

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

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

Sudbury Service Area Office

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

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	Licensee Copy/Copie du Titulaire Nublic Copy/Copie Public			
Date(s) of inspection/Date de l'inspection	Inspection No/ d'inspection	Type of Inspection/Genre d'inspection		
April 13, 2011	2011_163_3039_13Apr103011	Follow-up - S-001182-11		
Licensee/Titulaire				
St. Joseph Health Centre of Sudbury 1140 South Bay Rd., Sudbury, ON P3E 0B6 Tel #705-674-2846 Fax#705-673-1009				
Long-Term Care Home/Foyer de soins de longue durée				
St. Gabriel's Villa of Sudbury 4690 Municipal Road 15, Chelmsford, ON P0M 1L0 Tel # 705-674-4447 Fax# 705-673-1009				
Name of Inspector(s)/Nom de l'inspecteur(s)				
Diana Stenlund, ID # 163				
Inspection Summary/Sommaire d'inspection				



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The purpose of this inspection was to conduct a follow-up inspection of the Dietary Pre-Occupancy Review conducted on March 23<sup>rd</sup> and March 24<sup>th</sup>, 2011.

During the course of the inspection, the inspector spoke with: Food Service Supervisor and Project/Site Manager.

During the course of the inspection, the inspector:

Reviewed the therapeutic menu and week-at-a-glance menu. Reviewed the emergency menu plan. Reviewed policies. Conducted a brief tour of the kitchen. Reviewed food handler certifications. Reviewed onsite hours of the FSS and NM.

The following Inspection Protocols were used during this inspection:

Food Quality Sufficient Staffing Safe and Secure Home

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

4 WN

3 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 Le suivant constituer un avis d'écrit de l'exigence prévue le paragraphe 1 paragraph 1 of section 152 of the LTCHA. de section 152 de les foyers de soins de longue durée. Non-compliance with requirements under the Long-Term Care Homes Non-respect avec les exigences sur le Loi de 2007 les foyers de soins de Act, 2007 (LTCHA) was found. (A requirement under the LTCHA includes longue durée à trouvé. (Une exigence dans le loi comprend les exigences the requirements contained in the items listed in the definition of contenues dans les points énumérés dans la définition de "exigence "requirement under this Act" in subsection 2(1) of the LTCHA.) 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.11(1)(a) Every licensee of a long-term care home shall ensure that there is,

a) an organized program of nutrition care and dietary services for the home to meet the daily nutrition needs of the residents;



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#### Findings:

1) The "Diet Order Glossary Policy" identifies as part of the Licensee's organized program of nutrition care and dietary services that there are "Renal Interventions" based on the diet being "individualized using the Regular Diet as much as possible by the Registered Dietitian" however the same policy does not address the planned, 4 week cycle "Renal Diet".

2) The "Diet Order Glossary Policy" outlines information about a Modified Diabetic diet for the control of diabetes however the same policy does not provide information about the Diabetic/Weight Reducing diet found on the Therapeutic Diet Sheets.

3) Therapeutic Diet Sheets indicate that soups offered on Week 3 on Friday and Saturday are not the same soups as posted on Week 3 on Friday and Saturday of the Week-At-A-Glance Menu.

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#### **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 respect to establishing consistency between the Diet Order Glossary Policy, the Week-At-A-Glance Menu and the Therapeutic Diet Sheets. This plan is to be implemented voluntarily.

WN #2: The Licensee has failed to comply with O. Reg. 79/10 s. 230(8) The licensee shall keep current all arrangements with community agencies, partner facilities and resources that will be involved in responding to emergencies.

#### Findings:

1) The posted emergency contact information in the dietary department does not contain after-hours (outside of 8am to 4pm) contact information and is therefore not current with the information contained in the Pre-Occupancy Planning binder contains emergency contact information for after hours however this is not included with the emergency contact information posted in the dietary department.

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WN #3: The Licensee has failed to comply with O. Reg. 79/10, s. 71(1)(b) Every licensee of a long-term care home shall ensure that the home's menu cycle, b) includes menus for regular, therapeutic and texture modified diets for both meals and snacks;

#### Findings:

1) The home's menu cycle, does not include menus for regular, therapeutic and texture modified diets for both meals and snacks. Diabetic Minced and Diabetic Pureed diets appear on the Therapeutic Diet Snack Sheets however are not included on the Therapeutic Diet Sheets for the main meals.



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## 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 respect to ensuring that the Therapeutic Diet Sheets include all diet and textures that appear on the Therapeutic Diet Snack Sheets. This plan is to be implemented voluntarily.

WN #4: The Licensee has failed to comply with O. Reg. 79/10, s. 71(2)(b) The licensee shall ensure that each menu, b) provides for a variety of foods, including fresh seasonal foods, each day from all food groups in keeping with Canada's Food Guide as it exists from time to time.

Findings:

1) There is a lack of variety in the Therapeutic Diet Snack menu. The HS (evening) snack for the Diabetic Minced and Diabetic Pureed diets on the Therapeutic Diet Snack Sheets is the same everyday for the entire 4 week menu cycle.

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#### **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 respect to ensuring that the provision of snacks for all diets listed on the Therapeutic Diet Snack Sheets includes a variety of foods, including fresh seasonal foods from all food groups in keeping with Canada's Food Guide. This plan is to be implemented voluntarily.

Signature of Licensee or R Signature du Titulaire du re		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.	
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Title:	Date:	Date of Report: (if different from date(s) of inspection).	
		may 3, 2011	
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