

Ministry of Long-Term Care
Long-Term Care Operations Division
Long-Term Care Inspections Branch

London District
130 Dufferin Avenue, 4th Floor
London, ON, N6A 5R2
Telephone: (800) 663-3775

Original Public Report

Report Issue Date: September 21, 2023	
Inspection Number: 2023-1526-0002	
Inspection Type: Proactive Compliance Inspection	
Licensee: The Leamington United Mennonite Home and Apartments	
Long Term Care Home and City: Leamington Mennonite Home Long Term Care Residence, Leamington	
Lead Inspector Terri Daly (115)	Inspector Digital Signature
Additional Inspector(s) Debra Churcher (670) Julie D’Alessandro (739)	

INSPECTION SUMMARY

<p>The inspection occurred onsite on the following date(s): September 12, 13, 14, 15, 18, 2023</p> <p>The following intake(s) were inspected:</p> <ul style="list-style-type: none"> • Intake: #00096540 - Proactive Compliance Inspection (PCI)

The following **Inspection Protocols** were used during this inspection:

- Skin and Wound Prevention and Management
- Resident Care and Support Services
- Food, Nutrition and Hydration
- Medication Management
- Residents’ and Family Councils
- Infection Prevention and Control
- Safe and Secure Home
- Prevention of Abuse and Neglect

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Quality Improvement
Residents' Rights and Choices
Pain Management
Falls Prevention and Management

INSPECTION RESULTS

WRITTEN NOTIFICATION: RESIDENT AND FAMILY/CAREGIVER EXPERIENCE SURVEY

NC #001 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: FLTCA, 2021, s. 43 (4)

The licensee has failed to seek the advice of the Residents' Council in carrying out the survey and in acting on its results.

Rationale and Summary:

Review of the Residents' Council meeting minutes did not show any reference to the 2022 annual satisfaction survey or its results.

The Residents' Council President stated that they did not recall ever speaking about the satisfaction survey at any of the Residents' Council meetings.

During an interview with the Administrator they acknowledged that they had not included the Resident's Council in carrying out the survey and acting on its results.

Sources:

Review of the Residents' council meeting minutes and interview with the Residents' Council President and the Administrator.

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WRITTEN NOTIFICATION: Dining and Snack Service

NC #002 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 79 (1) 5.

The licensee has failed to ensure that the home has a dining and snack service that includes, food and fluids being served at a temperature that is both safe and palatable to the residents.

Rationale and Summary:

A review of the Temperature Reports for specific dates showed the following: that 19/23 temperatures were not recorded for the following meal services at breakfast, lunch and supper. That is 83 per cent of food temperatures not taken over eight days.

During an interview with a Dietary Aide they stated that they had not taken temperatures on the day the inspector completed a lunch dining observation as they did not have the time to take them, but that for safety reasons food temperatures should be taken at all meals.

A review of the home's policy titled Dining Experience and Food Temperatures indicated that Leamington Mennonite Home (LMH) will provide a pleasurable dining experience in an unhurried manner.

The procedure noted that:

To ensure this standard, hot foods will be served at a minimum of 60°C and cold foods at a maximum of 5°C, excluding tube feeds.

During an interview with the Director of Dietary Services (DDS) they indicated that the expectation in the home was that the food temperatures were to be done during food preparation and when holding food in the serveries for both hot and cold foods at all meals. The DDS acknowledged that the temperatures were not done at many of the meals on a specific unit during a certain period of time.

Sources:

Review of the temperature reports, the home's Infection Control Guidelines related to food temperatures and interviews with staff.

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