

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

**Rapport d'inspection en vertu de  
la Loi de 2007 sur les foyers de  
soins de longue durée**

**Long-Term Care Operations Division  
Long-Term Care Inspections Branch**

**Division des opérations relatives aux  
soins de longue durée  
Inspection de soins de longue durée**

Sudbury Service Area Office  
159 Cedar Street Suite 403  
SUDBURY ON P3E 6A5  
Telephone: (705) 564-3130  
Facsimile: (705) 564-3133

Bureau régional de services de  
Sudbury  
159, rue Cedar Bureau 403  
SUDBURY ON P3E 6A5  
Téléphone: (705) 564-3130  
Télécopieur: (705) 564-3133

**Public Copy/Copie du rapport public**

---

<b>Report Date(s) / Date(s) du Rapport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / No de registre</b>	<b>Type of Inspection / Genre d'inspection</b>
Jul 20, 2020	2020_740621_0009	021530-19	Follow up

---

**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**

JULIE KUORIKOSKI (621)

---

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

---

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

**This inspection was conducted on the following date(s): July 6 - 7, 2020.**

**The following Compliance Order (CO), issued during inspection**

**#2019\_740621\_0033, was**

**inspected during this Follow Up Inspection:**

**- One intake, regarding CO #001, related to section 73 (1) of Ontario Regulation 79/10.**

**During the course of the inspection, the inspector(s) spoke with the Nutrition Manager (NM), the Support Services Manager (SSM), Cooks, Dietary Aides (DA), the Finance Clerk serving in the capacity of Acting Educator, and residents.**

**The Inspector also conducted a tour of the resident care areas, observed resident care activities, reviewed the home's supporting documentation, including resident health care records, the food service menu system, auditing records, staff training and education records, as well as specific licensee policies, procedures and programs.**

**The following Inspection Protocols were used during this inspection:  
Food Quality**

**During the course of this inspection, Non-Compliances were issued.**

**1 WN(s)**

**0 VPC(s)**

**1 CO(s)**

**0 DR(s)**

**0 WAO(s)**

**The following previously issued Order(s) were found to be in compliance at the time of this inspection:**

**Les Ordre(s) suivants émis antérieurement ont été trouvés en conformité lors de cette inspection:**

REQUIREMENT/ EXIGENCE	TYPE OF ACTION/ GENRE DE MESURE	INSPECTION # / DE L'INSPECTION	NO	INSPECTOR ID #/ NO DE L'INSPECTEUR
O.Reg 79/10 s. 73. (1)	CO #001	2019_740621_0033		621

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

Legend	Légende
<p>WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order</p>	<p>WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités</p>
<p>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).</p> <p>The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.</p>	<p>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.</p> <p>Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.</p>

**WN #1: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 101. Conditions of licence**

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

**Conditions of licence**

**s. 101. (3) It is a condition of every licence that the licensee shall comply with this Act, the Local Health System Integration Act, 2006, the Connecting Care Act, 2019, the regulations, and every directive issued, order made or agreement entered into under this Act and those Acts.**

**Findings/Faits saillants :**

1. The licensee has failed to ensure that they complied with this Act, the Local Health System Integration Act, 2006, the Connecting Care Act, 2019, the regulations, and every directive issued, order made or agreement entered into under this Act and those Acts.

The licensee was to be compliant with Compliance Order (CO) #001 from Inspection #2019\_740621\_0033 that was issued to the home on November 7, 2019, which had a compliance due date of February 21, 2020.

The licensee was ordered to ensure that they were compliant with section 73 (1) of the Ontario Regulation 79/10. Specifically the licensee was ordered to:

- a) Ensure that the home has a process for monitoring and recording temperatures of all planned menu items, including menu additions and substitutions, before resident meal service is initiated;
- b) Ensure a process is implemented, with supporting documentation, to immediately address any unsafe temperatures;
- c) Ensure that there is training/re-training of all food services staff on safe hot and cold holding temperatures of menu items served to residents. Ensure that records are kept, to identify who was trained, when the training occurred, and what the training entailed; and
- d) Ensure that an auditing process is implemented at regular intervals, to monitor temperature records for accuracy, completeness, and to ensure unsafe temperatures have been actioned.

