

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

Performance Improvement and Compliance Branch

Ministère de la Santé et des Soins de longue durée

Division de la responsabilisation et de la performance du système de santé

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

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

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Rapport d'inspection prévue le *Loi de 2007 les foyers de soins de longue durée*

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	Licensee Copy/Copie du Titulaire	Public Copy/Copie Public
Date(s) of inspection/Date de l'inspection	Inspection No/ d'inspection	Type of Inspection/Genre d'inspection
August 31, 2010-Sept.2, 2010	2010_135_9601_27 Aug.082039	Follow Up August 2009
Licensee/Titulaire Corporation of the County of Huron, c/o Huron	lea Home for the Aged, 820 Turnber	ry St. S., Brussels, ON N0G 1H0
Long-Term Care Home/Foyer de soins de longue durée Huronlea Home for the Aged, 820 Turnberry St. S., Brussels, Ontario N0G 1H0		
Name of Inspector(s)/Nom de l'inspecteur(s	;}	· · · · · · · · · · · · · · · · · · ·
Bonnie MacDonald (ID #135)		
Inspection Summary/Sommaire d'inspection		
The purpose of this inspection was to conduct a Dietary Follow-Up inspection in respect to the Long Term Care Homes Program Manual Standards and Criteria previously identified as B3.23, B3.33, M1.6, P1.4 and P1.14 issued August 2009.		
During the course of the inspection, the inspector spoke with: Director of Care, RAI Coordinator, Food Services Supervisor, Registered Nursing staff, Dietary staff, and Residents. A review of resident records was completed. Lunch, Dinner and Breakfast services were observed in the main dining room, chapel dining area and afternoon snack service was observed for the whole home.		
The following Inspection Protocols were used in part or in whole during this inspection: Food Quality Dining Observations Snack Observation		
•		
Findings of Non-Compliance were found during this inspection. The following action was taken:		
WN=8 VPC=8		
Corrected Non-Compliance is listed in the section titled Corrected Non-Compliance		



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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 <i>Long-Term Care Homes</i> <i>Act, 2007</i> (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 <i>Loi de 2007 les foyers de soins de longue durée</i> 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. 71(3)(b) The licensee shall ensure that each resident is offered a minimum of, a between-meal beverage in the morning and afternoon and a beverage in the evening after dinner

Findings:

1. Pm. Snack delivery Aug. 31/10, Resident at risk for dehydration and constipation was not offered 180mls.of fluid as per their plan of care.

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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 residents are offered beverages at snack; to be implemented voluntarily.

WN #2: The Licensee has failed to comply with: O. Reg. 79/10, s. 71(4) The licensee shall ensure that the planned menu items are offered and available at each meal and snack. Findings:

1. Pm. Snack Sept.1/10, lemonade was not provided on the snack cart as per the posted snack menu.

2. Breakfast Service Sept.1/10 in Main Dining room, all diets were not offered the choice of cottage cheese, as per the posted menu.

3. Lunch Aug. 31/10 in main dining room, 3 ground menu items and 2 puree menu items were not available as per the posted therapeutic menu: i.e. ground pulled pork, ground coleslaw, ground potato salad, puree potato salad and puree homemade loaf.



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4.	Dinner Aug. 31/10, in main dining room, 2 ground menu items and 2 puree menu items were not available
as	per the posted therapeutic menu: i.e. ground and puree mixed vegetable, and puree strawberry rhubarb.
5.	Resident on Gluten free diet was not provided menu alternatives for entrées or desserts at lunch or dinner
Aι	ıg. 31/10.

6. Diabetic diets were not provided diet strawberry rhubarb as per the posted menu at dinner Aug. 31/10.

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VPC - pursuant to	o the <i>Long-Term Care Homes Act, 2007</i> , S.O. 2007, c.8, s.152(2) the licensee is hereby

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, ensuring that all menu items are available and offered to residents at meals and snacks; to be implemented voluntarily.

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

Findings:

1. Lunch and Dinner menu items for Aug. 31/10- of the 32 standardized recipes required, 21 of those recipes were not available.

