



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

**Rapport d'inspection
prévues 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

Hamilton Service Area Office
119 King Street West, 11th Floor
Hamilton ON L8P 4Y7

Bureau régional de services de Hamilton
119, rue King Ouest, 11^{ème} étage
Hamilton ON L8P 4Y7

**Ministère de la Santé et des Soins de
longue durée**

Telephone: 905-546-8294
Facsimile: 905-546-8255

Téléphone: 905-546-8294
Télécopieur: 905-546-8255

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

Licensee Copy/Copie du Titulaire Public Copy/Copie Public

Date(s) of inspection/Date de l'inspection March 25, 28, 2011	Inspection No/ d'inspection 2011_107_9562_24Mar153520	Type of Inspection/Genre d'inspection Follow Up to Inspection H-00657 Follow up related to inspections H-01513, H-03131
Licensee/Titulaire The Regional Municipality of Peel 10 Peel Centre Drive, Suite B, 4th floor, Brampton ON L6T 0E5		
Long-Term Care Home/Foyer de soins de longue durée Peel Manor 525 Main Street North, Brampton ON L6X 1N9		
Name of Inspector(s)/Nom de l'inspecteur(s) Michelle Warrener - #107		
Inspection Summary/Sommaire d'inspection		

The purpose of this inspection was to conduct a follow up inspection related to Compliance Order #001, issued on the December 10, 13, 14, 15, 2010, report H-01513, related to food production.

During the course of the inspection, the inspector spoke with: The Administrator, Production Lead, Food Service Supervisor, Human Resources Associate, residents in the Community dining room and Blue Jay wing, President of the Resident's Council, and staff members in the nursing and dietary departments.

During the course of the inspection, the inspector: Reviewed food production systems, the lunch meal service, and sampled the food at the observed meals.

The following Inspection Protocols were used during this inspection:

Dining Observation
Food Quality

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

[3] WN
[2] VPC
[1] CO: CO # 001

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 O. Reg. 79/10, s.71(4)

71 (4) The licensee shall ensure that the planned menu items are offered and available at each meal and snack.

Findings:

1. A resident requiring a special menu was not offered a choice of dessert at the lunch meal March 28, 2011. An alternative dessert that is appropriate for the resident's diet was on the planned menu, however, this was not offered to the resident, resulting in the resident being provided a dessert that is not suitable for the resident's dietary restrictions.

Inspector ID #: 107

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 planned menu items are offered and available at each meal and snack, to be implemented voluntarily.

WN #2: The Licensee has failed to comply with O. Reg. 79/10, s.72(2)(d)
72 (2) The food production system must, at a minimum, provide for,
(d) preparation of all menu items according to the planned menu

Findings:

The following menu items were not prepared according to the planned menu at the lunch meals March 25 and 28, 2011:

1. Not all planned recipes were followed, resulting in variation in flavour, nutritive value and appearance: The tomato cucumber salad prepared for the minced and pureed menu did not follow the recipe and was not the same as the salad prepared for the regular texture menu, resulting in variations in flavour and nutritive value between the products; the ham sandwich prepared did not follow the recipe, resulting in variations in flavour and nutritive value; the lettuce salad prepared March 28, 2011 for the lunch meal was not consistent with the planned recipe resulting in reduced nutritive value, quality and variety of vegetables; the recipe for minced and pureed chicken fingers was not followed resulting in variations in nutritive value, flavour, and consistency. The recipe calls for breaded chicken fingers with the addition of chicken gravy, however, plain diced chicken with water and chicken soup base was prepared for the pureed menu and chicken fingers mixed with plain diced chicken, water and chicken soup base was prepared for the minced texture. The chicken prepared for the minced and pureed menus did not have the same level of flavour as the regular textured product.
2. Production sheets that identify the quantity of each menu item to send to each dining room, were not followed by staff preparing the lunch meal March 25, 2011. Production sheets require the preparation of six minced ham sandwiches for the Community dining room. Three minced ham sandwiches were prepared and available, however, six portions were required, resulting in a delayed meal service for the three residents waiting for the additional sandwiches to be prepared.
3. Chicken fingers for the minced menu and grilled cheese sandwiches for the pureed menu were cooked at 10:00am for the lunch meal March 28, 2011. The items were then refrigerated to cool, texture modified and reheated prior to the lunch meal. Recipe directions do not indicate this method of preparation.

Inspector ID #: 107

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 the food production system provides for preparation of all menu items according to the planned menu, to be implemented voluntarily.

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

72(3) 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
- (b) prevent adulteration, contamination and food borne illness

Findings:

Not all foods were prepared and served using methods which preserve taste, nutritive value, appearance and food quality at the lunch meals March 25 and 28, 2011.

