



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 sous la  
Loi de 2007 sur les foyers de  
soins de longue durée

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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Bureau régional de services de  
Hamilton  
119, rue King Ouest, 11iém étage  
HAMILTON, ON, L8P-4Y7  
Téléphone: (905) 546-8294  
Télécopieur: (905) 546-8255

### Public Copy/Copie du public

Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Jan 30, 2014	2014_190159_0001	H-000680- 13	Complaint

#### Licensee/Titulaire de permis

REVERA LONG TERM CARE INC.  
55 STANDISH COURT, 8TH FLOOR, MISSISSAUGA, ON, L5R-4B2

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

GARDEN CITY MANOR  
168 Scott Street, St. Catharines, ON, L2N-1H2

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.

This inspection was conducted on the following date(s): January 10, 13, 14, 15, 2014

During the course of the inspection, the inspector(s) spoke with Executive Director, Director of Care, Associate Director of Care, Registered Nurses, Registered Practical Nurses, Food Service Manager, Registered Dietitian, Personal Support Workers (PSW), Cooks, dietary aides and residents

During the course of the inspection, the inspector(s) observed food production and meal service, reviewed menus, policies and procedures of the home.

The following Inspection Protocols were used during this inspection:



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## Food Quality

**Findings of Non-Compliance were found during this inspection.**

### NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

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 – 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**



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**Specifically failed to comply with the following:**

s. 72. (2) The food production system must, at a minimum, provide for,  
(c) standardized recipes and production sheets for all menus; 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,  
(b) prevent adulteration, contamination and food borne illness. O. Reg. 79/10, s.  
72 (3).

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**Findings/Faits saillants :**



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1. The licensee did not ensure that food production system included standardized recipes and production sheets for all menus.

On January 10, 2014, observation of noon meal production and the dietary staff interviewed confirmed the home did not have daily production sheets for the menu requirements. The Food Service Supervisor confirmed that the production sheets were not available for staff to provide clear directions.

The standardized recipes available did not provide clear directions for staff. Dietary staff interviewed confirmed difficult to understand directions and were not able to identify the measurements of ingredients listed in the recipes. The recipes were not adjusted for ingredients, substitutions and changes in procedures. The recipes available were not scaled for the number of servings/portions required. Staff interviewed stated 60 servings of corned beef sandwiches were prepared for lunch, but the recipe available was for 200 servings. The cook confirmed recipes for texture modified diets i.e. minced and pureed were not scaled, modified, and tested in the home. [s. 72. (2) (c)]

2. The licensee did not ensure that all food and fluids were prepared, stored, and served using methods which preserved taste, nutritive value, appearance and food quality.

During the observed food production in the kitchen on January 10, 2014, staff preparing menu items did not follow the recipes. Dietary staff was noted to be preparing pureed menu items without weighing or measuring the specified ingredients listed in the recipes, resulting in compromised quality and nutritional content of the product. Excess amount of water and "Thickner" product was used for pureed vegetable, which not only altered the taste and texture but also reduced the nutritional value. Review of the recipe binder and the staff interview confirmed recipes were not being followed for quality consistency, i.e. thickner was not indicated to be used for pureed lima beans. The pureed ravioli and lima beans recipes did not indicate the yield that would be prepared to guide staff in food production. The pureed food items served to residents were not visually eye appealing. The consistency of the pureed cheese ravioli and the lima bean was lumpy and thick. [s. 72. (3) (b)]

***Additional Required Actions:***

***CO # - 001, 002 will be served on the licensee. Refer to the "Order(s) of the Inspector".***



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Issued on this 13th day of February, 2014

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





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

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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

**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 :** 2014\_190159\_0001

**Log No. /**

**Registre no:** H-000680-13

**Type of Inspection /**

**Genre**

**d'inspection:** Complaint

**Report Date(s) /**

**Date(s) du Rapport :** Jan 30, 2014

**Licensee /**

**Titulaire de permis :**

REVERA LONG TERM CARE INC.  
55 STANDISH COURT, 8TH FLOOR, MISSISSAUGA,  
ON, L5R-4B2

**LTC Home /**

**Foyer de SLD :**

GARDEN CITY MANOR  
168 Scott Street, St. Catharines, ON, L2N-1H2

**Name of Administrator /**

**Nom de l'administratrice**

**ou de l'administrateur :**

KIM WIDDICOMBE

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To REVERA LONG TERM CARE INC., 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

**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  
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**Order # /  
Ordre no :** 001

**Order Type /**

**Genre d'ordre :** Compliance Orders, s. 153. (1) (b)

**Pursuant to / Aux termes de :**

O.Reg 79/10, 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).

