



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
Division de la responsabilisation et de la performance du système de santé
Direction de l'amélioration de la performance et de la conformité

Hamilton Service Area Office
119 King Street West, 11th Floor
HAMILTON, ON, L8P-4Y7
Telephone: (905) 546-8294
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119, rue King Ouest, 11ième étage
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Public Copy/Copie du public

Table with 3 columns: Date(s) of inspection, Inspection No, Type of Inspection. Row 1: Jul 25, 27, Aug 7, 8, 9, 10, 30, 2012; 2012_071159_0012; Follow up

Licensee/Titulaire de permis

KING NURSING HOME LIMITED
49 Sterne Street, Bolton, ON, L7E-1B9

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

KING NURSING HOME
49 Sterne Street, Bolton, ON, L7E-1B9

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

ASHA SEHGAL (159)

Inspection Summary/Résumé de l'inspection

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

During the course of the inspection, the inspector(s) spoke with Administrator, Food Service Supervisor, Director of Care and front line dietary and nursing staff.

During the course of the inspection, the inspector(s) Observed food preparation and meal service on the second floor, reviewed recipes, production sheets, food temperature logs, relevant policies and procedures related to follow-up inspection H-001464-12.

The following Inspection Protocols were used during this inspection:

Dining Observation

Food Quality

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON-RESPECT DES EXIGENCES



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Legend	Legendé
WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order	WN – Avis écrit VPC – Plan de redressement volontaire DR – Atguillage 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. 72. Food production

Specifically failed to comply with the following subsections:

- s. 72. (3) The licensee shall ensure that all food and fluids in the food production system are prepared, stored, and served using methods to,
- (a) preserve taste, nutritive value, appearance and food quality; and
 - (b) prevent adulteration, contamination and food borne illness. O. Reg. 79/10, s. 72 (3).

Findings/Faits saillants :



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1. The Licensee has failed to comply with O.Reg 79/10, s. 72. Food Production.

The licensee did not ensure that all food and fluids in the food production system are prepared, stored, and served using methods to, (a) preserve taste, nutritive value, appearance, and food quality. [O.Reg 79/10, s. 72 (3) (a) (b)].

Standardized recipes at lunch meal on July 25 and 27, 2012 were not followed.

1. On July 25, 2012, during the noon meal preparation, the inspector observed recipe for Omelette Cheese Baked (cheese omelette) was not followed. The recipe indicated that eggs to be separated and egg whites to be beaten and folded into egg yolks, however, the cook was observed discarding egg whites and not following the recipe. This was reported to the Food Service Supervisor, who then completed the planned noon meal.

2. The recipe for minced and puree broccoli specified that once the required texture was reached to reheat 165 degree Fahrenheit and maintain temperature 140 degree Fahrenheit. However, the process was not followed and the temperatures of menu items were not maintained at 140 degree Fahrenheit, compromising the quality and taste. Temperatures tested by dietary staff prior to the noon meal service in 2nd floor dining room were found below the minimum holding temperature (e.g. broccoli 95 degree Fahrenheit and sausages 90 degree Fahrenheit.) The food was reheated in the microwave and served to residents.

3. On July 27, 2012, minced bacon back sandwich recipe was not followed. The recipe indicated that staff are to prepare minced bacon filling and spread between 2 bread /bun slices. However, the inspector observed the cook mixing and mincing together bacon, sliced yellow cheese and sliced tomato. Resident were served mixed filling on 2 slices of bread. The recipe was not followed, compromising, taste, appearance and food quality.

4. Not all recipes were consistent with the quantities of menu items specified on the production sheets. The quantities for minced and puree menu items listed on the production sheet did not match the quantities on the standardized recipes for to staff follow. On July 25, 2012, for the noon meal quantities listed for minced and puree sausages on the production sheet were, 9 servings of minced and 4 servings of pureed sausages. The standardized recipe for minced sausage was for 5, 15, 20 and 35 servings and pureed recipe was for 3, 5, and 10 servings. The recipes were not adjusted for the number of serving listed on the production sheets, this compromises food quality.

5. The supervisory staff interviewed identified, deficiencies, in the recipes and consistent concerns about the accuracy of some of the recipes resulting in varied quality of products being prepared, and/or the increased time required to adjust the recipes.

