

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

Inspection Information	
Date of Inspection: March 20, 2014	Name of Inspector: Janet Evans
Inspection Type: Routine Inspection	
Licensee: Caessant Care Nursing and Retirement Homes Limited / 264 Norwich Avenue, Woodstock, ON N4S 3V9 (the "Licensee")	
Retirement Home: Caessant Care Fergus / 450 Queen Street E., Fergus, ON N1M 2Y7 (the "home")	
Licence Number: T0031	

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

NON-COMPLIANCE
<p>1. The Licensee failed to comply with the O. Reg. 166/11, s. 11; Posted information.</p> <p>Specifically, the Licensee failed to comply with the following subsection:</p> <p align="center">s. 11. (1) For the purposes of paragraph 4 of subsection 55 (2) of the Act, the following information is prescribed as information that must be posted in a retirement home under that subsection:</p> <p align="center">3. An explanation of the procedures to be followed in the case of an evacuation.</p>
<p>Inspection Finding</p> <p>The Licensee failed to ensure that an explanation of the procedures to be followed in the case of an evacuation were posted.</p>
<p>Outcome</p> <p>Corrective action taken.</p>
<p>2. The Licensee failed to comply with the O. Reg. 166/11, s. 24 and 25; Emergency plan.</p> <p>Specifically, the Licensee failed to comply with the following subsections:</p> <p align="center">s. 24. (1) The emergency plan required under paragraph 1 of subsection 60 (4) of the Act shall meet the requirements set out in this section.</p> <p align="center">(4) The licensee shall keep current all arrangements with community agencies, partner facilities and resources that will be involved in responding to an emergency.</p>

- (5) The licensee shall,
- (a) on an annual basis at least, test the emergency plan, including arrangements with community agencies, partner facilities and resources that will be involved in responding to an emergency, related to,
 - (b) at least once every two years, conduct a planned evacuation of the retirement home; and
 - (c) keep a written record of the testing of the emergency plan and planned evacuations and of any changes made to improve the emergency plan.

s. 25. (1) The emergency plan for a retirement home that has more than 10 residents shall, in addition to the requirements in section 24, meet the requirements set out in this section.

(5) The licensee shall ensure that the emergency plan for the retirement home is evaluated and updated at least annually and that the updating includes contact information for the relevant community agencies, partner facilities and resources that will be involved in responding to an emergency.

Inspection Finding

The Licensee had a written plan related to emergencies but the plan was not fully compliant with Ontario Regulation 166/11 sections 24 and 25.

Outcome

Corrective action taken.

3. The Licensee failed to comply with the O. Reg. 166/11, s. 43 and 44; Assessments.

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

s. 43. (1) Subject to section 45, no later than two days after a resident commences residency in a retirement home, the licensee of the home shall ensure that an initial assessment of the resident's immediate care needs is conducted.

(2) The initial assessment mentioned in subsection (1) shall consider the following matters with respect to the resident:

- 2. Presence of infectious diseases.

s. 44. (1) Subject to section 46, no later than 14 days after a resident commences residency in a retirement home, the licensee shall ensure that a full assessment of the resident's care needs and preferences is conducted.

(2) The full assessment mentioned in subsection (1) shall consider the following matters with respect to the resident:

- 1. Physical and mental health.
- 2. Functional capacity.
- 3. Cognitive ability.
- 4. Behavioural issues.
- 5. Need for care services.
- 6. Need for assistance with the activities of daily living.
- 7. The matters listed in subsection 43 (2).
- 8. Any other matter relevant to developing a plan of care for the resident.

Inspection Finding

There was evidence that the Licensee was completing assessments for residents however the Licensee was not fully compliant with Ontario Regulation 166/11, sections 43 and 44.

Outcome

Corrective action taken.

4. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 65; Additional training for direct care staff.

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

s. 65. (5) The licensee shall ensure that all staff who provide care services to residents receive training in the following matters and at the times required by the regulations, as a condition of continuing to have contact with residents, in addition to the other training that they are required to receive under this section:

- 3. Behaviour management.

Inspection Finding

The Licensee failed to fully comply with training requirements as per RHA, 2010 s. 65(5).

Outcome

Corrective action taken.

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

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

s. 22. (1) 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.

- (4) Every licensee of a retirement home shall keep a written record of all falls for which the licensee is required to ensure documentation under subsection (2) or (3) and that occur in each year, evaluate the risk of falls in the home at least annually and keep a written record of each evaluation.

Inspection Finding

The Licensee had written strategies related to falls however they failed to fully implement the strategies or show evidence of evaluating the risk of falls annually.

Outcome

Corrective action taken.

6. The Licensee failed to comply with the O. Reg., 166/11, s. 23; Behaviour management.

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

- s. 23. (1)** Every licensee of a retirement home shall develop and implement a written behaviour management strategy that includes,
- (a) techniques to prevent and address resident behaviours that pose a risk to the resident or others in the home;
 - (b) strategies for interventions to prevent and address resident behaviours that pose a risk to the resident or others in the home;
 - (c) strategies for monitoring residents that have demonstrated behaviours that pose a risk to the resident or others in the home; and
 - (d) protocols for how staff and volunteers shall report and be informed of resident behaviours that pose a risk to the resident or others in the home.
- (2) The licensee shall ensure that all staff who provide care services to residents are advised at the beginning of every shift of each resident whose behaviours require heightened monitoring because those behaviours pose a risk to the resident or others in the home.

Inspection Finding

The Licensee had evidence of a written behaviour strategy but this was not fully compliant with Ontario Regulation section 23.

Outcome

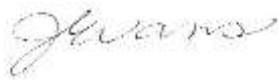
Corrective action taken.

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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