**Order / Ordre :**

The licensee shall prepare, submit and implement a plan that outlines how the home will ensure that

- a) daily food production sheets for all menus are available
- c) standardized recipes for all menu items including texture modified diets are available and followed in food preparations
- d) standardized recipes are scaled for the portions required.
- e) foods appear appetizing to residents.

Plan is to be submitted to Asha Sehgal @ontario.ca by February 28, 2014

**Grounds / Motifs :**



**Ministry of Health and  
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**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

1. The licensee did not ensure that food production system included standardized recipes and production sheets for all menus.

On January 10, 2014, observation of noon meal production and the dietary staff interviewed confirmed the home did have daily production sheets for the menu requirements. The Food Service Supervisor confirmed that the production sheets were not available for staff to provide clear directions.

The standardized recipes available did not provide clear directions for staff. Dietary staff interviewed confirmed difficult to understand directions and were not able to identify the measurements of ingredients listed in the recipes. The recipes were not adjusted for ingredients, substitutions and changes in procedures. The recipes available were not scaled for the number of serving/portions required. Staff interviewed stated 60 servings of corned beef sandwiches were prepared for lunch, but the recipe available was for 200 servings. The cook confirmed recipes for texture modified diets i.e. minced and pureed were not scaled, modified, and tested in the home.

(159)

**This order must be complied with by /**

**Vous devez vous conformer à cet ordre d'ici le : Feb 28, 2014**



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**Order(s) of the Inspector**

Pursuant to section 153 and/or  
section 154 of the *Long-Term Care  
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Aux termes de l'article 153 et/ou  
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**Order # /  
Ordre no :** 002

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

**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 :**

The licensee shall prepare, submit and implement a plan that outlines how the home will ensure that

- a) all food and fluids in the food production system are prepared and served using methods to preserve taste, nutritive value, appearance and food quality.
- b) standardized recipes include preparation instructions and measurements, yield etc.

The plan is to be submitted to Asha.sehgal@ontario.ca by February 28, 2014

**Grounds / Motifs :**



**Ministry of Health and  
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**Order(s) of the Inspector**

Pursuant to section 153 and/or  
section 154 of the *Long-Term Care  
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de l'article 154 de la *Loi de 2007 sur les foyers  
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1. The licensee did not ensure that all food and fluids were prepared, stored, and served using methods which preserved taste, nutritive value, appearance and food quality.

During the observed food production in the kitchen on January 10, 2014, staff preparing menu items did not follow the recipes. Dietary staff was noted to be preparing pureed menu items without weighing or measuring the specified ingredients listed in the recipes, resulting in compromised quality and nutritional content of the product. Excess amount of water and "Thickner" product was used for pureed vegetable, which not only altered the taste and texture but also reduced the nutritional value. Review of the recipe binder and the staff interview confirmed recipes were not being followed for quality consistency, i.e. thickner was not indicated to be used for pureed lima beans. The pureed ravioli and lima beans recipes did not indicate the yield that would be prepared to guide staff in food production. The pureed food items served to residents were not visually eye appealing. The consistency of the pureed cheese ravioli and the lima bean was lumpy and thick.

(159)

**This order must be complied with by /**

**Vous devez vous conformer à cet ordre d'ici le : Feb 28, 2014**



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**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  
1075 Bay Street, 11th Floor  
TORONTO, ON  
M5S-2B1  
Fax: 416-327-7603



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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  
1075 Bay Street, 11th Floor  
TORONTO, ON  
M5S-2B1  
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](http://www.hsarb.on.ca).



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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  
1075, rue Bay, 11e étage  
Ontario, ON  
M5S-2B1  
Fax: 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.



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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, 9e 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  
1075, rue Bay, 11e étage  
Ontario, ON  
M5S-2B1  
Fax: 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.hsb.on.ca](http://www.hsb.on.ca).

**Issued on this 30th day of January, 2014**

**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

