8255

Bureau régional de services de  
Hamilton  
119, rue King Ouest, 11<sup>ième</sup> étage  
HAMILTON, ON, L8P-4Y7  
Téléphone: (905) 546-8294  
Télécopieur: (905) 546-8255

### **Public Copy/Copie du public**

<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>
Aug 5, 2014	2014_265526_0014	H-000753- 13, H- 000092-14	Complaint

#### **Licensee/Titulaire de permis**

UNITED MENNONITE HOME FOR THE AGED  
4024 Twenty-Third Street, Vineland, ON, L0R-2C0

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

UNITED MENNONITE HOME  
4024 Twenty-Third Street, Vineland, ON, L0R-2C0

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

THERESA MCMILLAN (526)

### **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): July 15, 16, 17, and 18, 2014.**

**During the course of the inspection, the inspector(s) spoke with the Administrator, Director of Care (DOC), Registered Nurses (RNs), Registered Practical Nurses (RPNs), Personal Support Workers (PSWs), Registered Dietitian (RD), and Food Services Manager (FSM).**

**During the course of the inspection, the inspector(s) reviewed resident health records, reviewed policy and procedures, and observed staff interactions with residents including while a resident was fed.**

**The following Inspection Protocols were used during this inspection:  
Nutrition and Hydration  
Personal Support Services**

**Findings of Non-Compliance were found during this inspection.**



**NON-COMPLIANCE / NON - RESPECT DES EXIGENCES**

Legend	Legendé
WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order	WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités
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.



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**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. (4) The licensee shall ensure that the staff and others involved in the different aspects of care of the resident collaborate with each other, (a) in the assessment of the resident so that their assessments are integrated and are consistent with and complement each other; and 2007, c. 8, s. 6 (4). (b) in the development and implementation of the plan of care so that the different aspects of care are integrated and are consistent with and complement each other. 2007, c. 8, s. 6 (4).**

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**Findings/Faits saillants :**

1. The licensee did not ensure that staff and others involved in the different aspects of care collaborated with each other in the development and implementation of the plan of care so that the different aspects of care were integrated, consistent with and complemented each other.

Dietary progress notes along with four nursing progress notes written over a two month period in 2014, described staff's concerns about a family member's practises when feeding a resident and the resident's response to these practices. Non registered and registered staff interviewed confirmed the information in the progress notes. The resident's plan of care did not address teaching the family member about safe feeding practices. Non registered staff stated that they did not know if there had been an intervention to address the concerns as they continued to observe similar incidents. Registered staff and the Registered Dietitian (RD) interviewed described interventions regarding the family's feeding practices; one intervention involved the RD developing a resource to facilitate teaching about safe feeding practices. Non registered staff, registered staff and the Director of Care (DOC) stated that they had not seen a resource developed by the RD two month earlier. They confirmed that they had not adequately collaborated to formulate and implement a plan to ensure that care was integrated, consistent with and complimented one another. [s. 6. (4) (b)]



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**Issued on this 15th day of August, 2014**

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