



**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**

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**Public Copy/Copie du public**

<b>Date(s) of inspection/Date(s) de l'inspection</b>	<b>Inspection No/ No de l'inspection</b>	<b>Type of Inspection/Genre d'inspection</b>
Jun 14, 15, Jul 4, 2011	2011_057163_0002	Complaint

**Licensee/Titulaire de permis**

HORNEPAYNE COMMUNITY HOSPITAL  
278 FRONT STREET, P.O. BOX 190, HORNEPAYNE, ON, P0M-1Z0

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

HORNEPAYNE COMMUNITY HOSPITAL  
278 FRONT STREET, P.O. BOX 190, HORNEPAYNE, ON, P0M-1Z0

**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 a Complaint inspection.**

During the course of the inspection, the inspector(s) spoke with the Administrator, director of care (DOC), nutrition manager (NM),personal support workers (PSW), activity director, registered nursing staff and residents.

During the course of the inspection, the inspector(s) Observed the last half of breakfast and all of lunch meal.  
Walked throughout the entire home area and observed residents involved in scheduled activities.  
Reviewed the menu, diet lists and activity schedules.  
Reviewed medical documentation.

**The following Inspection Protocols were used in part or in whole during this inspection:**

**Food Quality**

**Nutrition and Hydration**

**Recreation and Social Activities**

**Findings of Non-Compliance were found during this inspection.**

**NON-COMPLIANCE / NON-RESPECT DES EXIGENCES**



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<b>Definitions</b>  WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order	<b>Définitions</b>  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. 71. Menu planning**

**Specifically failed to comply with the following subsections:**

- s. 71. (1) 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;**  
**(c) includes alternative choices of entrees, vegetables and desserts at lunch and dinner;**  
**(d) includes alternative beverage choices at meals and snacks;**  
**(e) is approved by a registered dietitian who is a member of the staff of the home;**  
**(f) is reviewed by the Residents' Council for the home; and**  
**(g) is reviewed and updated at least annually. O. Reg. 79/10, s. 71 (1).**

**Findings/Faits sayants :**

1. Jun 15, 2011 - Interview with NM:"We had a one week snack menu but now we just bring whatever we have but we try to do something special" ."We don't use a snack menu anymore".[s.71(1)(b)]
2. During the interview with the NM on June 15/11 this inspector asked for a copy of the snack menu, however the NM was not able to provide proof of any snack menu.[s.71(1)(b)]

**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 a snack menu is developed and implemented, considering menu cycle length, therapeutic diets and textures offered by the home, to be implemented voluntarily.**

**Issued on this 25th day of July, 2011**



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