



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

Health System Accountability and Performance Division
Performance Improvement and Compliance Branch

London Service Area Office
291 King Street, 4th Floor
LONDON, ON, N6B-1R8
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291, rue King, 4ième étage
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Division de la responsabilisation et de la performance du système de santé
Direction de l'amélioration de la performance et de la conformité

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 23, 2013	2013_183135_0031	L-000543-13	Follow up

Licensee/Titulaire de permis

CHARTWELL MASTER CARE LP
100 Milverton Drive, Suite 700, MISSISSAUGA, ON, L5R-4H1

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

CHATEAU GARDENS AYLNER LONG TERM CARE CENTRE
465 TALBOT STREET WEST, AYLNER, ON, N5H-1K8

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

BONNIE MACDONALD (135)

Inspection Summary/Résumé de l'inspection

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

This inspection was conducted on the following date(s): July 17, 18, 2013.

During the course of the inspection, the inspector(s) spoke with Regional Director of Operations, Dietary Services Consultant, Food Services Manager, Cook, 2 Dietary Aides and Resident.

During the course of the inspection, the inspector(s) reviewed production records, standardized recipes, ordering policies and procedures and interviewed staff and residents. Observations were made of meal production and meal service in the home.

The following Inspection Protocols were used during this inspection:



Dining Observation
Food Quality

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

Legend	Legendé
WN – Written Notification	WN – Avis écrit
VPC – Voluntary Plan of Correction	VPC – Plan de redressement volontaire
DR – Director Referral	DR – Aiguillage au directeur
CO – Compliance Order	CO – Ordre de conformité
WAO – Work and Activity Order	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.)	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.
The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.	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. (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 the planned menu items are offered and available at each meal and snack as evidenced by:

A review of the home's production records and documentation from June 5, 2013, to July 11, 2013, revealed 27 food items as per the planned menu were not available as follows:

June 5, 2013-bananas

June 8, 2013-pineapple juice for PM snack

June 9, 2013-cantaloupe for lunch, no oranges, strawberries or green grapes for fruit salad for dinner

June 10, 2013-not enough potatoes for potato salad for lunch

June 11, 2013-yogurt for breakfast

June 14, 2013-fresh potatoes for dinner

June 15, 2013-citrus salad on menu fruit salad served

June 15, 2013-rye bread not available for pastrami on rye

June 19, 2013-watermelon for lunch

June 20, 2013-frozen potatoes for dinner

June 20, 2013-Parmesan cheese

June 20, 2013-fancy blend vegetable for dinner

June 23, 2013-pineapple rings for dinner

July 1, 2013-peppers for lunch

July 2, 2013-yogurt for breakfast

July 7, 2013-strawberries and dinner rolls for salad at lunch

July 8, 2013-lemons, coleslaw, cantaloupe and zucchini loaf

July 9, 2013-toffee pudding cake for lunch and banana cream pie for dinner

July 11, 2013-butter pods

During an interview, the Director of Regional Operations and the Dietary Services Consultant confirmed their expectations that the planned menu items are available at each meal and snack. [s. 71. (4)]

Additional Required Actions:

CO # - 001 will be served on the licensee. Refer to the "Order(s) of the Inspector".

WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 72. Food production



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Specifically failed to comply with the following:

**s. 72. (2) The food production system must, at a minimum, provide for,
(c) standardized recipes and production sheets for all menus; O. Reg. 79/10, s.
72 (2).**

Findings/Faits saillants :



1. The Licensee has failed to ensure that the food production system at a minimum, provide for, standardized recipes and production sheets for all menus to guide staff in the production of meals as evidenced by the following:

Record review of the home's standardized recipes and production sheets for week 1 of the menu from Monday July 15, 2013, to Friday July 19, 2013, revealed the following:

Dinner July 15, 2013, there was no standardized recipe for the tomato sauce for spaghetti and meatballs.

Breakfast July 17, 2013, the production sheet indicates Apple Spice muffins are to be produced. There was no Apple Spice muffin recipe.

Lunch July 19, 2013, there were no standardized recipes for Broccoli Salad, minced Broccoli Salad and puree Broccoli Salad.

Record review revealed the production sheets did not provide clear direction for staff producing meals when the following was observed:

Lunch July 18, 2013, the puree Tuna Sandwich recipe indicates serving size is #8 scoop and the bread and tuna filling are pureed together.

The production sheet and therapeutic menu sheet indicate a #12 scoop is used for the tuna filling and a #16 scoop is used for serving the bread.

During lunch July 18, 2013, staff were observed serving the tuna and bread separately and not together as per the standardized recipe.

Lunch July 19, 2013, the puree Salmon Salad on Croissant recipe indicates serving size is #8 scoop and the bread and salmon filling are pureed together.

The production sheet and therapeutic menu sheet indicate a #12 scoop is used for the filling and a #16 scoop is used for serving the bread.

During an interview, staff revealed they follow the production sheets and not the standardized recipes for the tuna and salmon salad sandwiches as the standardized recipes do not provide the correct directions or serving sizes for sandwich assembly.

