



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 prévue le Loi de 2007 les foyers de soins de longue

Health System Accountability and Performance Division
Performance Improvement and Compliance Branch
Division de la responsabilisation et de la performance du système de santé
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Table with 3 columns: Date(s) of inspection, Inspection No, Type of Inspection. Row 1: Sep 24, 25, 28, Oct 1, 2, 3, 2012; 2012_066107_0014; Complaint

Licensee/Titulaire de permis

BELLA SENIOR CARE RESIDENCES INC.
1000 FINCH AVENUE WEST, SUITE 901, TORONTO, ON, M3J-2V5

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

BELLA SENIOR CARE RESIDENCES INC.
8720 Willoughby Drive, NIAGARA FALLS, ON, L2G-7X3

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

MICHELLE WARRENER (107)

Inspection Summary/Résumé de l'inspection

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

During the course of the inspection, the inspector(s) spoke with Residents and Family members, The Administrator, The Director of Care (DOC), Food Service Manager (FSM) and Food Service Supervisor (FSS), Registered Dietitian, Registered Nursing staff, front line dietary and nursing staff

During the course of the inspection, the inspector(s) Observed the breakfast and lunch meal service, observed food production, reviewed maintenance and hot water temperature logs (referred to Environmental Health Inspector), food temperature logs, and observed the food production systems related to inspection H-000759-12

The following Inspection Protocols were used during this inspection:

Dining Observation

Food Quality

Safe and Secure Home

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 LTCHA, 2007 S.O. 2007, c.8, s. 101. Conditions of licence Specifically failed to comply with the following subsections:

s. 101. (4) Every licensee shall comply with the conditions to which the licence is subject. 2007, c. 8, s. 101. (4).

Findings/Faits saillants :

1. The licensee did not comply with the conditions to which the license is subject. Section 4.1 under Schedule C of the Long-Term Care Home Service Accountability Agreement (LSAA) with the Local Health Integration Network (LHIN) under the Local Health System Integration Act, 2006, reads, "The Health Service Provider shall use the funding allocated for an Envelope for the use set out in the Applicable Policy". The Long-Term Care Homes Funding Policy of July 1, 2010 for Eligible Expenditures for Long-Term Care Homes Raw Food (RF) Envelope Section 3.1.2. reads, "Expenditures for the purchase of raw food including food materials used to sustain life including supplementary substances such as condiments and prepared therapeutic food supplements ordered by a physician, nurse practitioner, registered dietitian, and/or registered nurse, as appropriate....Alcohol and food for non-residents are not included in this envelope."

a) Money from the Raw Food funding envelope has been consistently used to pay for bottled water that is consumed by people other than residents. It was observed during this inspection that staff, family, and visitors were consuming the bottled water, however, the raw food envelope was being used to pay for the water. Further clarification of this requirement was provided in the Eligible Expenditures Grey Items document, "Bottled water for anyone except residents is to be charged to Other Accommodation".

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 complying with the conditions to which the license is subject, to be implemented voluntarily.

WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 71. Menu planning Specifically failed to comply with the following subsections:

s. 71. (2) The licensee shall ensure that each menu,
(a) provides for adequate nutrients, fibre and energy for the residents based on the current Dietary Reference Intakes (DRIs) established in the reports overseen by the United States National Academies and published by National Academy Press, as they may exist from time to time; and
(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).

Findings/Faits saillants :

1. [O.Reg. 79/10, s. 71(2)(b)]

The menu did not provide for a variety of foods each day from all food groups in keeping with Canada's Food Guide. The menu was repetitious and the same items are served on the same day of the week on consecutive weeks, the same type of food was served for both entree choices (e.g. beef for both choices), and the same items were repeated throughout the menu cycle. Resident and Management staff interview identified concerns with menu repetition. Some examples (list not inclusive):

Week 1 - salad type sandwiches 4-5 times, orange sherbet twice, canned peaches/pears 4-5 times, strawberry dessert 3 times, cake and fruit sauce 2 times, pudding 4 times, 2 breaded items at the same meal supper Wednesday

Week 2 - 2 beef choices for the supper meal Saturday, salad type sandwiches 5 times, canned peaches/pears 4 times, orange sherbet on Sunday (served last Sunday), ice cream served Tuesday supper Week 1 & 2 and again Friday lunch

Week 1 and 2, meatballs served Thursday supper Week 1 and 2, ham sandwich served Monday lunch week 1, 2, 4

Week 3 - butterscotch ice cream twice in one week

Week 4 - salad type sandwiches/filling 4-5 times (3 days in a row at lunch), pudding at lunch 2 days in a row, ice cream Tuesday supper Week 1, 2, 4, fish cakes Monday (fish nuggets the day before), ham sandwich Monday week 1, 2, 4, tuna salad lunch Sunday Week 1, 4 and seafood salad Week 2, jello Sunday lunch Week 4, 3.

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 that the home's menu cycle 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, to be implemented voluntarily.