While the licensee complied with sections “a, b, and d” of the compliance order, non-compliance continued to be identified with section “c”, where the licensee was ordered to

**Inspection Report under  
the Long-Term Care  
Homes Act, 2007****Rapport d'inspection en vertu de  
la Loi de 2007 sur les foyers de  
soins de longue durée**

train/re-train all food services staff on safe hot and cold holding temperatures, and ensure that records were kept, to identify who was trained, when the training occurred, and what the training entailed.

During an interview with Support Services Manager (SSM) #101, they reported to Inspector #621 that they were the point person responsible for completing food temperature training with food services staff, as identified in the order. SSM #101 identified that while they spoke informally with cooking staff about safe food temperatures and the process for tracking temperatures, they had not spoke with the dietary aides, and did not keep a record of which food service staff they spoke with, the details of those discussions, or when those discussions had occurred. SSM #101 further indicated that cooks and dietary aides were required to complete three food safety modules as part of online education through Surge Learning annually. However, on review of completed food safety modules from Surge Learning during the compliance order period of November 7, 2019 – February 21, 2020, 10 out of 10 or 100% of food service staff who required training/re-training on safe food temperatures, had not completed this training. SSM #101 reported that the home's Educator had been off work during this time, and that the food safety modules for 2020 had only been populated onto Surge Learning on July 6, 2020, once it was discovered that auto-population of the modules had not occurred.

During an interview with Nutrition Manager (NM) #100, they reported that both they and SSM #101 were responsible for completing follow up to the order to ensure all the elements of the order had been addressed. They identified however, that while SSM #101 had informed them of the order requirements, they had not actually seen a copy of the order prior to inspection. NM #100 reported that it was their expectation that food services staff had completed food safety modules from Surge Learning to satisfy the training/retraining requirements for the order, prior to the compliance order due date. However, they identified that they had no record of these modules being completed by all food services staff between November 7, 2019 and February 21, 2020. Additionally, they identified that SSM #101 had provided impromptu education concerning safe food temperatures with food service staff, but that details of such discussions had not been documented. [s. 101. (3)]

***Additional Required Actions:***

***CO # - 001 will be served on the licensee. Refer to the "Order(s) of the Inspector".***

---

**Issued on this 20th day of July, 2020**

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

**Original report signed by the inspector.**

**Order(s) of the Inspector**

**Ordre(s) de l'inspecteur**

Pursuant to section 153 and/or  
section 154 of the *Long-Term  
Care Homes Act, 2007*, S.O.  
2007, c. 8

Aux termes de l'article 153 et/ou de  
l'article 154 de la *Loi de 2007 sur les  
foyers de soins de longue durée*, L.O.  
2007, chap. 8

Long-Term Care Operations Division  
Long-Term Care Inspections Branch

Division des opérations relatives aux soins de longue durée  
Inspection de soins de longue durée

**Public Copy/Copie du rapport public**

---

**Name of Inspector (ID #) /**

**Nom de l'inspecteur (No) :** JULIE KUORIKOSKI (621)

**Inspection No. /**

**No de l'inspection :** 2020\_740621\_0009

**Log No. /**

**No de registre :** 021530-19

**Type of Inspection /**

**Genre d'inspection:** Follow up

**Report Date(s) /**

**Date(s) du Rapport :** Jul 20, 2020

**Licensee /**

**Titulaire de permis :** Hornepayne Community Hospital  
278 Front Street, P.O. Box 190, HORNEPAYNE, ON,  
P0M-1Z0

**LTC Home /**

**Foyer de SLD :** Hornepayne Community Hospital  
278 Front Street, P.O. Box 190, HORNEPAYNE, ON,  
P0M-1Z0

**Name of Administrator /**

**Nom de l'administratrice**

**ou de l'administrateur :** Alison Morrison

---

**Order(s) of the Inspector**

**Ordre(s) de l'inspecteur**

Pursuant to section 153 and/or  
section 154 of the *Long-Term  
Care Homes Act, 2007*, S.O.  
2007, c. 8

Aux termes de l'article 153 et/ou de  
l'article 154 de la *Loi de 2007 sur les  
foyers de soins de longue durée*, L.O.  
2007, chap. 8

To Hornepayne Community Hospital, you are hereby required to comply with the following order(s) by the date(s) set out below:



**Order(s) of the Inspector****Ordre(s) de l'inspecteur**

Pursuant to section 153 and/or  
section 154 of the *Long-Term  
Care Homes Act, 2007*, S.O.  
2007, c. 8

