



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 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
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Table with 3 columns: Date(s) of inspection, Inspection No, Type of Inspection. Row 1: Aug 14, 16, 2011, 2011_071159_0013, Complaint

Licensee/Titulaire de permis

VIGOUR LIMITED PARTNERSHIP ON BEHALF OF VIGOUR
302 Town Centre Blvd, Suite #200, MARKHAM, ON, L3R-0E8

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

LEISUREWORLD CAREGIVING CENTRE - TULLAMORE
133 KENNEDY ROAD SOUTH, BRAMPTON, ON, L6W-3G3

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 Complaint inspection.

During the course of the inspection, the inspector(s) spoke with Assistant Director of Care, Registered Practical Nurses, Food Service Supervisor, Restorative Rehab Manager, Dietary Aides, Cook, Personal Support Workers, residents.

(Related to H-001431-11)

During the course of the inspection, the inspector(s) toured the kitchen, reviewed recipes for menu items prepared for breakfast, observed part of the meal preparation, reviewed menu (week 3), observed breakfast meal service.

The following Inspection Protocols were used in part or in whole during this inspection:

Food Quality

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON-RESPECT DES EXIGENCES

Definitions

WN - Written Notification
VPC - Voluntary Plan of Correction
DR - Director Referral
CO - Compliance Order
WAO - Work and Activity Order

Définitions

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. 72. Food production

Specifically failed to comply with the following subsections:

- s. 72. (2) The food production system must, at a minimum, provide for,**
- (a) a 24-hour supply of perishable and a three-day supply of non-perishable foods;
 - (b) a three-day supply of nutritional supplements, enteral or parenteral formulas as applicable;
 - (c) standardized recipes and production sheets for all menus;
 - (d) preparation of all menu items according to the planned menu;
 - (e) menu substitutions that are comparable to the planned menu;
 - (f) communication to residents and staff of any menu substitutions; and
 - (g) documentation on the production sheet of any menu substitutions. O. Reg. 79/10, s. 72 (2).

- 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 sayants :

1. Not all foods were prepared and served using methods which preserve taste, nutritive value, appearance and food quality. On August 15, 2011 Recipes were not consistently followed preparing menu items i.e recipe for cream of wheat was not followed. The cook on duty reported and confirmed that additional spices (nutmeg) was added to the cereal although this was not in the recipe. Residents voiced concern that some time they are not able to eat hot cereal served for breakfast due to nutmeg /cinnamon and spicy taste. [O.Reg. 79/10 s. 72(3) (a)]
2. The food production system did not provide at a minimum the preparation of all menu items according to the planned menu on August 15, 2011 at the breakfast meal. The planned breakfast menu for pureed diet as posted was cream of wheat, pureed eggs, pureed bread, jam/jelly, fresh pureed bananas and choice of juices. An alternate menu choice was soaked branflakes, pureed cottage cheese, peanut butter, and pureed prunes. Pureed cottage cheese, pureed and minced bananas were not prepared and offered to residents. Staff interviewed (PSWs and dietary aides) confirmed that there were no pureed and minced bananas and pureed cottage cheese served to residents at breakfast meal. [O.Reg. 79/10 s. 72(2)(d)]

Additional Required Actions:

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 with ensuring that all food and fluids in the food production system are prepared, stored and served using methods to, preserve taste, nutritive value, appearance and food quality. Preparation of all menu items according to the planned menu, to be implemented voluntarily.

WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 73. Dining and snack service

Specifically failed to comply with the following subsections:

- s. 73. (1) 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:
1. Communication of the seven-day and daily menus to residents.
 2. Review, subject to compliance with subsection 71 (6), of meal and snack times by the Residents' Council.
 3. Meal service in a congregate dining setting unless a resident's assessed needs indicate otherwise.
 4. Monitoring of all residents during meals.
 5. A process to ensure that food service workers and other staff assisting residents are aware of the residents' diets, special needs and preferences.
 6. Food and fluids being served at a temperature that is both safe and palatable to the residents.
 7. Sufficient time for every resident to eat at his or her own pace.
 8. Course by course service of meals for each resident, unless otherwise indicated by the resident or by the resident's assessed needs.
 9. Providing residents with any eating aids, assistive devices, personal assistance and encouragement required to safely eat and drink as comfortably and independently as possible.
 10. Proper techniques to assist residents with eating, including safe positioning of residents who require assistance.
 11. Appropriate furnishings and equipment in resident dining areas, including comfortable dining room chairs and dining room tables at an appropriate height to meet the needs of all residents and appropriate seating for staff who are assisting residents to eat. O. Reg. 79/10, s. 73 (1).

Findings/Faits sayants :

1. An identified resident was not fed using proper feeding techniques. Resident was observed in a Broda chair with head down leaning forward, a Registered Practical Nurse sitting beside and feeding resident heaping teaspoonful of food at a rapid space with little time to swallow between spoonfuls. Resident was not appropriately positioned for dining. [O.Reg.79/10 s. 73 (1) 10]

Additional Required Actions:

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 the home has a dining and snack service that include proper techniques to assist resident with eating, including safe positioning of residents who require assistance, to be implemented voluntarily.

Issued on this 19th day of August, 2011

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

MSL Selge