WN #3: The Licensee has failed to comply with O.Reg 79/10, s. 8. Policies, etc., to be followed, and records Specifically failed to comply with the following subsections:

s. 8. (1) Where the Act or this Regulation requires the licensee of a long-term care home to have, institute or otherwise put in place any plan, policy, protocol, procedure, strategy or system, the licensee is required to ensure that the plan, policy, protocol, procedure, strategy or system,
(a) is in compliance with and is implemented in accordance with applicable requirements under the Act; and
(b) is complied with. O. Reg. 79/10, s. 8 (1).

Findings/Faits saillants :

1. [O.Reg. 79/10, s. 8(1)(b)]

The licensee did not ensure that where the Act or this Regulation requires the licensee of a long-term care home to have, institute or otherwise put in place any plan, policy, protocol, procedure, strategy or system, the licensee is required to ensure that the plan, policy, protocol, procedure, strategy or system, is complied with.

a) The home's food temperature monitoring policy was not complied with. The policy required that food temperatures were monitored prior to each meal and recorded on the food temperature monitoring records. Numerous omissions were noted.

(Reviewed August 10-31, 2012)

27 meals were omitted from the monitoring records in multiple dining areas.

Reviewed from September (Sept) 11-19, 2012:

7 meals were omitted from the monitoring records in multiple dining areas.

WN #4: The Licensee has failed to comply with O.Reg 79/10, s. 73. Dining and snack service



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Specifically failed to comply with the following subsections:

s. 73. (2) The licensee shall ensure that,

(a) no person simultaneously assists more than two residents who need total assistance with eating or drinking; and

(b) 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/Faits saillants :

1. [O.Reg. 79/10, s. 73(2)(b)]

Not all residents requiring assistance with eating and drinking had staff available to provide the assistance when the meal (including beverages) was served. At the breakfast meal September 24, 2012, beverages and food were placed on the table for residents prior to assistance being available. Beverages were placed on tables prior to residents getting to the dining room. Two residents at one table in an identified home area, who required assistance with eating, were noted to be sleeping at the table and hadn't touched their cereal that had been placed on the table prior to the assistance being available. Resident #1, at the same table, required assistance with eating, and was reaching for their beverages during the meal and knocked the beverages over spilling them. Staff came and removed the beverages, resulting in the resident not receiving beverages at the meal until requested by the Inspector. A different staff member than the one who cleared up the beverages came to assist the resident at a later time and was not aware that the beverages had been removed from the table.

WN #5: The Licensee has failed to comply with O.Reg 79/10, s. 72. Food production

Specifically failed to comply with the following subsections:

s. 72. (2) The food production system must, at a minimum, provide for,

(a) a 24-hour supply of perishable and a three-day supply of non-perishable foods;

(b) a three-day supply of nutritional supplements, enteral or parenteral formulas as applicable;

(c) standardized recipes and production sheets for all menus;

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

(e) menu substitutions that are comparable to the planned menu;

(f) communication to residents and staff of any menu substitutions; and

(g) documentation on the production sheet of any menu substitutions. 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

(b) prevent adulteration, contamination and food borne illness. O. Reg. 79/10, s. 72 (3).

Findings/Faits saillants :



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1. [O.Reg. 79/10, s. 72(3)(a)]

Not all food was prepared and served using methods that preserved taste, nutritive value, appearance and food quality. a) Not all staff preparing the lunch meal September 24, 2012 were following the planned recipes to ensure taste, nutritive value, appearance and food quality were preserved. Some examples: The recipe for the omelet was lacking in spices and the cook preparing the meal added additional spices for flavour. Staff interview confirmed that some staff followed the planned recipes and some staff did not, resulting in variations in flavour, texture and nutritive value of the meal depending on the staff scheduled to cook. Resident interview confirmed that there were variations in quality and flavour depending on the cook.

Variations from the planned recipes were noted for the omelet, salmon salad sandwich (recipe stated fresh onions, fresh celery, lemon juice, salt, white pepper, miracle whip, and sweet relish, however, the sandwich filling was prepared with miracle whip and dill); a sliced ham sandwich was planned, however, a ham salad sandwich was prepared (using relish and mayonnaise); chili was prepared with additional spices versus what was identified in the planned recipe.

b) At least 18 menu changes were noted during a one month period from August to September 2012, many of these changes related to budgetary concerns. Some of the menu changes resulted in different types of meats (e.g. beef to pork), fresh fruit to canned fruit, different types of desserts, and hot vegetables to cold vegetables, resulting in differences in nutritive value and reduced variety from the planned menu.

2. [O.Reg. 72(2)(c)]

Standardized recipes were not in place for some of the planned menu items on September 20 and 24, 2012. A recipe was not available for staff reference for the pasta primavera served at the lunch meal September 20. Staff confirmed a recipe was not available for the pasta primavera and the recipes available for staff reference did not always reflect the items being served to residents (e.g. sliced ham sandwich versus ham salad sandwich; recipe was for a different type of soup than what was served; recipe stated ham and cheese quiche versus pasta primavera).

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 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 and that the food production system, at minimum, provides for standardized recipes and production sheets for all menus, to be implemented voluntarily.

Issued on this 3rd day of October, 2012

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

[Handwritten signature: J. Wanner, RD]