

FINAL INSPECTION REPORT
Under the *Retirement Homes Act, 2010*

Inspection Information	
Date of Inspection: October 19, 2021	Name of Inspector: Tania Buko
Inspection Type: Routine Inspection	
Licensee: 2259973 Ontario Inc. / 854 2nd Avenue, Owen Sound, ON N4K 4M5 (the "Licensee")	
Retirement Home: John Joseph Place / 854 2nd Avenue , Owen Sound, ON N4K 4M5 (the "home")	
Licence Number: S0108	

Purpose of Inspection
The RHRA conducts routine inspections as set out in section 77(3) of the <i>Retirement Homes Act, 2010</i> (the "RHA").

NON-COMPLIANCE
<p>1. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 60; Standards. The Licensee failed to comply with O. Reg. 166/11, s. 41; Dementia care program.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p>60. (1) Every licensee of a retirement home shall ensure that the care services that the licensee and the staff of the home provide to the residents of the home meet the prescribed care standards.</p> <p>41. (2) The program shall include,</p> <ul style="list-style-type: none"> (a) therapies, techniques and activities, including mental stimulation, to maximize the functioning and independence of the resident in the areas of physical, cognitive, sensory and social abilities; (c) therapies, techniques and activities to promote quality of life and wellbeing for the resident;
<p>Inspection Finding</p> <p>The Licensee was unable to demonstrate that the care service of a dementia care program provided by the home meets the prescribed care standards, specifically relating to therapies, techniques and activities including mental stimulation to maximize the functioning and independence of the residents in the areas of physical, cognitive, sensory and social abilities, and therapies, techniques and activities promote to quality of life and wellbeing for the residents.</p>
<p>Outcome</p> <p>The Licensee has advised it has taken corrective action to achieve compliance. RHRA to confirm compliance by inspection.</p>
<p>2. The Licensee failed to comply with O. Reg. 166/11, s. 41; Dementia care program.</p>

Specifically, the Licensee failed to comply with the following subsection(s):

41. (4) The program shall be supervised by a member of a College, as defined in the Regulated Health Professions Act, 1991, with specific training in dementia care and care of older adults.

Inspection Finding

The Licensee was unable to demonstrate that the regulated health professional supervising the home's dementia care program had specific training in dementia care.

Outcome

At the time of the inspection, the Licensee was not in compliance. The home has since taken corrective action to achieve compliance.

3. The Licensee failed to comply with O. Reg. 166/11, s. 56; Format and retention of records.

Specifically, the Licensee failed to comply with the following subsection(s):

56. (3) The licensee shall ensure that each of the records is kept in a readable and useable format that allows a complete copy of the record to be readily produced.

Inspection Finding

The Licensee was unable to produce a written record of complaints during the inspection.

Outcome

The Licensee has advised it has taken corrective action to achieve compliance. RHRA to confirm compliance by inspection.

**4. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 62; Contents of plan.
The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 62; Assessment of resident.
The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 62; Reassessment and revision.**

Specifically, the Licensee failed to comply with the following subsection(s):

62. (4) The licensee of a retirement home shall ensure that there is a written plan of care for each resident of the home that sets out,

- (b) the planned care services for the resident that the licensee will provide, including,
 - (i) the details of the services,
 - (ii) the goals that the services are intended to achieve,
 - (iii) clear directions to the licensee's staff who provide direct care to the resident;

62. (6) The licensee shall ensure that the plan of care is based on an assessment of the resident and the needs and preferences of the resident.

62. (12) The licensee shall ensure that the resident is reassessed and the plan of care reviewed and revised at least every six months and at any other time if, in the opinion of the licensee or the resident,
(b) the resident’s care needs change or the care services set out in the plan are no longer necessary;

Inspection Finding

The Licensee failed to ensure the reviewed residents were reassessed and their respective plans of care were reviewed and revised every six months and/or when the resident's care needs or care services changed. In addition, a resident was identified as a falls risk, however, it was not identified in the resident's plan of care nor were the needs of the resident related to being at risk of falls. Further, not all of the required elements of the dementia care were documented in the reviewed plans of care for residents in the home's dementia care program.

Outcome

The Licensee has advised it has taken corrective action to achieve compliance. RHRA to confirm compliance by inspection.

5. The Licensee failed to comply with O. Reg. 166/11, s. 27; Infection prevention and control program.

Specifically, the Licensee failed to comply with the following subsection(s):

27. (5) The licensee of a retirement home shall ensure that,
(0.b) all reasonable steps are taken in the retirement home to follow,
(i) any directive respecting coronavirus (COVID-19) issued to long-term care homes by the Chief Medical Officer of Health under section 77.7 of the Health Protection and Promotion Act,

Inspection Finding

The Licensee failed to take all reasonable steps to follow the recommendations, guidance and advice and directives of the Chief Medical Officer of Health regarding COVID-19. Specifically, visitors were observed wearing cloth masks in the home and not medical masks, a staff member was observed not properly wearing a mask, and the home's visitor policy was outdated and non-compliant.

Outcome

The Licensee has advised it has taken corrective action to achieve compliance. RHRA to confirm compliance by inspection.

6. The Licensee failed to comply with O. Reg. 166/11, s. 27; Infection prevention and control program.

Specifically, the Licensee failed to comply with the following subsection(s):

27. (2) The licensee shall consult on an ongoing basis and not less than once a year with the local medical officer of health or designate about identifying and addressing health care issues in the retirement home in order to reduce the incidence of infectious disease outbreaks in the home.

Inspection Finding

The Licensee was unable to demonstrate the home consulted with the Public Health or Medical Officer of Health on an annual basis as required.

Outcome

The Licensee has advised it has taken corrective action to achieve compliance. RHRA to confirm compliance by inspection.

NOTICE

The Final Inspection Report is being provided to the Licensee, the Registrar of the Retirement Homes Regulatory Authority (the “RHRA”) and the home’s Residents’ Council, if any.

Section 55 of the RHA requires that the Final Inspection Report be posted in the home in a conspicuous and easily accessible location. In addition, the Licensee must ensure that copies of every Final Inspection Report from the previous two (2) years are made available in the Home, in an easily accessible location.

The Registrar’s copy of the Final Inspection Report, as it appears here, will be included on the RHRA Retirement Home Database available online at <http://www.rhra.ca/en/retirement-home-database>.

Signature of Inspector <i>Tania Buko</i>	Date December 2, 2021
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