



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

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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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Table with 4 columns: Report Date(s) / Date(s) du Rapport, Inspection No / No de l'inspection, Log # / Registre no, Type of Inspection / Genre d'inspection. Row 1: Apr 18, 2013, 2013_202165_0008, H-000150-13, Complaint

Licensee/Titulaire de permis

THE REGIONAL MUNICIPALITY OF HALTON
1151 BRONTE ROAD, OAKVILLE, ON, L6M-3L1

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

POST INN VILLAGE
203 Georgian Drive, OAKVILLE, ON, L6H-7H9

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

TAMMY SZYMANOWSKI (165)

Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct a Complaint inspection.

This inspection was conducted on the following date(s): April 15, 16, 2013

During the course of the inspection, the inspector(s) spoke with Residents, Food Service Manager, Food Service Supervisor, Registered Dietitian, Director of Care, Front line staff and Family members.

During the course of the inspection, the inspector(s) observed meal service and reviewed menu and production system.

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	
<p>Legend</p> <p>WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order</p>	<p>Legendé</p> <p>WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités</p>
<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>The following constitutes written notification of non-compliance under paragraph 1 of section 152 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>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. 71. Menu planning



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Specifically failed to comply with the following:

s. 71. (1) Every licensee of a long-term care home shall ensure that the home's menu cycle,

(c) includes alternative choices of entrees, vegetables and desserts at lunch and dinner; O. Reg. 79/10, s. 71 (1).

s. 71. (2) The licensee shall ensure that each menu,

(b) provides for a variety of foods, including fresh seasonal foods, each day from all food groups in keeping with Canada's Food Guide as it exists from time to time. O. Reg. 79/10, s. 71 (2).

s. 71. (4) The licensee shall ensure that the planned menu items are offered and available at each meal and snack. O. Reg. 79/10, s. 71 (4).

Findings/Faits saillants :



1. The home's menu cycle did not include alternative choices for entrees, vegetables and desserts at lunch and dinner. The current planned menu, Fall/Winter, for Sunday week four indicated the alternative lunch meal was broccoli cheddar soup with corn bread. The Registered Dietitian confirmed the alternative choice did not include both an entree and a vegetable for the lunch meal. [s. 71. (1) (c)]

2. The menu for the pureed texture did not provide for a variety of foods. The menu was repetitious and some items were served on the same day of the week in consecutive weeks, repeated within weeks, and throughout the four week menu cycle. For example, pureed vegetable lasagne served Saturday week two and Saturday week three; macaroni and cheese served three times in nine days; pureed corn served two days in a row, week one and pureed mixed vegetables served four days in a row, week one. The Registered Dietitian and Nutrition Manager confirmed that it was repetitious and further revisions were being implemented with the Spring/Summer menu April 29, 2013. [s. 71. (2) (b)]

3. The licensee did not ensure that the planned menu items were offered to residents. One resident received a puree meal however; a family member confirmed that the resident wanted the alternative choice and was surprised when the resident received their meal. The family member confirmed the resident did not receive a choice of entrees and vegetables. The staff confirmed that only four puree meals, two of each meal, were prepared for four residents requiring puree texture. [s. 71. (4)]

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 that each menu provides for a variety of foods, including fresh seasonal food each day and that the planned menu items are offered and available at each meal and snack, to be implemented voluntarily.

WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 72. Food production



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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. (3) The licensee shall ensure that all food and fluids in the food
production system are prepared, stored, and served using methods to,
(a) preserve taste, nutritive value, appearance and food quality; and O. Reg.
79/10, s. 72 (3).

Findings/Faits saillants :



1. The food production system was not organized to include preparation of all menu items according to the planned menu. The production sheets indicated that lemon wedges and puree corn were to be prepared however; staff confirmed these menu items were not prepared and served during the lunch meal April 15, 2013. [s. 72. (2) (d)]

2. Foods and fluids were not prepared, stored, and served using methods which preserve taste, nutritive value, appearance and food quality.

A)The puree meal was overcooked and had a hard crusty layer on top of the menu items. The items appeared hard and dry. A family member feeding one resident confirmed that it was difficult to spoon through the menu items because of the hard layer and the items were dry and hard. The resident did not consume the meal.

B)Staff did not follow the production sheets for the lunch meal April 15, 2013. The production sheets indicated that three puree macaroni and cheese meals and three fish meals were to be sent to the Cedar home area however; there was only two of each puree meal prepared and available for the lunch service. The production sheet indicated that three servings of puree strawberries was to be prepared for Cedar home area however; staff confirmed that only two servings were prepared and available. The home area had four residents that required puree meals and did not have alternatives available.

C)A standardized recipe for macaroni and cheese was not available in the Cedar servery for staff however; a staff member pureed the macaroni and cheese at the point of service in the servery. The staff member confirmed that milk was added to the macaroni and cheese however, the item was not of smooth consistency. The Nutrition Manager confirmed there was no recipe in the home area serveries and that the expectation would be for the main kitchen to provide the menu item.

D)Several residents interviewed indicated the vegetables were hard and undercooked. Staff confirmed that the peas/carrots were placed in the re-therm unit frozen and did not reach the desired temperature when the re-therm cycle was completed and the vegetables had to be placed in the microwave. The inspector tasted the peas/carrots and corn and they were found to be hard and crunchy. Vegetables were a concern raised at resident's food committee on March 26, 2013. [s. 72. (3) (a)]



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 that all food and fluids in the food production system are prepared, stored, and served using methods to, preserve taste, nutritive value, appearance and food quality, to be implemented voluntarily.

WN #3: 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).

Findings/Faits saillants :

1. Food and fluids were not served at a temperature that was both safe and palatable to the residents. Five of eight residents interviewed on Cedar home area indicated that hot foods were often served cold. One resident separated the peas and carrots and did not consume the carrots because they were too cold. Temperatures of the peas/carrots, corn and macaroni and cheese taken during the lunch meal April 15, 2013, revealed that menu items were not maintaining temperatures during meal service. Peas/carrots were 55 degrees celsius, corn 43.6 degrees Celsius and the macaroni and cheese was 54.1 degrees Celsius. When tasted by the inspector at 1220 hours all three menu items were barely warm. The staff confirmed that the vegetables were frozen when placed in the re-therm unit and staff had to microwave the vegetables to increase the temperature for the start of meal service. Staff added extra hot water to the vegetables which was not drained in order to try and maintain temperatures longer. The staff confirmed that the re-therm unit had not been working well for quite some time and required continual repairs. The Nutrition Manager confirmed that service was provided on April 12, 2013, however; further service to the re-therm units was required. The resident food committee minutes indicated that residents have raised concerns regarding food temperatures dating back to September 2012. [s. 73. (1) 6.]



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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 that food and fluids are served at a temperature that are both safe and palatable to the residents, to be implemented voluntarily.

Issued on this 18th day of April, 2013

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

Tammy Szymanowski