1. Not all recipes are consistent with the planned menu, resulting in variation in nutritive value and appearance. The menu identifies a tomato cucumber salad, however, the recipe reflects a cucumber dill salad (no tomatoes). Staff prepared the salad with tomatoes and cucumbers, without adjusting the recipe to reflect the change in ingredients.
2. Recipes have been altered, resulting in reduced palatability and food quality. Fresh vegetables were identified for the marinated vegetable salad, however, frozen vegetables were substituted on the recipe. The quality of the prepared marinated vegetable salad was poor - the vegetables were water logged and mushy. Multiple residents did not consume the product and voiced complaints about both the appearance and taste of the salad as prepared and served at the lunch meal March 28, 2011.
3. The recipe for rice pudding prepared on March 25, 2011 required alterations and adjustments during preparation, as the Cook identified deficiencies in the recipe as written. The recipe had not been adjusted despite several cycles through the menu, resulting in potential for variations in flavour and consistency. Staff interviewed identified consistent concerns about the accuracy of some of the recipes resulting in varied quality of products being prepared, and/or the increased time required to adjust the recipes.
4. The recipe for the minced ham sandwich does not provide clear direction related to the quantity of meat filling to be served for each sandwich, resulting in potential variations in nutritive value.
5. Hot menu items for the texture modified menus were prepared too far in advance of meal service resulting in reduced nutritive value and food quality. Minced and pureed vegetables were prepared and placed in hot holding at 3:15 pm for the 5:00 pm dinner meal March 25, 2011. Supervisory staff interviewed stated that preparation of minced and pureed vegetables was to begin at 3:15pm. Job routines posted on the wall of the kitchen identify that at 12:00 the cook is to season and begin steaming of the vegetables for minced and pureed textures for the supper meal at 5:00pm. Chicken fingers for the minced menu and grilled cheese sandwiches for the pureed menu were cooked at 10:00am for the lunch meal March 28, 2011. The items were then refrigerated to cool, texture modified and reheated prior to the lunch meal, resulting in extended preparation time, and an additional step which creates a risk for food borne illness.

Inspector ID #: 107

Additional Required Actions:

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



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under the *Long-
Term Care Homes
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Rapport
d'inspection prévue
le *Loi de 2007 les
foyers de soins de
longue durée*

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.	
		APCJ 18/11 <i>[Handwritten Signature]</i>	
Title:	Date:	Date of Report: (if different from date(s) of inspection).	



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

	<input type="checkbox"/> Licensee Copy/Copie du Titulaire	<input checked="" type="checkbox"/> Public Copy/Copie Public
Name of Inspector:	Michelle Warrener	Inspector ID # 107
Log #:	H-00657	
Inspection Report #:	2011_107_9562_24Mar153520	
Type of Inspection:	Follow Up to Orders identified in Inspections H-01513, H-03131	
Date of Inspection:	March 25, 28, 2011	
Licensee:	The Regional Municipality of Peel 10 Peel Centre Drive, Suite B, 4 th floor, Brampton ON L6T 0E5	
LTC Home:	Peel Manor 525 Main Street North, Brampton ON L6X 1N9	
Name of Administrator:	Ms. Rani Calay	

To The Regional Municipality of Peel, you are hereby required to comply with the following order by the date set out below:

Order #:	001	Order Type:	Compliance Order, Section 153 (1)(a)
Pursuant to: O. Reg. 79/10, s. 72(3)(a)(b)			
72(3) The licensee shall ensure that all food and fluids in the food production system are prepared, stored, and served using methods to,			
<ul style="list-style-type: none"> (a) preserve taste, nutritive value, appearance and food quality (b) prevent adulteration, contamination and food borne illness 			
Order: The licensee must ensure that foods are prepared, and served using methods to preserve taste, nutritive value, appearance and food quality and prevent adulteration, contamination and food borne illness by:			
<ul style="list-style-type: none"> a) ensuring that recipes are accurate and adjusted as required, prior to meal preparation, for a consistent quality product when the recipes are followed b) ensuring that texture modified recipes provide clear direction on portioning to staff preparing meals c) ensuring that all the planned recipes are consistently followed by staff preparing and serving meals d) ensuring that hot menu items are prepared as close to meal service as possible 			



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Direction de l'amélioration de la performance et de la conformité

e) ensuring that job routines are reviewed and revised to reflect consistent direction to staff in relation to timing for the preparation of hot meal items.

Grounds:

1. Not all recipes are accurate and consistent with the planned menu, and followed by staff preparing the meal, resulting in variation in taste, nutritive value, appearance and food quality.
2. Some recipes have been altered, resulting in reduced palatability and food quality
3. Items were prepared too far in advance of meal service, resulting in reduced nutritive value and quality and the potential for food borne illness.

This order must be complied with by:	May 31, 2011
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REVIEW/APEAL 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 service for the Licensee.

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

Director
 c/o Appeals Clerk
 Performance Improvement and Compliance Branch
 Ministry of Health and Long-Term Care
 55 St. Clair Ave. West
 Suite 800, 8th floor
 Toronto, ON M4V 2Y2
 Fax: 416-327-7603

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 group of members not connected with the Ministry. They are appointed by legislation to review matters concerning health care services. If the Licensee decides to request a hearing, the Licensee must, with 28 days of being served with the notice of the Director's decision, mail or deliver a written notice of appeal to both:

Health Services Appeal and Review Board and the
 Attention Registrar
 151 Bloor Street West
 9th Floor
 Toronto, ON
 M5S 2T5

Director
 c/o Appeals Clerk
 Performance Improvement and Compliance Branch
 55 St. Claire Avenue, West
 Suite 800, 8th Floor
 Toronto, ON M4V 2Y2



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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.

Issued on this 18 day of April, 2011.	
Signature of Inspector:	<i>Wink for Michelle Warren</i>
Name of Inspector:	<i>Wink for Michelle Warren</i>
Service Area Office:	<i>Hamilton</i>