Additional Required Actions:

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

THE FOLLOWING NON-COMPLIANCE AND/OR ACTION(S)/ORDER(S) HAVE BEEN COMPLIED WITH/ LES CAS DE NON-RESPECTS ET/OU LES ACTIONS ET/OU LES ORDRES SUIVANT SONT MAINTENANT CONFORME AUX EXIGENCES:

CORRECTED NON-COMPLIANCE/ORDER(S) REDRESSEMENT EN CAS DE NON-RESPECT OU LES ORDERS:			
REQUIREMENT/ EXIGENCE	TYPE OF ACTION/ GENRE DE MESURE	INSPECTION # / NO DE L'INSPECTION	INSPECTOR ID #/ NO DE L'INSPECTEUR
O.Reg 79/10 r. 73.	CO #003	2012_027192_0009	159

Issued on this 7th day of September, 2012



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

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

Abel Selgut



**Ministry of Health and
Long-Term Care**

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

**Ministère de la Santé et
des Soins de longue durée**

Ordre(s) de l'inspecteur
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 System Accountability and Performance Division
Performance Improvement and Compliance Branch

Division de la responsabilisation et de la performance du système de santé
Direction de l'amélioration de la performance et de la conformité

Public Copy/Copie du public

Name of Inspector (ID #) / Nom de l'inspecteur (No) :	ASHA SEHGAL (159)
Inspection No. / No de l'inspection :	2012_071159_0012
Type of Inspection / Genre d'inspection:	Follow up
Date of Inspection / Date de l'inspection :	Jul 25, 27, Aug 7, 8, 9, 10, 30, 2012
Licensee / Titulaire de permis :	KING NURSING HOME LIMITED 49 Sterne Street, Bolton, ON, L7E-1B9
LTC Home / Foyer de SLD :	KING NURSING HOME 49 Sterne Street, Bolton, ON, L7E-1B9
Name of Administrator / Nom de l'administratrice ou de l'administrateur :	JANICE KING

To KING NURSING HOME LIMITED, you are hereby required to comply with the following order(s) by the date(s) set out below:



**Ministry of Health and
Long-Term Care**

**Ministère de la Santé et
des Soins de longue durée**

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

Ordre(s) de l'inspecteur
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 # /
Ordre no : 001

Order Type /
Genre d'ordre : Compliance Orders, s. 153. (1) (a)

Linked to Existing Order /
Lien vers ordre existant: 2012_027192_0009, CO #004

Pursuant to / Aux termes de :

O.Reg 79/10, s. 72. (3) The licensee shall ensure that all food and fluids in the food production system are prepared, stored, and served using methods to,
(a) preserve taste, nutritive value, appearance and food quality; and
(b) prevent adulteration, contamination and food borne illness. O. Reg. 79/10, s. 72 (3).

Order / Ordre :

Order

The licensee shall prepare, submit and implement a plan to ensure all food and fluids are prepared and served using method which preserves taste, appearance and food quality.

The plan shall outline how the licensee shall ensure that:

1. Standardized recipes are adjusted and consistent with the quantities of each menu item listed on the production sheets.
2. Standardized recipes are followed to provide consistent product and food quality.
3. Dietary staffs involved in food preparation have received hands on training in food preparation.
4. Food production is monitored, supervised and evaluated.

The plan shall be submitted electronically to Asha Sehgal, Dietary Inspector of the MOH LTC, Performance Improvement and Compliance Branch, Hamilton Service Area Office, at asha.sehgal@ontario.ca by the end of business on September 28, 2012.

Previously issued as a compliance order on August 29, 2011, December 22, 2011 and May 10, 2012.

Grounds / Motifs :



**Ministry of Health and
Long-Term Care**

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

**Ministère de la Santé et
des Soins de longue durée**

Ordre(s) de l'inspecteur
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

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Standardized recipes at lunch meal July 25 and July 27, 2012 were not followed.

a) .On July 25, 2012, during the noon meal preparation, the inspector observed recipe for Omelette Cheese Baked (cheese omelette) was not followed. The recipe indicated that eggs to be separated and egg whites to be beaten and folded into egg yolks, however, the cook was observed discarding egg whites and not following the recipe. This was reported to the Food Service Supervisor, who then completed the planned noon meal.

b) The recipe for minced and puree broccoli specified that once the required texture was reached to reheat 165 degree Fahrenheit and maintain temperature 140 degree Fahrenheit. However, the process was not followed and the temperatures of menu items were not maintained at 140 degree Fahrenheit, compromising the quality and taste. Temperatures tested by dietary staff prior to service in 2nd floor dining room were found below the minimum holding temperature (e.g. broccoli 95 degree Fahrenheit and sausages 90 degree Fahrenheit.) The food was reheated in the microwave and served to residents.

c) .On July 27, 2012, minced bacon back sandwich recipe was not followed. The recipe indicated that staff are to prepare minced bacon filling and spread between 2 bread /bun slices. However, the inspector observed the cook mixing and mincing together bacon, sliced yellow cheese and sliced tomato. Resident were served mixed filling on 2 slices of bread. The recipe was not followed, compromising, taste, appearance and food quality.

