



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: Oct 23, 25, Nov 1, 2012; 2012_183135_0009; Follow up

Licensee/Titulaire de permis

1230839 ONTARIO LIMITED
708 WELLINGTON STREET, WALLACEBURG, ON, N8A-2Y6

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

BROUILLETTE MANOR
11900 BROUILLETTE COURT, TECUMSEH, ON, N8N-4X8

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

BONNIE MACDONALD (135)

Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct a Follow up inspection.

During the course of the inspection, the inspector(s) spoke with Director of Care, Food Services and Nutritional Manager, 3 Registered Practical Nurses, Recreation Care Aide, 3 Personal Support Workers, 2 Health Care Aides, Cook, Dietary Aide and 6 residents.

During the course of the inspection, the inspector(s) reviewed clinical health records, policies and procedures, interviewed staff and residents and observed lunch and PM. snack service in the home.

Log #L-000007-12 Follow Up to Orders

The following Inspection Protocols were used during this inspection:

Dining Observation

Food Quality

Nutrition and Hydration

Snack Observation

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON-RESPECT DES EXIGENCES

Legend	Legendé
WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order	WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité 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. 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).**

Findings/Faits saillants :

1. During lunch service October 23, 2012, in the home's dining room the following menu items were not prepared as per the home's planned menu:

Puree and minced tomato salad, minced potato wedges, minced and puree peaches and ketchup for the puree cheese sandwich.

In interview, the cook confirmed the menu items were not prepared as per the planned menu.

In interview, the home's Food Services and Nutritional Manager confirmed it is her expectation that all menu items are prepared according to the planned menu. [O.Reg. 79/10, s. 72.(2)(d)]

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 ensuring all menu items are prepared according to the planned menu, to be implemented voluntarily.

WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 73. Dining and snack service

Specifically failed to comply with the following subsections:

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:

1. Communication of the seven-day and daily menus to residents.
2. Review, subject to compliance with subsection 71 (6), of meal and snack times by the Residents' Council.
3. Meal service in a congregate dining setting unless a resident's assessed needs indicate otherwise.
4. Monitoring of all residents during meals.
5. A process to ensure that food service workers and other staff assisting residents are aware of the residents' diets, special needs and preferences.
6. Food and fluids being served at a temperature that is both safe and palatable to the residents.
7. Sufficient time for every resident to eat at his or her own pace.
8. Course by course service of meals for each resident, unless otherwise indicated by the resident or by the resident's assessed needs.
9. Providing residents with any eating aids, assistive devices, personal assistance and encouragement required to safely eat and drink as comfortably and independently as possible.
10. Proper techniques to assist residents with eating, including safe positioning of residents who require assistance.
11. Appropriate furnishings and equipment in resident dining areas, including comfortable dining room chairs and dining room tables at an appropriate height to meet the needs of all residents and appropriate seating for staff who are assisting residents to eat. O. Reg. 79/10, s. 73 (1).

Findings/Faits saillants :

1. PM. snack service October 23, 2012, 3 out of 4 (75%) of residents observed needing assistance were not safely positioned when being fed their snacks/beverages, by staff.

In interview, the home's Director of Care confirmed her expectation that residents be safely positioned when they are being fed snacks.

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

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 ensuring that residents are safely positioned when being fed snacks, to be implemented voluntarily.

Issued on this 1st day of November, 2012

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

