



**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**

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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**

**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>
Nov 12, 2013	2013_183135_0066	L-000517- 13, L- 000678-13	Critical Incident System

**Licensee/Titulaire de permis**

THE CORPORATION OF THE MUNICIPALITY OF CHATHAM-KENT  
519 King Street West, CHATHAM, ON, N7M-1G8

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

RIVERVIEW GARDENS  
519 KING STREET WEST, CHATHAM, ON, N7M-1G8

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

BONNIE MACDONALD (135)

**Inspection Summary/Résumé de l'inspection**



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The purpose of this inspection was to conduct a Critical Incident System inspection.

This inspection was conducted on the following date(s): November 5-6, 2013.

During the course of the inspection, the inspector(s) spoke with Director, Director of Nursing, Two Registered Nurses, Registered Practical Nurse, Food Services Supervisor, Dietitian, Housekeeping and Laundry Supervisor, Three Personal Care Givers, Health Care Aide, Housekeeping Aide, Dietary Aide and Resident.

During the course of the inspection, the inspector(s) reviewed the critical incidents, related internal investigations, resident's clinical records, policies and procedures for Falls Prevention and Missing Residents, and related staff training. Observations of residents were conducted in resident home areas.

The following Inspection Protocols were used during this inspection:  
Critical Incident Response

Dining Observation

Falls Prevention

Prevention of Abuse, Neglect and Retaliation

Findings of Non-Compliance were found during this inspection.

<b>NON-COMPLIANCE / NON - RESPECT DES EXIGENCES</b>	
<b>Legend</b>	<b>Legendé</b>
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



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.

**WN #1: The Licensee has failed to comply with O.Reg 79/10, s. 71. Menu planning**

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

**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 Licensee failed to ensure the planned menu items were offered and available at each meal when the following occurred:

During dinner service November 5, 2013, in home's dining room it was observed that 6 of 6 residents on a puree textured diet were not offered puree bread as per the planned therapeutic menu.

In an interview with the Dietary Aide serving dinner, she confirmed it was "her mistake" and she did have the puree bread available to serve to residents.

In an interview with the Supervisor of Food Services she confirmed her expectation that residents be offered the planned menu items at each meal. [s. 71. (4)]



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Issued on this 12th day of November, 2013

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

*Bonnie MacDavall*