



**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
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Division de la responsabilisation et de la performance du
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Direction de l'amélioration de la performance et de la
conformité

<input type="checkbox"/> Licensee Copy/Copie du Titulaire	<input checked="" type="checkbox"/> Public Copy/Copie Public
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Date(s) of inspection/Date de l'inspection	Inspection No/ d'inspection	Type of Inspection/Genre d'inspection
February 1, 2011	2011_171_2979_01Feb080721	L-01880 – Complaint
Licensee/Titulaire		
The Homewood Corporation, 150 Delhi Street, Guelph, ON, N1E 6K9		
Long-Term Care Home/Foyer de soins de longue durée		
The Village of Glendale Crossing, 3030 Singleton Ave, London ON N6L 0B6		
Name of Inspector(s)/Nom de l'inspecteur(s)		
Elisa Wilson, Long-Term Care Homes Inspector (#171)		
Inspection Summary/Sommaire d'inspection		



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The purpose of this inspection was to conduct a complaint inspection regarding food services and housekeeping.

During the course of the inspection, the inspector spoke with: the administrator, foodservice manager, environmental service manager, registered dietitian, chef, dietary aides, personal support workers, registered staff and residents.

The inspector observed lunch and dinner service on February 1, 2011 in two different Home areas and taste tested all menu items for all diets at both meals observed. The inspector reviewed minutes from the Food Committee meetings and Resident's Council meetings. The inspector inspected common living areas and individual resident rooms for cleanliness.

The following Inspection Protocols were used during this inspection:

Food Quality
Dining Observation

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

1 WN
1 VPC

NON-COMPLIANCE / (Non-respectés)

Definitions/Définitions

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

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.)

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



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WN #1: The Licensee has failed to comply with O.Reg. 79/10, s.228.1 and .4.ii. Every licensee of a long-term care home shall ensure that the quality improvement and utilization review system required under section 84 of the Act complies with the following requirements:


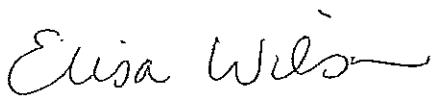
1. There must be a written description of the system that includes its goals, objectives, policies, procedures and protocols and a process to identify initiatives for review.
4. A record must be maintained by the licensee setting out,
 - ii. the names of the persons who participated in evaluations, and the dates improvements were implemented,

Findings:

1. The Home does not have a written description of the quality management system that includes its goals, objectives, policies, procedures and protocols. The foodservices department participates in a food committee meeting which provides the residents with an avenue to make suggestions or voice complaints. The department has responded to resident's suggestions with menu changes, some of which are reported in the minutes, however policies, procedures and protocols are not in place to guide staff and ensure documentation of all quality improvement initiatives.
2. The Home has not documented the names of the persons who participated in evaluations and the dates improvements were implemented for all quality improvement changes made in the foodservice department.

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 the Home has a written description of the quality improvement program, that includes its goals, objectives, policies, procedures and protocols and the Home must maintain records setting out the names of the persons who participated in evaluations, and the dates improvements were implemented, to be implemented voluntarily.

<p>Signature of Licensee or Representative of Licensee Signature du Titulaire du représentant désigné</p> 	<p>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.</p> 
<p>Title: <i>General Manager</i> Date: <i>Mar 25/11</i></p>	<p>Date of Report: (if different from date(s) of inspection). <i>Feb 2, 2011</i></p>