

Ministère de la Santé et des Soins de longue durée

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

Rapport d'inspection prévue sous la Loi de 2007 sur les foyers de soins de longue durée

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

Division des foyers de soins de longue durée Inspection de soins de longue durée London Service Area Office 130 Dufferin Avenue 4th floor LONDON ON N6A 5R2 Telephone: (519) 873-1200 Facsimile: (519) 873-1300

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Public Copy/Copie du public

Report Date(s) / Date(s) du Rapport No de l'inspection

Inspection No /

Loa #/ No de registre

Type of Inspection / **Genre d'inspection**

Aug 14, 2019

2019 788721 0028 015481-19

Other

Licensee/Titulaire de permis

Arch Long Term Care LP by its General Partner, Arch Long Term Care MGP, by its partners, Arch Long Term Care GP Inc. and Arch Capital Management Corporation 161 Bay Street Suite 2100 TORONTO ON M5J 2S1

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

Tilbury Manor Nursing Home 16 Fort Street P.O. Box 160 TILBURY ON NOP 2L0

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

MEAGAN MCGREGOR (721), DEBRA CHURCHER (670)

Inspection Summary/Résumé de l'inspection



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The purpose of this inspection was to conduct an Other inspection.

This inspection was conducted on the following date(s): August 12 and 13, 2019.

The purpose of this inspection was to conduct a London Service Area Office Initiated Inspection.

During the course of the inspection, the inspector(s) spoke with the Administrator, Director of Resident Care, Food Service Manager, Registered Nurses, Registered Practical Nurses, Personal Support Workers, dietary staff and several residents.

The Inspectors also conducted a tour of the home, observed residents and the care provided to them by staff, observed a medication administration, observed meal service on two occasions, reviewed relevant clinical records and reviewed relevant policies and procedures.

The following Inspection Protocols were used during this inspection:
Dining Observation
Falls Prevention
Medication
Reporting and Complaints
Residents' Council
Skin and Wound Care

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

- 1 WN(s)
- 0 VPC(s)
- 0 CO(s)
- 0 DR(s)
- 0 WAO(s)



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NON-COMPLIANCE / NON - RESPECT DES EXIGENCES		
Legend	Légende	
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 – 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).	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.	
The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.	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:

s. 71. (4) The licensee shall ensure that the planned menu items are offered and available at each meal and snack. O. Reg. 79/10, s. 71 (4).

Findings/Faits saillants:



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1. The licensee has failed to ensure that the planned menu items were offered and available at each meal.

On August 12, 2019, Inspector #721 observed daily and weekly display menus posted on the walls in the first and second floor dining rooms, which stated banana loaf and rhubarb were to be offered as menu items at lunch that day. Observations of the lunch meal service were conducted in the first and second floor dining rooms on August 12, 2019, and banana loaf and rhubarb were not offered as menu items as stated on the posted menus. Inspector #721 asked a dietary staff member if there had been a change to the lunch menu that day, and they stated "no". When asked if banana loaf and rhubarb had been offered to residents at lunch on April 12, 2019, the dietary staff member looked at the posted menus and stated "no, oh I guess not. It was pineapple or green jello for dessert today".

During an interview on April 13, 2019, when asked what actions they would take if there was a change to the planned menu items, Food Service Manager (FSM) #108 stated the cooks would write the change on their copy of the menu to let them know and they would then print a new display menu with the changes and post in the dining room. When asked who would be responsible for updating the display menus when they were not in the home, FSM #108 said if there was a change and they knew about it they would get someone else working at that time to print a new display menu. When asked if they were aware of any changes to the planned menu items at the lunch meal service on August 12, 2019, FSM #108 stated they weren't in the home on August 12, 2019, and they found out about the menu change on August 13, 2019, so the display menus didn't get updated.

The licensee failed to ensure that menu items were offered during the lunch meal service on April 12, 2019, as stated on the posted display menus in the first and second floor dining rooms. [s. 71. (4)]



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Issued on this 14th day of August, 2019

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

Original report signed by the inspector.