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

Rapport d'inspection prévue le *Loi de 2007 les foyers de soins de longue durée*

Ministry of Health and Long-Term Care
Health System Accountability and Performance Division
Performance Improvement and Compliance Branch

Ministère de la Santé et des Soins de longue durée
Division de la responsabilisation et de la performance du système de santé
Direction de l'amélioration de la performance et de la conformité

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Date of inspection/Date de l'inspection	**Inspection No/ d'inspection**	**Type of Inspection/Genre d'inspection**
March 1, 2011	2011_159_9618_28Feb092901 2011_147_9618_01Mar102521	H-00307 Complaint

Licensee/Titulaire
The Regional Municipality of Peel
10 Peel Centre Drive, Brampton ON, L6T 4B9
905-791-0946

Long-Term Care Home/Foyer de soins de longue durée
Malton Village
7075 Rexwood Road
Mississauga ON L4T 4M1

Name of Inspector(s)/Nom de l'inspecteur(s)
Asha Sehgal and Laleh Newell

Inspection Summary/Sommaire d'inspection

The purpose of this inspection was to conduct a complaint inspection.

During the course of the inspection, the inspector(s) spoke with Administrator, Director Of Care, Nurse Supervisor, Food Service Manager, Personal Support Service Worker (PSWs) , Dietary staff, Residents, and Family.

During the course of the inspection, the inspector(s): Reviewed resident health record, observed lunch meal in one home area.

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

Nutrition and hydration, Dining Observation, Food Quality.
Falls Prevention

Findings of Non-Compliance were found during this inspection. The following action was taken:

4 WN
4 VPC

NON- COMPLIANCE / (Non-respectés)

Definitions/Définitions

WN – Written Notifications/Avis écrit
VPC – Voluntary Plan of Correction/Plan de redressement volontaire
DR – Director Referral/Régisseur envoyé
CO – Compliance Order/Ordres de conformité
WAO – Work and Activity Order/Ordres: travaux et activités

The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA. 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 suivant constituer un avis d'écrit de l'exigence prévue le paragraphe 1 de section 152 de les foyers de soins de longue durée. Non-respect avec les exigences sur le *Loi de 2007 les foyers de soins de longue durée* à trouvé. (Une exigence dans le loi comprend les exigences contenues dans les points énumérés dans la définition de "exigence prévue par la présente loi" au paragraphe 2(1) de la loi.

WN #1: The Licensee has failed to comply with LTCHA, 2007, S. O. 2007, c. 8, s. 6 (10) (b)
The licensee shall ensure that the resident is reassessed and the plan of care reviewed and revised at least every six months and at any other time when, the resident's care needs change or care set out in the plan is no longer necessary.

Findings:

1. No plan of care was found for an identified resident to indicate a reassessment had been completed related to dehydration and fluid maintenance. Resident is identified to be at risk for dehydration, however, the plan of care was not revised to include a specific hydration program for the resident, as a result this did not provide clear direction for the staff providing care. Resident's hydration status was not care planned with goals, minimizing and avoiding complication associated with dehydration.

2. The plan of care for the resident had not been revised to reflect current nutritional status of resident. The plan of care stated resident at moderate nutritional risk, the progress notes documented by the registered dietitian February 2011 had identified resident at 'High nutritional risk".

3. Nutritional assessment completed by the registered dietitian February 2011, indicated resident's food and fluid intake less than 50%. The plan of care for the resident was not revised to reflect the current poor nutrition and hydration consumption.

4. Unplanned weight loss for identified resident did not have evidence of a reassessment completed by registered dietitian to identify the specifics of the weight change and interventions required. The plan of care for the resident had not been revised to reflect current status of the weight change.

Inspector ID #:	159

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 the resident is reassessed and the plan of care reviewed and revised at least every six months and at any other time when, the resident's care needs change or care set out in the plan is no longer necessary, to be implemented voluntarily.

