Ontario

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

Ministère de la Santé et des Soins de longue durée
Division de la responsabilisation et de la performance du système de santé
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Date(s) of inspection/Date de l'inspection	Inspection No/ d'inspection	Type of Inspection/Genre d'inspection
October 21 -22, 2010	2010_171_2606_21Oct111025	Follow-up, Dietary L-01598

Licensee/Titulaire

peopleCare Inc. 28 William Street North, P.O. Box 460, Tavistock, ON N0B 2R0

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

Hilltop Manor Cambridge, 42 Elliott Street, Cambridge, ON N1R 2J2

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

Elisa Wilson, LTC Homes Inspector, Dietary (#171)

Inspection Summary/Sommaire d'inspection

The purpose of this inspection was to conduct a dietary follow-up inspection in respect of previously identified unmet standards and criteria from the Long Term Care Homes Program Manual that applied when the home was governed by the Nursing Homes Act:

Dietary Referral conducted April 2008.
B3.23
P1.14
P1.18
P1.27

During the course of the inspection, the inspector spoke with: the administrator, the director of care, foodservices manager, cooks, dietary aides, registered staff, personal support workers, and residents.

The inspector observed lunch, afternoon snack and dinner service on October 21, 2010. Recipes and production sheets were reviewed for October 21 and 22, 2010. Plans of care were reviewed for four residents in Point Click Care.

The following Inspection Protocols were used during this inspection:
Dining Observation
Snack Observation
Food Quality

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

4 WN
2 VPC

Corrected Non-Compliance is listed in the section titled Corrected Non-Compliance.

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 LTCHA, 2007, S.O. 2007, c.8, s6(1)(c). Every licensee of a long-term care home shall ensure that there is a written plan of care for each resident that sets out,
(c) clear directions to staff and others who provide direct care to the resident.

Findings:

1. The charted plan of care for Resident #1 indicates on August 26, 2010 the diet order changed to regular from reducing. The diet spreadsheet used in the dining room indicates a reducing diet is still required.
2. The charted plan of care and the dining room diet sheet for Resident #2 indicate a minced texture but the diet list used at snack time and the MAR indicate regular texture.
3. The charted plan of care for Resident #3 indicates a regular texture and 1 box of Boost at am snack. A progress note from the dietitian on October 14. 2010 and the diet sheet in the dining room indicate different snacks and supplements are required. The snack list shows this resident name twice, once with a minced texture and once with a regular texture.
4. The charted plan of care for Resident #4 indicates a regular diet but no texture. The diet list used at snacks and the MAR indicate a modified diabetic, regular texture and the diet spreadsheet used in the dining room indicates a regular diet and regular texture.

Additional Required Actions:
Note: the Home has already developed a plan of correction for this non-compliance.

WN #2: The Licensee has failed to comply with LTCHA, 2007, S.O. 2007, c.8, s.6(7). The licensee shall ensure that the care set out in the plan of care is provided to the resident as specified in the plan.

Findings:

1. Three residents required a specific supplement at lunch on October 21, 2010 according to the diet spreadsheets available in the dining room, however they did not receive this product.

WN #3: The Licensee has failed to comply with O.Reg. 79/10, s.72(2)(c) and (d). The food production system must, at a minimum, provide for,
(c) standardized recipes and production sheets for all menus;
(d) preparation of all menu items according to the planned menu;

Findings:

1. Not all menu items had a current recipe, for e.g., cabbage roll casserole, spaghetti and meatballs and pureed bread were missing on October 21, 2010.
2. On October 21, 2010 at lunch the following items on the menu were not prepared: Regular, minced and pureed versions of green beans, mango, and strawberries. At dinner the same day double boiled potatoes were not prepared.

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 there are standardized menus and production sheets for all menus and that all menu items are prepared according to the planned menu, to be implemented voluntarily.

WN #4: The Licensee has failed to comply with O.Reg. 79/10, s.73(1)10. Every licensee of a long-term care home shall ensure that the home has a dining and snack service that includes, at a minimum, the following elements:
(10) Proper techniques to assist residents with eating, including safe positioning of residents who require assistance.

Findings:

1. Staff stood while assisting identified residents to eat and drink their afternoon snack on October 21, 2010.

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 proper techniques are used to assist residents with eating, to be implemented voluntarily.

CORRECTED NON-COMPLIANCE Non-respects à Corrigé				
REQUIREMENT EXIGENCE	TYPE OF ACTION/ORDER	ACTION/ ORDER #	INSPECTION REPORT #	INSPECTOR ID #
P1.18, LTC Homes Program Manual, now found in O. Reg. 79/10, s. 71 (3)(c).			Dietary Referral April 2008	

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). Oct. 25, 2010