



**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 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**

Hamilton Service Area Office
119 King Street West 11th Floor
HAMILTON ON L8P 4Y7
Telephone: (905) 546-8294
Facsimile: (905) 546-8255

Bureau régional de services de
Hamilton
119 rue King Ouest 11ième 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 |
|--|---|--------------------------------|--|
| Jul 4, 2017 | 2017_661683_0001 | 004817-17 | Follow up |

Licensee/Titulaire de permis

Schlegel Villages Inc
325 Max Becker Drive Suite 201 KITCHENER ON N2E 4H5

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

THE VILLAGE OF ERIN MEADOWS
2930 Erin Centre Boulevard MISSISSAUGA ON L5M 7M4

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

LISA BOS (683), CAROL POLCZ (156)

Inspection Summary/Résumé de l'inspection



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

This inspection was conducted on the following date(s): June 21, 2017

**The following inspection was completed:
log #004817-17 - related to nutrition and hydration**

During the course of the inspection, the inspector(s) spoke with the General Manager, Director of Nursing, Director of Food Services, Registered Nurses (RNs), Registered Practical Nurses (RPNs), Personal Support Workers (PSW), families, and residents.

During the course of the inspection the inspectors observed the provision of care and services, reviewed relevant records including auditing documents, menu cycles and resident health records.

**The following Inspection Protocols were used during this inspection:
Nutrition and Hydration
Snack Observation**

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)**

**The following previously issued Order(s) were found to be in compliance at the time of this inspection:
Les Ordre(s) suivants émis antérieurement ont été trouvés en conformité lors de cette inspection:**



| REQUIREMENT/ EXIGENCE | TYPE OF ACTION/ GENRE DE MESURE | INSPECTION # / DE L'INSPECTION | NO | INSPECTOR ID #/ NO DE L'INSPECTEUR |
|---------------------------|------------------------------------|-----------------------------------|----|---------------------------------------|
| O.Reg 79/10 s. 71. (3) | CO #001 | 2016_541169_0019 | | 683 |

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). 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. 71. Menu planning



Specifically failed to comply with the following:

s. 71. (3) The licensee shall ensure that each resident is offered a minimum of, (c) a snack in the afternoon and evening. O. Reg. 79/10, s. 71 (3).

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 :

1. The licensee has failed to ensure that each resident was offered a snack in the afternoon and evening.

A snack pass was observed on a resident home area. As per the spring and summer snack menu for week four, the residents were to be offered low calorie orange drink and a macaroon cookie, or milk, coffee or tea and fresh fruit for their afternoon snack.

The plan of care for resident #003 identified that they were to receive a specific snack. Resident #003 did not receive the snack item identified in their plan of care, and were not offered the planned snack.

Interview with the Director of Food Services on June 23, 2017, indicated that resident #003's family requested that the resident was not offered the planned snack, and that they only had the snack item identified in their plan of care. The documented plan of care for resident #003 did not indicate the family's preference. The form titled "Nourishment List for Home Areas," stored on the snack cart and used by the PSWs for serving, also did not indicate the family's preference.

The Director of Food Services acknowledged that the staff should have tried to offer resident #003 a snack during the snack pass.

The licensee did not ensure that resident #003 received a snack. [s. 71. (3) (c)]

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



A snack pass was observed on a resident home area. As per the spring and summer snack menu for week four, the residents were to be offered low calorie orange drink and a macaroon cookie, or milk, coffee or tea and fresh fruit for their afternoon snack.

Residents #002, #004 and #005 received therapeutic snacks, as ordered by the Registered Dietitian (RD), however were not offered the planned snack of the macaroon (or pureed macaroon cookie) or fruit, as confirmed by PSWs #104 and #102.

Interview with the Director of Food Services on June 21, 2017, indicated that residents #002, #004 and #005 should have been offered the planned snack item, in addition to their therapeutic snack item that was ordered by the RD.

The home did not ensure that residents #002, #004 and #005 were offered the planned menu items at the snack pass. [s. 71. (4)]

Issued on this 4th day of July, 2017

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

Original report signed by the inspector.