Aux termes de l'article 153 et/ou de  
l'article 154 de la *Loi de 2007 sur les  
foyers de soins de longue durée*, L.O.  
2007, chap. 8

---

**Order # /****No d'ordre :** 001**Order Type /****Genre d'ordre :** Compliance Orders, s. 153. (1) (a)**Pursuant to / Aux termes de :**

LTCHA, 2007 S.O. 2007, c.8, Conditions of licence  
s. 101. (3) It is a condition of every licence that the licensee shall comply with this  
Act, the Local Health System Integration Act, 2006, the Connecting Care Act,  
2019, the regulations, and every directive issued, order made or agreement  
entered into under this Act and those Acts.

**Order / Ordre :**

The licensee must:

- a) Ensure that there is training/re-training of all cooks and dietary aides on safe  
hot and cold holding temperatures of planned menu items; and
- b) Ensure that records are kept to identify who was trained, when the training  
occurred, and what the training entailed.

**Grounds / Motifs :**

1. The licensee has failed to ensure that they complied with this Act, the Local  
Health System Integration Act, 2006, the Connecting Care Act, 2019, the  
regulations, and every directive issued, order made or agreement entered into  
under this Act and those Acts.

The licensee was to be compliant with Compliance Order (CO) #001 from  
Inspection #2019\_740621\_0033 that was issued to the home on November 7,  
2019, which had a compliance due date of February 21, 2020.

The licensee was ordered to ensure that they were compliant with section 73 (1)  
of the Ontario Regulation 79/10. Specifically the licensee was ordered to:

- a) Ensure that the home has a process for monitoring and recording  
temperatures of all planned menu items, including menu additions and  
substitutions, before resident meal service is initiated;

**Order(s) of the Inspector**

**Ordre(s) de l'inspecteur**

Pursuant to section 153 and/or section 154 of the *Long-Term Care Homes Act, 2007*, S.O. 2007, c. 8

Aux termes de l'article 153 et/ou de l'article 154 de la *Loi de 2007 sur les foyers de soins de longue durée*, L.O. 2007, chap. 8

- b) Ensure a process is implemented, with supporting documentation, to immediately address any unsafe temperatures;
- c) Ensure that there is training/re-training of all food services staff on safe hot and cold holding temperatures of menu items served to residents. Ensure that records are kept, to identify who was trained, when the training occurred, and what the training entailed; and
- d) Ensure that an auditing process is implemented at regular intervals, to monitor temperature records for accuracy, completeness, and to ensure unsafe temperatures have been actioned.

While the licensee complied with sections “a, b, and d” of the compliance order, non-compliance continued to be identified with section “c”, where the licensee was ordered to train/re-train all food services staff on safe hot and cold holding temperatures, and ensure that records were kept, to identify who was trained, when the training occurred, and what the training entailed.

During an interview with Support Services Manager (SSM) #101, they reported to Inspector #621 that they were the point person responsible for completing food temperature training with food services staff, as identified in the order. SSM #101 identified that while they spoke informally with cooking staff about safe food temperatures and the process for tracking temperatures, they had not spoke with the dietary aides, and did not keep a record of which food service staff they spoke with, the details of those discussions, or when those discussions had occurred. SSM #101 further indicated that cooks and dietary aides were required to complete three food safety modules as part of online education through Surge Learning annually. However, on review of completed food safety modules from Surge Learning during the compliance order period of November 7, 2019 – February 21, 2020, 10 out of 10 or 100% of food service staff who required training/re-training on safe food temperatures, had not completed this training. SSM #101 reported that the home’s Educator had been off work during this time, and that the food safety modules for 2020 had only been populated onto Surge Learning on July 6, 2020, once it was discovered that auto-population of the modules had not occurred.

During an interview with Nutrition Manager (NM) #100, they reported that both

**Order(s) of the Inspector****Ordre(s) de l'inspecteur**

Pursuant to section 153 and/or section 154 of the *Long-Term Care Homes Act, 2007*, S.O. 2007, c. 8

Aux termes de l'article 153 et/ou de l'article 154 de la *Loi de 2007 sur les foyers de soins de longue durée*, L.O. 2007, chap. 8

they and SSM #101 were responsible for completing follow up to the order to ensure all the elements of the order had been addressed. They identified however, that while SSM #101 had informed them of the order requirements, they had not actually seen a copy of the order prior to inspection. NM #100 reported that it was their expectation that food services staff had completed food safety modules from Surge Learning to satisfy the training/retraining requirements for the order, prior to the compliance order due date. However, they identified that they had no record of these modules being completed by all food services staff between November 7, 2019 and February 21, 2020. Additionally, they identified that SSM #101 had provided impromptu education concerning safe food temperatures with food service staff, but that details of such discussions had not been documented.