d) Not all recipes were consistent with the quantities of menu items specified on the production sheets. The quantities for minced and puree menu items listed on the production sheet did not match the quantities on the standardized recipes for staff to follow. July 25, 2012, quantities listed for minced and puree sausages on the sheet were, 9 servings of minced and 4 servings of pureed sausages. The standardized recipe for minced sausage was for 5, 15, 20 and 35 servings and pureed recipe was for 3, 5, and 10 servings. The recipes were not adjusted for the number of servings listed on the production sheets, this compromises food quality.

e) .The supervisory staff interviewed identified deficiencies, in the recipes and consistent concerns about the accuracy of some of the recipes resulting in varied quality of products being prepared, and/or the increased time required to adjust the recipes. (159)

This order must be complied with by /

Vous devez vous conformer à cet ordre d'ici le : Sep 28, 2012



**Ministry of Health and
Long-Term Care**

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

**Ministère de la Santé et
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Ordre(s) de l'inspecteur
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 or by fax upon:

Director
c/o Appeals Coordinator
Performance Improvement and Compliance Branch
Ministry of Health and Long-Term Care
55 St. Clair Avenue West
Suite 800, 8th Floor
Toronto, ON M4V 2Y2
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 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:

Health Services Appeal and Review Board and the

Director

Attention Registrar
151 Bloor Street West
9th Floor
Toronto, ON M5S 2T5

Director
c/o Appeals Coordinator
Performance Improvement and Compliance Branch
Ministry of Health and Long-Term Care
55 St. Clair Avenue West
Suite 800, 8th Floor
Toronto, ON M4V 2Y2
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.



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Order(s) of the Inspector
Pursuant to section 153 and/or
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Ordre(s) de l'inspecteur
Aux termes de l'article 153 et/ou
de l'article 154 de la *Loi de 2007 sur les foyers
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RENSEIGNEMENTS SUR LE RÉEXAMEN/L'APPEL

PRENDRE AVIS

En vertu de l'article 163 de la Loi de 2007 sur les foyers de soins de longue durée, le titulaire de permis peut demander au directeur de réexaminer l'ordre ou les ordres qu'il a donné et d'en suspendre l'exécution.

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

La demande de réexamen doit contenir ce qui suit :

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

La demande écrite est signifiée en personne ou envoyée par courrier recommandé ou par télécopieur au :

Directeur
a/s Coordinateur des appels
Direction de l'amélioration de la performance et de la conformité
Ministère de la Santé et des Soins de longue durée
55, avenue St. Clair Ouest
8^e étage, bureau 800
Toronto (Ontario) M4V 2Y2
Télécopieur : 416-327-7603

Les demandes envoyées par courrier recommandé sont réputées avoir été signifiées le cinquième jour suivant l'envoi et, en cas de transmission par télécopieur, la signification est réputée faite le jour ouvrable suivant l'envoi. Si le titulaire de permis ne reçoit pas d'avis écrit de la décision du directeur dans les 28 jours suivant la signification de la demande de réexamen, l'ordre ou les ordres sont réputés confirmés par le directeur. Dans ce cas, le titulaire de permis est réputé avoir reçu une copie de la décision avant l'expiration du délai de 28 jours.

En vertu de l'article 164 de la Loi de 2007 sur les foyers de soins de longue durée, le titulaire de permis a le droit d'interjeter appel, auprès de la Commission d'appel et de révision des services de santé, de la décision rendue par le directeur au sujet d'une demande de réexamen d'un ordre ou d'ordres donnés par un inspecteur. La Commission est un tribunal indépendant du ministère. Il a été établi en vertu de la loi et il a pour mandat de trancher des litiges concernant les services de santé. Le titulaire de permis qui décide de demander une audience doit, dans les 28 jours qui suivent celui où lui a été signifié l'avis de décision du directeur, faire parvenir un avis d'appel écrit aux deux endroits suivants :

À l'attention du registraire
Commission d'appel et de révision des services de santé
151, rue Bloor Ouest, 9^e étage
Toronto (Ontario) M5S 2T5

Directeur
a/s Coordinateur des appels
Direction de l'amélioration de la performance et de la conformité
Ministère de la Santé et des Soins de longue durée
55, avenue St. Clair Ouest
8^e étage, bureau 800
Toronto (Ontario) M4V 2Y2
Télécopieur : 416-327-7603

La Commission accusera réception des avis d'appel et transmettra des instructions sur la façon de procéder pour interjeter appel. Les titulaires de permis peuvent se renseigner sur la Commission d'appel et de révision des services de santé en consultant son site Web, au www.hsarb.on.ca.

Issued on this **30th** day of August, 2012

Signature of Inspector /
Signature de l'inspecteur :

Name of Inspector /

Nom de l'inspecteur : ASHA SEHGAL

Service Area Office /

Bureau régional de services : Hamilton Service Area Office