WN #2: The Licensee has failed to comply with O.Reg. 79/10, s. 49(2) **Every licensee of a long-term care home shall ensure that when a resident has fallen, the resident is assessed and that where the condition or circumstances of the resident require, a post-fall assessment is conducted using a clinically appropriate assessment instrument that is specifically designed for falls.**	
Findings: 1. An identified resident was found on floor by the staff, the resident was subsequently transferred to hospital for further assessment. 2. Resident returned from the hospital with an identified injury, , however there is no evidence of a post fall assessment conducted by the home.	
Inspector ID #:	147
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 to ensure all resident who have fallen have a post fall assessment conducted using a clinically appropriate assessment tool specifically for designed for fall, to be implemented voluntarily.	

WN # 3: The Licensee has failed to comply with O.Reg. 79/10 s. 69.3 Every licensee of a long-term care home shall ensure that residents with the following weight changes are assessed using an interdisciplinary approach, and that actions are taken and outcomes are evaluated: (3)A change of 10 per cent of body weight, or more, over 6 months.	
Findings: Review of a resident health record indicated 13.9 % weight loss over six months August 2010- February 2011. Unplanned weight changes were not assessed by the registered dietitian using an interdisciplinary approach, and neither action taken nor outcomes evaluated.	
Inspector ID #:	159
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 residents with the following weight changes are assessed using an interdisciplinary approach, and that actions are taken and outcomes are evaluated: (3) A change of 10 per cent of body weight, or more, over 6 months, to be implemented voluntarily.	

WN # 4: The Licensee has failed to comply with O.Reg. 79/10, s. 72 (3) (a)
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.

Findings:
Not all foods prepared and served using methods which preserves taste, nutritive value, appearance and food quality:

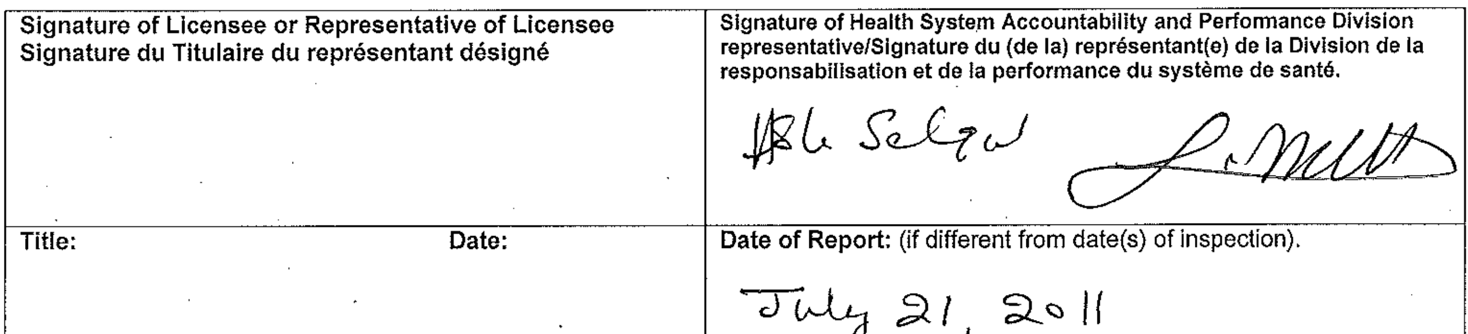
1. Recipes were not followed. Macaroni and cheese served March 1, 2011 lunch was overcooked and dry, farmer sausages burnt, vegetables overcooked and mushy resulting in lack of appearance and taste and food quality.

2. Six residents interviewed during dining observation expressed dissatisfaction and voiced concerns regarding food quality.

3. Residents' dining services committee meeting minutes of January 2011 indicate that residents voiced concerns regarding vegetables sometimes too hard or too soft., there have been no improvement in food production, or modification to recipes.

Inspector ID #:	159

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 to be implemented voluntarily.



Signature of Licensee or Representative of Licensee **Signature du Titulaire du représentant désigné**	**Signature of Health System Accountability and Perfomance Division representative/Signature du (de la) représentant(e) de la Division de la responsabilisation et de la performance du système de santé.**
Title: **Date:**	**Date of Report:** (if different from date(s) of inspection). July 21, 2011