

Ministry of Health and Long-Term Care
Health System Accountability and Performance Division
Performance Improvement and Compliance Branch

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Ministère de la Santé et des Soins de longue durée

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Date(s) of inspection/Date de l'inspection	Inspection No/ d'inspection	Type of Inspection/Genre d'inspection
November 24, 2010	2010_148_2645_23Nov131207	Complaint Log O-001984, O-001788
Licensee/Titulaire		
Hilltop Manor Nursing Home, 82 Colonel By Crescent Smith Falls Ontario, K7A 5B6 Fax: 613-269-3534		
Long-Term Care Home/Foyer de soins de longue durée		
Hilltop Manor Nursing Home, 1005 St Lawrence Street P.O Box 430 Merrickville Ontario, K0G 1N0 Fax: 613-269-3534		
Name of Inspector/Nom de l'inspecteur		
Amanda Nixon (ID #148)		

Inspection Summary/Sommaire d'inspection

The purpose of this inspection was to conduct a complaint inspection related to dining service and provision of dietary care needs for an identified resident.

During the course of the inspection, the inspector spoke with the Administrator, the day Registered Nurse and day Registered Practical Nurse, the Head Cook (Cook), Food Service Workers and Personal Support Workers (PSW) responsible for the care of the resident.

During the course of the inspection, the inspector reviewed the identified resident's health record, nutritional intake records for meal, nourishment and supplements, the home's planned menus and food temperature audit sheets. In addition, the 12:00pm meal service was observed in both the main and alternate dining rooms.

The following Inspection Protocols were used during this inspection:

- Nutrition and Hydration
- Food Quality

Findings of Non-Compliance were found during this inspection. The following action was taken:

3 WN
3 VPC



NON-COMPLIANCE / (Non-respectés)

Definitions/Définitions

- WN – Written Notifications/Avis écrit
- VPC – Voluntary Plan of Correction/Plan de redressement volontaire
- DR – Director Referral/Régisseur envoyé
- CO – Compliance Order/Ordres de conformité
- WAO – Work and Activity Order/Ordres: travaux et activités

The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.

Le suivant constituer un avis d'écrit de l'exigence prévue le paragraphe 1 de section 152 de les foyers de soins de longue durée.

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.)

Non-respect avec les exigences sur le Loi de 2007 les foyers de soins de longue durée à trouvé. (Une exigence dans le loi comprend les exigences contenues dans les points énumérés dans la définition de "exigence prévue par la présente loi" au paragraphe 2(1) de la loi.

WN #1: The Licensee has failed to comply with O.Reg. 79/10, s.68
 (2) Every licensee of a long-term care home shall ensure that the programs include,
 (d) a system to monitor and evaluate the food and fluid intake of residents with identified risks related to nutrition and hydration.

Findings:

1. The plan of care for an identified resident states that he/she is to be provided 125 ml Resource Fruit Boost (supplement) at each meal and at the afternoon nourishment pass related to the resident's low Body Mass Index and body weight below healthy weight range.
2. At 11:08pm interview with a Registered Nurse, who states that supplement intake is monitored using meal and snack intake records. It is the responsibility of the PSW's to document the amount of supplement consumed on the "PM Nourishment Tick-off Sheet" and the "Meal Supplement" Sheet.
3. The supplement, to be provided to the identified resident at the afternoon nourishment, is not documented on the "PM Nourishment Tick-off Sheet" from October 24 to November 23, 2010.
4. There are several gaps in the documentation related to the meal time supplement, including no documentation of the supper supplement from November 1 to November 18, 2010 and from November 21 to November 23, 2010.
5. Due to the findings, the home does not have a system in place to monitor food and fluid intake of residents at nutrition risk.

Inspector ID #: 148

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 the intake of nutritional supplements, in accordance with the resident's plan of care, are monitored, to be implemented voluntarily.

WN #2: The Licensee has failed to comply with O.Reg. 79/10, s.71
Every licensee of a long-term care home shall ensure that the home's menu cycle,
(a) is a minimum of 21 days in duration;
(b) includes menus for regular, therapeutic and texture modified diets for both meals and snacks;

Findings:

1. The home's planned menu cycle for nourishment pass, for all textures and therapeutics, is 3 days in length.
2. There are residents in the home that require modified diabetic diet, puree and minced texture modifications. The home's planned 2010 Fall/Winter menu cycle, for meals, does not include menus for modified diabetic, minced or puree texture. The Cook, on duty November 24, 2010, utilized the menu for the regular diet, titled "Regular Week at a Glance" menu to prepare food items for all therapeutics and texture modifications.

Inspector ID #: 148

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 the home has a minimum 21 day menu cycle in place for the nourishment pass and ensure that there is a menu cycle for all therapeutic diets and texture modifications, as offered to residents in the home, to be implemented voluntarily.

WN #3: The Licensee has failed to comply with O.Reg. 79/10, s.72
(2) The food production system must, at a minimum, provide for,
(c) standardized recipes and production sheets for all menus;

Findings:

1. On November 4, 2010, the Cook did not have production sheets available to guide the food production of the home's planned menu
2. On November 4, 2010, the second choice puree vegetable and the puree pasta salad was not prepared. As a result residents requiring a puree texture modification were not offered a choice of vegetable or starch.

Inspector ID #: 148

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 the home has implemented production sheets for the menu cycle, to be implemented voluntarily.



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 durée

<p>Signature of Licensee or Representative of Licensee Signature du Titulaire du représentant désigné</p>	<p>Signature of Health System Accountability and Performance Division representative/Signature du (de la) représentant(e) de la Division de la responsabilisation et de la performance du système de santé.</p> <p><i>Amanda Nix RD LTCH Inspector</i></p>
<p>Title: _____ Date: _____</p>	<p>Date of Report: (if different from date(s) of inspection).</p> <p><i>December 6, 2010</i></p>