



**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

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

Bureau régional de services de Hamilton  
119, rue King Ouest, 11<sup>ième</sup> étage  
Hamilton ON L8P 4Y7

**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

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Licensee Copy/Copie du Titulaire  Public Copy/Copie Public

<b>Date(s) of inspection/Date de l'inspection</b> September 28, 2010	<b>Inspection No/ d'inspection</b> 2010_107_9562_28Sep102915	<b>Type of Inspection/Genre d'inspection</b> Complaint #H-01513
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<b>Licensee/Titulaire</b> The Regional Municipality of Peel 10 Peel Centre Drive, Brampton ON, L6T 4B9 905-791-0946 fax
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<b>Long-Term Care Home/Foyer de soins de longue durée</b> Peel Manor 525 Main Street North, Brampton ON, L6X 1N9
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<b>Name of Inspector(s)/Nom de l'inspecteur(s)</b> Michelle Warrener - #107
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**Inspection Summary/Sommaire d'inspection**

The purpose of this inspection was to conduct a complaint inspection related to food quality.

During the course of the inspection, the inspector spoke with: The Dietary Services Supervisor, Dietary Aides, Cooks, Residents, Family Members of Residents, Administrator, Nursing staff, and Receptionist.

During the course of the inspection, the inspector: Reviewed production systems, meal preparation, observed meal service and sampled meal items, reviewed menus, Food Committee and Resident's Council meeting minutes, and reviewed quality management practices.

The following Inspection Protocols were used during this inspection:  
Dining Observation  
Food Quality  
Resident's Council Interview

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

[ 3 ] WN  
[ 1 ] 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(1)(e)  
71(1) Every licensee of a long-term care home shall ensure that the home's menu cycle,  
(e) is approved by a registered dietitian who is a member of the staff of the home

**Findings:**

1. The current menu has not been approved by a Registered Dietitian who is a member of the staff of the Home. The last menu approval by the Registered Dietitian was completed on April 24, 2008.

**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 home's menu cycle is approved by a registered Dietitian who is a member of the staff of the home, 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:**

1. Diet pudding was prepared for the pureed menu instead of pureed regular tapioca pudding, resulting in reduced nutritional value of the meal.

**Inspector ID #:** 107

**WN #3:** The Licensee has failed to comply with O. Reg. 79/10, s. 72(3)(a) and (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 stored to preserve food quality:

1. Foods were cooked and hot held too far in advance of meal service (e.g. carrots for the supper meal were cooked by 1:55pm for the supper meal September 28, 2010, foods had been cooked and were hot holding prior to 10:40 am for the lunch meal September 28, 2010).
2. Cakes were not wrapped to maintain freshness when stored in the refrigerator.
3. Cookies were not stored in a manner that preserves freshness and prevents contamination. Large boxes and packages of cookies were left open in the dry storage room.

Not all foods were served using methods to preserve taste, nutritive value, appearance and food quality at the lunch meal September 28, 2010:

1. A resident who could not voice meal preference was served pureed macaroni and cheese with gravy poured over the macaroni and cheese. An appropriate sauce was not available for the macaroni.
2. A resident who was unable to voice meal preference was offered an unusual combination of food that would alter the nutritive value of the meal in comparison to the planned menu. The resident was served pureed macaroni and cheese, pureed stewed tomatoes and mashed potatoes and gravy. The resident's plan of care does not indicate this is the resident's preference.
3. Diet pudding was prepared for the pureed menu instead of pureed tapioca pudding, resulting in reduced nutritional value of the meal for residents receiving the pureed menu.

Not all foods were prepared and served using methods which preserve taste and food quality at the lunch meal September 28, 2010.

1. 12/14 residents in the Blue Jay dining room voiced dissatisfaction with their meal when asked by the Inspector.
2. The macaroni was overcooked and mushy, the cream soup had no flavour and was watery, the beet salad was bland. Not all recipes were followed, resulting in variation in flavour and appearance.

Not all foods were stored and served using methods which prevent adulteration, contamination, and food borne illness on September 28, 2010.

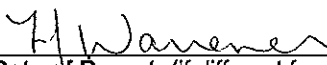
1. Not all hazardous food items stored in the walk in freezer and refrigerators were dated and labeled (e.g. Pull fridge - no label or date on: cauliflower cooked, chicken breast, green beans, beef patties, tomato sauce, oatmeal, soup, pot of diced chicken, pan of noodles, thawing chicken out of package, something that looks like bowl of pastry dough; Freezer: pan of fish - no package, has been panned, no label or date in the walk in freezer, Dessert fridge: most of the items were not labeled and dated) resulting in the potential for adulteration and food borne illness. It was unclear when the products were prepared, or opened and how long they had been in the refrigerator in relation to the expiration dates.

Inspector ID #: 107

**Additional Required Actions:**

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



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:	Date of Report: (if different from date(s) of inspection).	
		November 15, 2010	



## 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
<b>Name of Inspector:</b>	Michelle Warrener	<b>Inspector ID #</b> 107
<b>Log #:</b>	H-01513	
<b>Inspection Report #:</b>	2010_107_9562_28Sep102915	
<b>Type of Inspection:</b>	Complaint	
<b>Date of Inspection:</b>	September 28, 2010	
<b>Licensee:</b>	The Regional Municipality of Peel 10 Peel Centre Drive, Brampton ON, L6T 4B9 905-791-0946 fax	
<b>LTC Home:</b>	Peel Manor	
<b>Name of Administrator:</b>	Rani Calay	

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

<b>Order #:</b>	001	<b>Order Type:</b>	Compliance Order, Section 153 (1)(b)
<b>Pursuant to:</b> O. Reg. 79/10, s. 72(3)(a) and (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.			
<b>Order:</b> The licensee shall prepare, submit and implement a written plan for achieving compliance to meet the requirement that food and fluids in the food production system are prepared, stored, and served using methods to, preserve taste, nutritive value, appearance and food quality; and prevent adulteration, contamination and food borne illness. The plan is to be submitted to Inspector: Michelle Warrener, Ministry of Health and Long-Term Care, Performance Improvement and Compliance Branch, 119 King Street West, 11 <sup>th</sup> Floor, Hamilton ON L8P 4Y7, Fax 905-546-8255.			



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

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

**Grounds:**

1. Foods were cooked and hot held too far in advance of meal service.
2. Not all hazardous food items stored in the walk in freezer and refrigerators were dated and labelled, resulting in the potential for adulteration and food borne illness. It was unclear when the products were prepared, or opened and how long they had been in the refrigerator in relation to the expiration dates.
3. Food in the refrigerator and dry storage unit was not stored in a manner that preserved freshness and prevented contamination.
4. Not all residents were offered foods according to the planned menu, resulting in reduced nutritional value, unusual combinations of foods, and reduced palatability of the meal.
5. 12/14 residents in the Blue Jay dining room voiced dissatisfaction with their meal when asked by the Inspector.
6. The macaroni was overcooked and mushy, the cream soup had no flavour and was watery, the beet salad was bland. Not all recipes were followed, resulting in variation in flavour and appearance.

**This order must be complied with by:** November 29, 2010

**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 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, 8<sup>th</sup> 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:



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

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

**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, 8<sup>th</sup> Floor  
Toronto, ON M4V 2Y2

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](http://www.hsarb.on.ca).

Issued on this 15 day of November, 2010.	
Signature of Inspector:	
Name of Inspector:	Michelle Warrener
Service Area Office:	Hamilton Service Area Office