



**Ministry of Health and Long-Term Care**

**Inspection Report under the Long-Term Care Homes Act, 2007**

**Ministère de la Santé et des Soins de longue durée**

**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  
Direction de l'amélioration de la performance et de la conformité

London Service Area Office  
291 King Street, 4th Floor  
LONDON, ON, N6B-1R8  
Telephone: (519) 675-7680  
Facsimile: (519) 675-7685

Bureau régional de services de London  
291, rue King, 4<sup>ème</sup> étage  
LONDON, ON, N6B-1R8  
Téléphone: (519) 675-7680  
Télécopieur: (519) 675-7685

Public Copy/Copie du public

Date(s) of inspection/Date(s) de l'inspection	Inspection No/ No de l'inspection	Type of Inspection/Genre d'inspection
Dec 16, 20, 2011; Jan 24, 2012	2011_090172_0044	Critical Incident

**Licensee/Titulaire de permis**

CARESSANT-CARE NURSING AND RETIREMENT HOMES LIMITED  
264 NORWICH AVENUE, WOODSTOCK, ON, N4S-3V9

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

CARESSANT CARE WOODSTOCK NURSING HOME  
81 FYFE AVENUE, WOODSTOCK, ON, N4S-8Y2

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

JOAN WOODLEY (172)

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

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

During the course of the inspection, the inspector(s) spoke with the Administrator, the Director of Care, the Nutrition Manager, a Registered Nurse, 3 Personal Support Workers/ Nurses Aides, and 1 Adult Dietary Aide.

During the course of the inspection, the inspector(s) held interviews, reviewed health care records, job routines, staffing levels, and observed meal service.

The following Inspection Protocols were used during this inspection:

Dining Observation

Food Quality

Sufficient Staffing

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.)	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.
The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.	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. 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. Staff interviews were held with both dietary and nursing staff on December 16, 2011. Staff for the most part were not knowledgeable as to what food choices might be included as possible selections not advisable when a resident has a certain food allergy. Staff interview with Administrator revealed the home had found a similar lack of knowledge by staff when staff were asked if a resident was allergic to a certain food item what menu items would this include.  
 [ LTCHA, 2007,S.O.2007,c.8,s.73(1)5]

**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 be implemented voluntarily.**

**WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 76. Cooks**

Specifically failed to comply with the following subsections:

s. 76. (1) Every licensee of a long-term care home shall ensure that there is at least one cook who works at least 35 hours per week in that position on site at the home. O. Reg. 79/10, s. 76 (1).

**Findings/Faits saillants :**

1. Staff interview with Nutrition Manager on December 16, 2011 revealed that all the adult dietary aides take their turns cooking. The home does not have one cook that works at least 35 hours per week in that cook position . Staff interview with Administrator confirmed the adult dietary aides all take turns cooking and the home does not have one cook who works at least 35 hours per week in that position as cook.  
[LTCHA,2007,S.O.2007,c.8,s.76(1)]

**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 be implemented voluntarily.*

Issued on this 24th day of January, 2012

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

*Jean L. Madley*