



**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

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Date of inspection/Date de l'inspection	Inspection No/ d'inspection	Type of Inspection/Genre d'inspection
March 21, 2011	2011_135_2979_17Mar160004	Complaint L-000342-11

Licensee/Titulaire
The Homewood Corporation, 150 Delhi Street, Guelph, ON, N1E 6K9

Long-Term Care Home/Foyer de soins de longue durée
The Village of Glendale Crossing, 3030 Singleton Ave, London ON N6L 0B6

Name of Inspector/Nom de l'inspecteur
Bonnie MacDonald #135

Inspection Summary/Sommaire d'inspection

The purpose of this inspection was to conduct a complaint inspection regarding food services and laundry.

During the course of the inspection, the inspector spoke with: the administrator, foodservice manager, environmental staff, chef, dietary aides, personal support workers, registered staff and residents.

The inspector observed lunch service on March 21, 2011 in Brighton Home Area and reviewed all menu items and production counts for the week of March 21, 2011. The inspector reviewed minutes from the Food Committee meetings since October 2010 and spoke to a number of residents regarding the quality of Food services at the Home. The inspector reviewed the Homes' Laundry services and reviewed Resident's Record.

The following Inspection Protocols were used during this inspection:

- Food Quality
- Dining Observation
- Accommodation Services Laundry
- Nutrition and Hydration

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

- 1 WN
- 1VPC

NON- COMPLIANCE / (Non-respectés)

Definitions/Définitions

WN – Written Notifications/Avis écrit
VPC – Voluntary Plan of Correction/Plan de redressement volontaire
DR – Director Referral/Régleur 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 O.Reg. 79/10, s. 71(2) (a)

The licensee shall ensure that each menu,
(a) provides for adequate nutrients, fiber and energy for the residents based on the current Dietary Reference Intakes (DRI's) established in the reports overseen by the United States National Academies and published by National Academy Press, as they may exist from time to time.

Findings:

1. Lunch Service March 21, 2011 in Brighton Dining room observed 6/11 portion sizes (54.5%) to be incorrect as per posted menu i.e. Cream of Tomato soup 120 ml. ladle served, menu indicates 180 mls. and minced parsley carrots #12 scoop served, menu indicates #10 scoop. Portion sizes observed were smaller than the posted menu. Therefore Residents were not provided adequate nutrients, fibre and energy based on the current Dietary Reference Intakes.

Inspector ID #: 135


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 menus provide adequate intake of nutrients based on the current Dietary Reference Intakes (DRI's), to be implemented voluntarily.

Signature of Licensee or Representative of Licensee
 Signature du Titulaire du représentant désigné

Signature of Health System Accountability and Performance Division
 representative/Signature du (de la) représentant(e) de la Division de la
 responsabilisation et de la performance du système de santé.

Title: _____ Date: _____

 **March 23, 2011**
 Date of Report: (if different from date(s) of inspection).