The severity of the issue was determined to be a level two, as there was a risk of actual harm to residents. The scope of the issue was a level three, as the home failed to train/retrain all food service staff on safe food temperatures, and maintain records to evidence that this training occurred. The home had a level two compliance history, as there was previous non-compliance with a different subsection of Ontario Regulation 79/10, within the previous 36 months. (621)

**This order must be complied with by /  
Vous devez vous conformer à cet ordre d'ici le :**

Aug 14, 2020

**Order(s) of the Inspector**

**Ordre(s) de l'inspecteur**

Pursuant to section 153 and/or  
section 154 of the *Long-Term  
Care Homes Act, 2007*, S.O.  
2007, c. 8

Aux termes de l'article 153 et/ou de  
l'article 154 de la *Loi de 2007 sur les  
foyers de soins de longue durée*, L.O.  
2007, chap. 8

**REVIEW/APPEAL INFORMATION**

TAKE NOTICE:

The Licensee has the right to request a review by the Director of this (these) Order(s) and to request that the Director stay this (these) Order(s) in accordance with section 163 of the Long-Term Care Homes Act, 2007.

The request for review by the Director must be made in writing and be served on the Director within 28 days from the day the order was served on the Licensee.

The written request for review must include,

- (a) the portions of the order in respect of which the review is requested;
- (b) any submissions that the Licensee wishes the Director to consider; and
- (c) an address for services for the Licensee.

The written request for review must be served personally, by registered mail, commercial courier or by fax upon:

Director  
c/o Appeals Coordinator  
Long-Term Care Inspections Branch  
Ministry of Long-Term Care  
1075 Bay Street, 11th Floor  
Toronto, ON M5S 2B1  
Fax: 416-327-7603

When service is made by registered mail, it is deemed to be made on the fifth day after the day of mailing, when service is made by a commercial courier it is deemed to be made on the second business day after the day the courier receives the document, and when service is made by fax, it is deemed to be made on the first business day after the day the fax is sent. If the Licensee is not served with written notice of the Director's decision within 28 days of receipt of the Licensee's request for review, this(these) Order(s) is(are) deemed to be confirmed by the Director and the Licensee is deemed to have been served with a copy of that decision on the expiry of the 28 day period.

The Licensee has the right to appeal the Director's decision on a request for review of an Inspector's Order(s) to the Health Services Appeal and Review Board (HSARB) in accordance with section 164 of the Long-Term Care Homes Act, 2007. The HSARB is an independent tribunal not connected with the Ministry. They are established by legislation to review matters concerning health care services. If the Licensee decides to request a hearing, the Licensee must, within 28 days of being served with the notice of the Director's decision, give a written notice of appeal to both:

**Order(s) of the Inspector**

**Ordre(s) de l'inspecteur**

Pursuant to section 153 and/or  
section 154 of the *Long-Term  
Care Homes Act, 2007*, S.O.  
2007, c. 8

Aux termes de l'article 153 et/ou de  
l'article 154 de la *Loi de 2007 sur les  
foyers de soins de longue durée*, L.O.  
2007, chap. 8

Health Services Appeal and Review Board and the Director

Attention Registrar  
Health Services Appeal and Review Board  
151 Bloor Street West, 9th Floor  
Toronto, ON M5S 1S4

Director  
c/o Appeals Coordinator  
Long-Term Care Inspections Branch  
Ministry of Long-Term Care  
1075 Bay Street, 11th Floor  
Toronto, ON M5S 2B1  
Fax: 416-327-7603

Upon receipt, the HSARB will acknowledge your notice of appeal and will provide instructions regarding the appeal process. The Licensee may learn more about the HSARB on the website [www.hsarb.on.ca](http://www.hsarb.on.ca).

