



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

London Service Area Office 291 King Street, 4th Floor LONDON, ON, N6B-1R8

Bureau régional de services de London 291, rue King, 4ième étage LONDON, ON, N6B-1R8

Public Copy/Copie du public

Table with 3 columns: Date(s) of inspection, Inspection No, Type of Inspection. Row 1: Oct 3, 12, 2011, 2011_087128_0023, Complaint

Licensee/Titulaire de permis

DIVERSICARE VI LIMITED PARTNERSHIP 458 Glencairn Avenue, TORONTO, ON, M5N-1V7

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

CHELSEY PARK (OXFORD) NURSING HOME 310 OXFORD STREET WEST, LONDON, ON, N6H-4N6

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

RUTH HILDEBRAND (128)

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 the Production Supervisor/Nutrition Manager, Registered Dietitian, Dietetic Intern, Director of Care, Office Manager, four Dietary Aides, and ten residents.

During the course of the inspection, the inspector(s) observed partial lunch meals in the 2nd and 4th floor dining rooms; reviewed Food Advisory Committee minutes; menus including a theme menu and Residents' choice menu; Registered Dietitian menu approval letter; and selected standardized recipes and production sheets.

The following Inspection Protocols were used during this inspection:

Food Quality

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON-RESPECT DES EXIGENCES

Legend WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order	Legendé 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 LTCHA, 2007 S.O. 2007, c.8, s. 5. Every licensee of a long-term care home shall ensure that the home is a safe and secure environment for its residents. 2007, c. 8, s. 5.

Findings/Faits saillants :

1. On October 3, 2011 at 15:00 to 15:05, the dining room serveries on 5th, 4th and 3rd floors were found open and unattended after being accessed through the rear door of the elevator. Coffee makers and hot water urns, with a hot water temperature as high as 90 degrees Celsius, were accessible in the serveries.

On October 3, 2011 at 15:00, a staff interview was conducted with the Nutrition Manager/Production Supervisor to query the home's expectations related to safety and hot water urns being kept inaccessible to residents. She confirmed that the hot water and coffee urns were a safety risk and that the serveries should be kept locked when unattended.

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 coffee and hot water urns are inaccessible so that the home is a safe environment for residents, to be implemented voluntarily.

WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 91. Every licensee of a long-term care home shall ensure that all hazardous substances at the home are labelled properly and are kept inaccessible to residents at all times. O. Reg. 79/10, s. 91.

Findings/Faits saillants :

1. On October 3, 2011 at 15:00 to 15:05, the dining room serveries on 5th, 4th and 3rd floors were found open and unattended after being accessed through the rear door of the elevator. Hazardous chemicals were found in each of the serveries.

On October 3, 2011 at 15:00, a staff interview was conducted with the Nutrition Manager/Production Supervisor to query the home's expectations related to chemicals being kept inaccessible to residents. She confirmed that the home's expectation is that chemicals are to be kept locked at all times when they are unattended.



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
prévus le Loi de 2007 les
foyers de soins de longue

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 hazardous substances are kept inaccessible to residents at all times, to be implemented voluntarily.

Issued on this 12th day of October, 2011

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

A handwritten signature in cursive script that reads "Ruth Hildebrand".