During an interview, the Director of Regional Operations and the Dietary Services



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Consultant confirmed their expectations that the food production system provide for, standardized recipes and production sheets for all menus to guide staff in the production of meals for residents. [s. 72. (2) (c)]

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 the food production system at a minimum, provide for, standardized recipes and production sheets for all menus to guide staff in the production of meals for residents, to be implemented voluntarily.

Issued on this 23rd day of July, 2013

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

Barnie Mac Donald



Ministry of Health and
Long-Term Care

Ministère de la Santé et
des Soins de longue durée

Order(s) of the Inspector
Pursuant to section 153 and/or
section 154 of the *Long-Term Care
Homes Act, 2007*, S.O. 2007, c.8

Ordre(s) de l'inspecteur
Aux termes de l'article 153 et/ou
de l'article 154 de la *Loi de 2007 sur les foyers
de soins de longue durée*, L.O. 2007, chap. 8

Health System Accountability and Performance Division
Performance Improvement and Compliance Branch

Division de la responsabilisation et de la performance du système de santé
Direction de l'amélioration de la performance et de la conformité

Public Copy/Copie du public

Name of Inspector (ID #) /

Nom de l'inspecteur (No) : BONNIE MACDONALD (135)

Inspection No. /

No de l'inspection : 2013_183135_0031

Log No. /

Registre no: L-000543-13

Type of Inspection /

Genre d'inspection: Follow up

Report Date(s) /

Date(s) du Rapport : Jul 23, 2013

Licensee /

Titulaire de permis : CHARTWELL MASTER CARE LP
100 Milverton Drive, Suite 700, MISSISSAUGA, ON,
L5R-4H1

LTC Home /

Foyer de SLD : CHATEAU GARDENS AYLMEY LONG TERM CARE
CENTRE
465 TALBOT STREET WEST, AYLMEY, ON, N5H-1K8

Name of Administrator /

Nom de l'administratrice
ou de l'administrateur : *Lori Demaiter*
~~ANN STANSELL~~

To CHARTWELL MASTER CARE LP, you are hereby required to comply with the following order(s) by the date(s) set out below:



**Ministry of Health and
Long-Term Care**

Order(s) of the Inspector
Pursuant to section 153 and/or
section 154 of the *Long-Term Care
Homes Act, 2007*, S.O. 2007, c.8

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de l'article 154 de la *Loi de 2007 sur les foyers
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Order # / **Order Type /**
Ordre no : 001 **Genre d'ordre :** Compliance Orders, s. 153. (1) (a)

Linked to Existing Order /
Lien vers ordre existant: 2013_171155_0020, CO #001;

Pursuant to / Aux termes de :

O.Reg 79/10, 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).

Order / Ordre :

The Licensee shall ensure that the planned menu items are offered and available at each meal and snack.

Grounds / Motifs :



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section 154 of the *Long-Term Care
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de l'article 154 de la *Loi de 2007 sur les foyers
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1. The Licensee has failed to ensure that the planned menu items are offered and available at each meal and snack as evidenced by:

A review of the home's production records and documentation from June 5, 2013, to July 11, 2013, revealed 27 food items as per the planned menu were not available as follows:

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June 14, 2013-fresh potatoes for dinner

June 15, 2013-citrus salad on menu fruit salad served

June 15, 2013-rye bread not available for pastrami on rye

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June 20, 2013-frozen potatoes for dinner

June 20, 2013-Parmesan cheese

June 20, 2013-fancy blend vegetable for dinner

June 23, 2013-pineapple rings for dinner

July 1, 2013-peppers for lunch

July 2, 2013-yogurt for breakfast

July 7, 2013-strawberries and dinner rolls for salad at lunch

July 8, 2013-lemons, coleslaw, cantaloupe and zucchini loaf

July 9, 2013-toffee pudding cake for lunch and banana cream pie for dinner

July 11, 2013-butter pods

During an interview, the Director of Regional Operations and the Dietary Services Consultant confirmed their expectations that the planned menu items are available at each meal and snack.

This has been previously issued as a compliance order on June 25, 2013, as part of the Resident Quality Inspection May 21, 2013.

(135)



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Order(s) of the Inspector
Pursuant to section 153 and/or
section 154 of the *Long-Term Care
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**This order must be complied with by /
Vous devez vous conformer à cet ordre d'ici le :**

Aug 01, 2013



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section 154 of the *Long-Term Care
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REVIEW/APPEAL INFORMATION

TAKE NOTICE:

The Licensee has the right to request a review by the Director of this (these) Order(s) and to request that the Director stay this (these) Order(s) in accordance with section 163 of the Long-Term Care Homes Act, 2007.

The request for review by the Director must be made in writing and be served on the Director within 28 days from the day the order was served on the Licensee.

The written request for review must include,

- (a) the portions of the order in respect of which the review is requested;
- (b) any submissions that the Licensee wishes the Director to consider; and
- (c) an address for services for the Licensee.