**Order(s) of the Inspector**

**Ordre(s) de l'inspecteur**

Pursuant to section 153 and/or  
section 154 of the *Long-Term  
Care Homes Act, 2007*, S.O.  
2007, c. 8

Aux termes de l'article 153 et/ou de  
l'article 154 de la *Loi de 2007 sur les  
foyers de soins de longue durée*, L.O.  
2007, chap. 8

**RENSEIGNEMENTS RELATIFS AUX RÉEXAMENS DE DÉCISION ET AUX  
APPELS**

PRENEZ AVIS :

Le/la titulaire de permis a le droit de faire une demande de réexamen par le directeur de cet ordre ou de ces ordres, et de demander que le directeur suspende cet ordre ou ces ordres conformément à l'article 163 de la Loi de 2007 sur les foyers de soins de longue durée.

La demande au directeur doit être présentée par écrit et signifiée au directeur dans les 28 jours qui suivent la signification de l'ordre au/à la titulaire de permis.

La demande écrite doit comporter ce qui suit :

- a) les parties de l'ordre qui font l'objet de la demande de réexamen;
- b) les observations que le/la titulaire de permis souhaite que le directeur examine;
- c) l'adresse du/de la titulaire de permis aux fins de signification.

La demande de réexamen présentée par écrit doit être signifiée en personne, par courrier recommandé, par messagerie commerciale ou par télécopieur, au :

Directeur  
a/s du coordonnateur/de la coordonnatrice en matière d'appels  
Direction de l'inspection des foyers de soins de longue durée  
Ministère des Soins de longue durée  
1075, rue Bay, 11<sup>e</sup> étage  
Toronto ON M5S 2B1  
Télécopieur : 416-327-7603

**Order(s) of the Inspector****Ordre(s) de l'inspecteur**

Pursuant to section 153 and/or  
section 154 of the *Long-Term  
Care Homes Act, 2007*, S.O.  
2007, c. 8

Aux termes de l'article 153 et/ou de  
l'article 154 de la *Loi de 2007 sur les  
foyers de soins de longue durée*, L.O.  
2007, chap. 8

Quand la signification est faite par courrier recommandé, elle est réputée être faite le cinquième jour qui suit le jour de l'envoi, quand la signification est faite par messagerie commerciale, elle est réputée être faite le deuxième jour ouvrable après le jour où la messagerie reçoit le document, et lorsque la signification est faite par télécopieur, elle est réputée être faite le premier jour ouvrable qui suit le jour de l'envoi de la télécopie. Si un avis écrit de la décision du directeur n'est pas signifié au/à la titulaire de permis dans les 28 jours de la réception de la demande de réexamen présentée par le/la titulaire de permis, cet ordre ou ces ordres sont réputés être confirmés par le directeur, et le/la titulaire de permis est réputé(e) avoir reçu une copie de la décision en question à l'expiration de ce délai.

Le/la titulaire de permis a le droit d'interjeter appel devant la Commission d'appel et de révision des services de santé (CARSS) de la décision du directeur relative à une demande de réexamen d'un ordre ou des ordres d'un inspecteur ou d'une inspectrice conformément à l'article 164 de la Loi de 2007 sur les foyers de soins de longue durée. La CARSS est un tribunal autonome qui n'a pas de lien avec le ministère. Elle est créée par la loi pour examiner les questions relatives aux services de santé. Si le/la titulaire décide de faire une demande d'audience, il ou elle doit, dans les 28 jours de la signification de l'avis de la décision du directeur, donner par écrit un avis d'appel à la fois à :

la Commission d'appel et de révision des services de santé et au directeur

À l'attention du/de la registrateur(e)  
Commission d'appel et de révision  
des services de santé  
151, rue Bloor Ouest, 9e étage  
Toronto ON M5S 1S4

Directeur  
a/s du coordonnateur/de la coordonnatrice en matière  
d'appels  
Direction de l'inspection des foyers de soins de longue durée  
Ministère des Soins de longue durée  
1075, rue Bay, 11e étage  
Toronto ON M5S 2B1  
Télécopieur : 416-327-7603

À la réception de votre avis d'appel, la CARSS en accusera réception et fournira des instructions relatives au processus d'appel. Le/la titulaire de permis peut en savoir davantage sur la CARSS sur le site Web [www.hsarb.on.ca](http://www.hsarb.on.ca).

**Issued on this 20th day of July, 2020**

**Signature of Inspector /**

**Signature de l'inspecteur :**

**Name of Inspector /**

**Nom de l'inspecteur :** Julie Kuorikoski

**Service Area Office /**

**Bureau régional de services :** Sudbury Service Area Office