



**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**

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Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Sep 13, 2013	2013_139163_0022	S-000360-13	Other

Licensee/Titulaire de permis

CHAPLEAU HEALTH SERVICES
C/O CHAPLEAU GENERAL HOSPITAL, 6 BROOMHEAD ROAD, CHAPLEAU, ON,
P0M-1K0

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

THE BIGNUCOLO RESIDENCE
C/O Chapleau General Hospital, P. O. Box 757, 6 Broomhead Road, CHAPLEAU,
ON, P0M-1K0

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

DIANA STENLUND (163)

Inspection Summary/Résumé de l'inspection



The purpose of this inspection was to conduct an Other inspection.

This inspection was conducted on the following date(s): September 11, 2013

During the course of the inspection, the inspector(s) spoke with the Team Lead, registered nursing staff, dietary staff, registered dietitian (RD), Manager of Activation, a representative of the Residents' Council and residents.

During the course of the inspection, the inspector(s) walked through resident home areas, observed staff to resident interaction and care, reviewed Resident Council Meeting Minutes, and observed lunch meal service.

The following Inspection Protocols were used during this inspection:

Dining Observation

Residents' Council

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

Legend	Legendé
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. (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).**

Findings/Faits saillants :

1. Inspector observed lunch meal service. It was noted there was only one selection of a pureed entrée and vegetable being served to residents on a pureed textured diet. Inspector interviewed the RD who confirmed that alternate menu options for the entrée and vegetable were not available to residents on a pureed diet. The licensee failed to ensure that for those residents on a pureed textured diet, alternative choices of entrée and vegetable are available at lunch. [s. 71. (1) (c)]



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 for those residents on a pureed textured diet, alternative choices of entrée and vegetable are available at lunch, to be implemented voluntarily.

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

Specifically failed to comply with the following:

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. Inspector observed lunch meal service. It was noted that the portion size of three menu items (bean salad, pureed entrée, and mashed potatoes) were not served according to the portion sizes as identified on the therapeutic menu. The inspector interviewed the RD who confirmed that staff had failed to use appropriate sized serving utensils for those menu items. The licensee has not ensured that all food in the food production system are prepared, stored, and served using methods to, preserve taste, nutritive value, appearance and food quality. [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 served during meal service, specifically the bean salad, entrée, and mashed potatoes, are served using proper sized serving utensils to preserve taste, nutritive value, appearance and food quality, to be implemented voluntarily.



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Issued on this 13th day of September, 2013

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

Original signed by:

Diana Stenlund