

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

Hamilton District
119 King Street West, 11th Floor
Hamilton, ON, L8P 4Y7
Telephone: (800) 461-7137
hamiltondistrict.mlhc@ontario.ca

Original Public Report

Report Issue Date: December 19, 2022	
Inspection Number: 2022-1092-0001	
Inspection Type: Complaint	
Licensee: Canadian Reformed Society for a Home for the Aged Inc.	
Long Term Care Home and City: Mount Nemo Christian Nursing Home, Burlington	
Lead Inspector Jonathan Conti (740882)	Inspector Digital Signature
Additional Inspector(s) Parminder Ghuman (706988)	

INSPECTION SUMMARY

The Inspection occurred on the following date(s):
November 24-25, 28, and December 8-9, 12-16, 2022, with December 15, 2022 conducted off-site

The following intake was completed in this complaint inspection:
Intake #00003500 was related to concerns regarding resident care and support services, and plan of care related to food and nutrition for a resident.

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

- Infection Prevention and Control
- Food, Nutrition and Hydration
- Resident Care and Support Services

INSPECTION RESULTS

Non-Compliance Remedied

Non-compliance was found during this inspection and was **remedied** by the licensee prior to the

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conclusion of the inspection. The inspector was satisfied that the non-compliance met the intent of section 154 (2) and requires no further action.

NC #001 remedied pursuant to FLTCA, 2021, s. 154 (2)

Non-compliance with: O. Reg. 246/22, s. 268 (4) 3.

The licensee has failed to ensure that cleaning supply products within the home had not expired.

Rationale and Summary

On November 24, 2022, two expired all-purpose disinfectant cleaning products were observed in the housekeeping storage closet and on the housekeeping cart of a resident home area (RHA).

The Infection Prevention and Control (IPAC) Nurse was made aware of the concern with the all-purpose cleaner expiry dates and management was informed. IPAC Nurse stated an audit of expiry date or when to change product was not completed, however stated audits would now be completed. The Administrator indicated expired disinfectant was removed from the home and replaced the same day, and the supplier replenished the home's stock on November 28, 2022. On December 8, 2022, the inspector confirmed replenished stocked and observed housekeeping carts on RHA with new disinfectant.

This non-compliance has been remedied as the home took corrective action with disposal and replacement of disinfectant prior to end of inspection. Risk to residents at the time was minimal based on no infectious outbreaks.

Sources: Interviews with housekeeper, IPAC Nurse, Administrator, observations on November 24 and December 8, 2022; the home's policy title "Cleaning Standards and Frequencies- ES-87-02", last revised on May 18, 2022.

Date Remedy Implemented: December 8, 2022.

[740882]

WRITTEN NOTIFICATION: Plan of Care

NC #002 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: FLTCA, 2021, s. 6 (7)

The licensee has failed to ensure that the care set out in the plan of care was provided to a resident as specified.

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Rationale and Summary

During a meal service, a resident was served a diet texture not part of their plan of care and had then caused ill effects. Resident was assessed by the Registered Dietitian (RD) prior to incident and required a specified diet texture, as written in the resident's plan of care and agreed upon by resident.

The Nutrition Manager (NM) confirmed the resident's plan of care was not followed and the resident should not have been served the provided diet texture. Due to the home's failure to ensure the correct diet texture was served, the resident was put at increased risk related to their medical diagnosis'.

Sources: Interviews with NM, staff; resident plan of care, progress notes, RD assessments between a specified time in 2022; Home's investigative notes.

[740882]

WRITTEN NOTIFICATION #002: Menu Planning

NC #003 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 77 (5)

The licensee has failed to ensure that the planned menu items were offered and available at a meal service in for a resident.

Rationale and Summary

During a meal service, a resident was served a diet texture not part of their plan of care and had then caused ill effects. The resident was assessed by the Registered Dietitian (RD) prior to the incident and required a specified diet texture, as well as other dietary intervention, as written in the resident's plan of care and agreed upon by resident.

The planned menu items appropriate for the resident's care planned needs were not available during the specified meal service, and suitable alternatives were not offered at meal service. The Nutrition Manager (NM) confirmed that the resident should not have been served the provided diet texture, and alternatives with said other dietary interventions in consideration should have been prepared. Review of the menu on the specific date of incident confirmed a third alternative entrée was available and as per home's policy, was to be offered to the resident as well.

Sources: Interview with NM, staff; resident plan of care, progress notes, RD assessments between



**Inspection Report Under the
Fixing Long-Term Care Act, 2021**

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specified time; the home's investigative notes; the home's Spring/Summer 2022 Menu; the home's policy titled "Meal Service Schedule", last revised June 2022.

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