2. Production sheet for Lunch and Dinner Aug. 31/10 was missing production counts for 11 menu items i.e. ground pulled pork sandwich, ground potato salad, puree homemade loaf and puree stewed rhubarb.

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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, ensuring standardized recipes and production sheets are available for all menu cycles; to be implemented voluntarily.

WN #4: The Licensee has failed to comply with: O. Reg. 79/10, s. 72(2)(d) The food production system must, at a minimum, provide for, preparation of all menu items according to the planned menu;

- Findings:
 - 1. Lunch Aug. 31/10 in main dining room, 3 ground menu items and 2 puree menu items were not provided as per the posted therapeutic menu: i.e. ground pulled pork, ground coleslaw, ground potato salad, puree potato salad and puree homemade loaf.
 - 2. Dinner Aug. 31/10, in main dining room, 2 ground menu items and 2 puree menu items were not provided as per the posted therapeutic menu: i.e. ground and puree mixed vegetable and puree strawberry rhubarb.
 - 3. Resident on gluten free diet was not provided menu alternatives for entrées or desserts at lunch or dinner Aug. 31/10.
 - 4. Dinner Aug. 31/10, Diabetic diets were not provided diet strawberry rhubarb as per the posted menu.

Ontario

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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, ensuring preparation of all menu items as per the planned menu; to be implemented voluntarily.

WN #5: The Licensee has failed to comply with: O. Reg. 79/10, s. 72(3)(b) The licensee shall ensure that all food and fluids in the food production system are prepared, stored, and served using methods to, prevent adulteration, contamination and food borne illness.

Findings:

1. Foods served at Lunch and Dinner Aug. 31/10, in Main Dining room were not stored safely to prevent food borne illness as food items sat on serving counters. Temperatures were probed at: Puree coleslaw 68F, puree cheese sandwich 60F and puree cheesecake 66F.

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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, ensuring that all foods and fluids are stored safely; to be implemented voluntarily.

WN #6: The Licensee has failed to comply with: O. Reg. 79/10, s. 73(1)10 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: Proper techniques to assist residents with eating, including safe positioning of residents who require assistance.

Findings:

1. Dinner Aug. 31/10 in chapel dining area, nursing staff member stood to feed two residents. One resident at high risk for choking.

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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, ensuring that residents requiring assistance while eating are positioned safely; to be implemented voluntarily.

WN #7: The Licensee has failed to comply with: O. Reg. 79/10, s. 73(1)5 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: A process to ensure that food service workers and other staff assisting residents are aware of the residents' diets, special needs and preferences. Findings:

1. Pm. Snack Delivery Aug. 31/10- 5 residents received the wrong snack as per their plans of care: i.e. regular cherry juice was served to Diabetic diets, ground and regular diet received puree snacks.



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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, ensuring staff are aware of resident's diets, special needs and preferences for snack service; to be implemented voluntarily.

WN #8: The Licensee has failed to comply with: O. Reg. 79/10, s. 73(1)6 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: Food and fluids being served at a temperature that is both safe and palatable to the residents.

Findings:

- 1. Lunch Service Aug. 31/10, the temperatures in main dining room servery were probed at: Soup 108F and puree coleslaw 68F.
- 2. Prior to Dinner Aug.31/10, the temperature of cheesecake in the main dining room was probed at 66F.

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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, ensuring that food and fluids are served at safe palatable temperatures; to be implemented voluntarily.

CORRECTED NON-COMPLIANCE Non-respects à Corrigé				
REQUIREMENT EXIGENCE	TYPE OF ACTION/ORDER	Action/ Order#	INSPECTION REPORT #	INSPECTOR ID #
Long Term Care Homes Program Manual Standards and Criteria: M1.6			Standard from Dietary Review August 2009 listed here are now compliant.	135
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Signature of Licensee or Representative of Licensee Signature du Titulaire du représentant désigné	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.
Title: Date:	Date of Report: Sept. 3, 2010