The written request for review must be served personally, by registered mail or by fax upon:

Director
c/o Appeals Coordinator
Performance Improvement and Compliance Branch
Ministry of Health and Long-Term Care
1075 Bay Street, 11th Floor
TORONTO, ON
M5S-2B1
Fax: 416-327-7603



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When service is made by registered mail, it is deemed to be made on the fifth day after the day of mailing and when service is made by fax, it is deemed to be made on the first business day after the day the fax is sent. If the Licensee is not served with written notice of the Director's decision within 28 days of receipt of the Licensee's request for review, this(these) Order(s) is(are) deemed to be confirmed by the Director and the Licensee is deemed to have been served with a copy of that decision on the expiry of the 28 day period.

The Licensee has the right to appeal the Director's decision on a request for review of an Inspector's Order(s) to the Health Services Appeal and Review Board (HSARB) in accordance with section 164 of the Long-Term Care Homes Act, 2007. The HSARB is an independent tribunal not connected with the Ministry. They are established by legislation to review matters concerning health care services. If the Licensee decides to request a hearing, the Licensee must, within 28 days of being served with the notice of the Director's decision, give a written notice of appeal to both:

Health Services Appeal and Review Board and the Director

Attention Registrar
151 Bloor Street West
9th Floor
Toronto, ON M5S 2T5

Director
c/o Appeals Coordinator
Performance Improvement and Compliance
Branch
Ministry of Health and Long-Term Care
1075 Bay Street, 11th Floor
TORONTO, ON
M5S-2B1
Fax: 416-327-7603

Upon receipt, the HSARB will acknowledge your notice of appeal and will provide instructions regarding the appeal process. The Licensee may learn more about the HSARB on the website www.hsarb.on.ca.



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RENSEIGNEMENTS SUR LE RÉEXAMEN/L'APPEL

PRENDRE AVIS

En vertu de l'article 163 de la Loi de 2007 sur les foyers de soins de longue durée, le titulaire de permis peut demander au directeur de réexaminer l'ordre ou les ordres qu'il a donné et d'en suspendre l'exécution.

La demande de réexamen doit être présentée par écrit et est signifiée au directeur dans les 28 jours qui suivent la signification de l'ordre au titulaire de permis.

La demande de réexamen doit contenir ce qui suit :

- a) les parties de l'ordre qui font l'objet de la demande de réexamen;
- b) les observations que le titulaire de permis souhaite que le directeur examine;
- c) l'adresse du titulaire de permis aux fins de signification.

La demande écrite est signifiée en personne ou envoyée par courrier recommandé ou par télécopieur au:

Directeur
a/s Coordinateur des appels
Direction de l'amélioration de la performance et de la conformité
Ministère de la Santé et des Soins de longue durée
1075, rue Bay, 11^e étage
Ontario, ON
M5S-2B1
Fax: 416-327-7603

Les demandes envoyées par courrier recommandé sont réputées avoir été signifiées le cinquième jour suivant l'envoi et, en cas de transmission par télécopieur, la signification est réputée faite le jour ouvrable suivant l'envoi. Si le titulaire de permis ne reçoit pas d'avis écrit de la décision du directeur dans les 28 jours suivant la signification de la demande de réexamen, l'ordre ou les ordres sont réputés confirmés par le directeur. Dans ce cas, le titulaire de permis est réputé avoir reçu une copie de la décision avant l'expiration du délai de 28 jours.



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En vertu de l'article 164 de la Loi de 2007 sur les foyers de soins de longue durée, le titulaire de permis a le droit d'interjeter appel, auprès de la Commission d'appel et de révision des services de santé, de la décision rendue par le directeur au sujet d'une demande de réexamen d'un ordre ou d'ordres donnés par un inspecteur. La Commission est un tribunal indépendant du ministère. Il a été établi en vertu de la loi et il a pour mandat de trancher des litiges concernant les services de santé. Le titulaire de permis qui décide de demander une audience doit, dans les 28 jours qui suivent celui où lui a été signifié l'avis de décision du directeur, faire parvenir un avis d'appel écrit aux deux endroits suivants :

À l'attention du registraire
Commission d'appel et de révision
des services de santé
151, rue Bloor Ouest, 9e étage
Toronto (Ontario) M5S 2T5

Directeur
a/s Coordinateur des appels
Direction de l'amélioration de la performance et de la
conformité
Ministère de la Santé et des Soins de longue durée
1075, rue Bay, 11e étage
Ontario, ON
M5S-2B1
Fax: 416-327-7603

La Commission accusera réception des avis d'appel et transmettra des instructions sur la façon de procéder pour interjeter appel. Les titulaires de permis peuvent se renseigner sur la Commission d'appel et de révision des services de santé en consultant son site Web, au www.hsarb.on.ca.

Issued on this 23rd day of July, 2013

**Signature of Inspector /
Signature de l'inspecteur :** *Bonnie MacDonald*

**Name of Inspector /
Nom de l'inspecteur :** BONNIE MACDONALD

**Service Area Office /
Bureau régional de services :** London Service Area Office