

FINAL INSPECTION REPORT Under the Retirement Homes Act, 2010

Inspection Information

Inspection Type: Mandatory Reporting Inspection

Licensee: 1122121 Ontario Inc. / 1532 Pelham Street N., Fonthill, ON LOS 1E3 (the "Licensee")

Retirement Home: Shorthills Villa Retirement Community / 1532 Pelham Street N., Fonthill, ON LOS 1E3

(the "home")

Licence Number: S0011

Purpose of Inspection

The RHRA received a report under section 75(1) of the Retirement Homes Act, 2010 (the "RHA").

NON-COMPLIANCE

1. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 62; Plan of care. The Licensee failed to comply with O. Reg. 166/11, s. 47; Development of plan of care.

Specifically, the Licensee failed to comply with the following subsections:

- <u>s. 62. (1)</u> When a resident commences his or her residency in a retirement home, the licensee shall, within the prescribed times, ensure that the resident is assessed and that a plan of care is developed based on the assessment and in accordance with this section and the regulations.
- (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,
 - (a) the care services that are part of a package of care services that the resident is entitled to receive under the resident's agreement with the licensee, whether or not the resident receives the services;
 - (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, and
 - (iii) clear directions to the licensee's staff who provide direct care to the resident;
 - (c) if the resident has consented to the inclusion of the information in the plan of care, the planned care services for the resident that external care providers will provide with the consent of the resident, to the extent that such information is available to the licensee after the licensee has taken all reasonable steps to obtain such information from the resident and the external care provider, including,
 - (i) the details of the services, and
 - (ii) the goals that the services are intended to achieve, and
 - (d) a statement indicating whether the resident has provided consent to the licensee to collect

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information from external care providers, to use such information and to disclose the contents of the plan of care to external care providers and others.

- s. 47. (4) Subject to subsections (5) and (6), a plan of care for a resident is complete if the plan,
 - (a) satisfies the requirements in subsections 62 (4) of the Act;
 - (b) sets out,
 - (i) any information that is necessary to allow the licensee's staff to understand the resident's needs and preferences, including cultural, spiritual and religious preferences and customary routines,
 - (ii) the names and contact information of the resident's substitute decision-makers, if any, and
 - (iii) the names of the persons who participated in the development of the plan and whether the resident and his or her substitute decision-makers, if any, participated in the development of the plan; and
 - (c) has been approved in accordance with subsection 62 (9) of the Act.

Inspection Finding

Inspection verified that 18 of 46 residents in the home have not had a Plan of Care developed. The home's current Plan of Care document does not meet the requirements as per the legislation.

Outcome

Corrective action taken.

2. The Licensee failed to comply with O. Reg. 166/11, s. 32; Records.

Specifically, the Licensee failed to comply with the following subsection:

- **<u>s. 32.</u>** If the licensee or a member of the staff of a retirement home administers a drug or other substance to a resident, the licensee shall ensure that,
 - (a) the person who administered the drug or other substance prepares a written record noting the name and amount of the drug or other substance, the route of its administration and the time and date on which it was administered.

Inspection Finding

The home's DOC failed to prepare a written record noting that four injections of Aranesp were administered to a resident from December 20, 2013 to February 19, 2014.

Outcome

Corrective action taken.

3. The Licensee failed to comply with O. Reg. 166/11, s. 22; Risk of falls.

Specifically, the Licensee failed to comply with the following subsections:

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<u>s. 22. (1)</u> Every licensee of a retirement home shall develop, document and implement strategies to reduce or mitigate the risk of falls in common areas of the home.

(3) If a resident of a retirement home falls in the home in circumstances other than those described in subsection (2) and the licensee or a staff member becomes aware of the fall, the licensee shall ensure that the licensee or a staff member documents the fall, the response to the fall and the corrective actions taken, if any.

Inspection Finding

The home's policy, Protocol for Falls, does not include strategies to reduce or mitigate the risk of falls in common areas of the home.

A resident had falls in his room on December 22, 2013 and February 15, 2014. An incident report was not completed for each fall in accordance with the home's policy and there were no corrective actions taken to prevent future harm to the resident.

Outcome

Corrective action taken.

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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 Public Register, available online at http://rhra.ca/en/register/.

Signature of Inspector	Date
	May 9, 2014

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