



**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

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**Ministère de la Santé et des Soins de  
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|                                                                                                                                          |                                                                 |                                                                     |
|------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|---------------------------------------------------------------------|
| <b>Date(s) of inspection/Date de l'inspection</b><br>October 13-14, 2010                                                                 | <b>Inspection No/ d'inspection</b><br>2010_171_2841_14Oct133836 | <b>Type of Inspection/Genre d'inspection</b><br>Follow-up – H-02062 |
| <b>Licensee/Titulaire</b><br>Oakwood Retirement Communities Inc., 325 Max Becker Drive Suite 201 Kitchener, ON                           |                                                                 |                                                                     |
| <b>Long-Term Care Home/Foyer de soins de longue durée</b><br>Village of Wentworth Heights, 1620 Upper Wentworth St. Hamilton ON. L9B 2W3 |                                                                 |                                                                     |
| <b>Name of Inspector(s)/Nom de l'inspecteur(s)</b><br>Elisa Wilson – LTC Homes Inspector, Dietary (#171)                                 |                                                                 |                                                                     |
| <b>Inspection Summary/Sommaire d'inspection</b>                                                                                          |                                                                 |                                                                     |

The purpose of this inspection was to conduct a Dietary Follow-up inspection in respect of previously issued non-compliances.

H-00443 Complaint Inspection September 2010  
O.Reg. 79/10 s.71(1)(b)

H-01468 Other Inspection September 2010  
O.Reg. 79/10 s.71(5)

During the course of the inspection, the inspector spoke with: the director of care, director of food services, dietary aides, cooks, personal support aides, registered dietitian and residents.

During the course of the inspection, the inspector: observed lunch and dinner service on October 13, 2010, reviewed the nutrition and hydration flow sheets in each of four home areas, requested and reviewed the Home's policy on Nutrition and Hydration, reviewed the therapeutic menus and production sheets for October 13-14, 2010 and interviewed six residents.

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

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

2 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, 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:**

The following identified residents did not receive menu items according to their plan of care at the dinner meal service on October 14, 2010:

1. One resident did not receive her menu item in the correct dish as specified in her plan of care.
2. One resident received regular texture cherries however she requires a minced texture according to her diet order
3. Two residents received regular desserts however they require diet desserts according to their diet orders.

**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 in ensuring that the care set out in the plan of care is provided to the resident as specified in the plan of care, to be implemented voluntarily.

**WN #2:** The Licensee has failed to comply with O.Reg. 79/10, s.72(2)(c),(d) and (g). 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; (g) documentation on the production sheet of any menu substitutions.

**Findings:**

1. There is not a production sheet for the main breakfast items on October 14, 2010. The menu includes French toast and sausages, however the production sheet for this meal has neither of these items for regular, minced and pureed diets.
2. Not all menu items were available at meal times. Some examples include:  
Lunch October 13, 2010 - kernel corn was served however corn cobette was on the menu  
Dinner October 13, 2010 - pureed roll (bread), pureed rice, minced butter tart square, and half portions of the butter tart square for the diabetic and reducing diets were not prepared or available at meal time.
3. There are some electronic records being kept regarding menu item substitutions, however not all substitutions are being tracked. Substitutions are not being documented on the production sheets as per regulation.

**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 in ensuring standardized production sheets match the menus, all menu items are being prepared for each meal, and documentation of menu substitutions is recorded on the production sheets, to be implemented voluntarily.



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| CORRECTED NON-COMPLIANCE<br>Non-respects à Corrigé |                         |                    |                           |                |
|----------------------------------------------------|-------------------------|--------------------|---------------------------|----------------|
| REQUIREMENT<br>EXIGENCE                            | TYPE OF<br>ACTION/ORDER | ACTION/<br>ORDER # | INSPECTION REPORT #       | INSPECTOR ID # |
| O. Reg. 79/10,<br>s.71(1)(b)                       | WN                      |                    | 2010_171_2841_14Sep164104 | 171            |
| O. Reg. 79/10,<br>s.71(5)                          | WN                      |                    | 2010_171_2841_16Sep153620 | 171            |

|                                                                                                       |                                                                                                                                                                                                                                            |
|-------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Signature of Licensee or Representative of Licensee<br>Signature du Titulaire du représentant désigné | Signature of Health System Accountability and Performance Division<br>representative/Signature du (de la) représentant(e) de la Division de la<br>responsabilisation et de la performance du système de santé.<br><br><i>Elisha Wilson</i> |
| Title: _____ Date: _____                                                                              | Date of Report: (if different from date(s) of inspection).<br><br><i>20 Oct. 2010</i>                                                                                                                                                      |