

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

Inspection Information	
<b>Date of Inspection:</b> March 20, 2014	<b>Name of Inspector:</b> Michael Hickey
<b>Inspection Type:</b> Routine Inspection	
<b>Licensee:</b> Caessant Care Nursing and Retirement Homes Limited / 264 Norwich Avenue, Woodstock, ON N4S 3V9 (the "Licensee")	
<b>Retirement Home:</b> Caessant Care On Bonnie Place / 15 Bonnie Place, St. Thomas, ON N5R 5T8 (the "home")	
<b>Licence Number:</b> S0021	

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><b>1. The Licensee failed to comply with O. Reg. 166/11 s. 43; Initial assessment of care.</b> <b>The Licensee failed to comply with O. Reg. 166/11 s. 44; Full assessment of care needs.</b></p> <p>Specifically, the Licensee failed to comply with the following subsections:</p> <p><b>s. 43. (2)</b> The initial assessment mentioned in subsection (1) shall consider the following matters with respect to the resident:</p> <ol style="list-style-type: none"> <li>1. Continence.</li> <li>2. Presence of infectious diseases.</li> <li>3. Risk of falling.</li> <li>4. Known allergies.</li> <li>5. Dietary needs including known food restrictions.</li> <li>6. Cognitive ability.</li> <li>7. Risk of harm to self and to others.</li> <li>8. Risk of wandering.</li> <li>9. Needs related to drugs and other substances.</li> </ol> <p><b>s. 44. (1)</b> 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.</p>
<p><b>Inspection Finding</b></p> <p>Inspection confirmed that a new resident's records did not contain an initial assessment as required by s. 43(2) of the regulation or records indicating an initial assessment had been completed by the Licensee.</p>

Inspection confirmed that a resident's records did not contain a completed record indicating that a full assessment as required by s. 44 (1) of the regulation had been completed within the prescribed time.

**Outcome**

Corrective action taken.

**2. The Licensee failed to comply with O. Reg. 166/11 s. 55; Contents of records.**

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

**s. 55. (5)** A licensee of a retirement home shall keep records proving compliance with the Act and this Regulation in relation to,  
(c) the skills, qualifications and training of the staff who work in the home.

**Inspection Finding**

Records proving compliance with the regulation were not available to the inspector on the day of inspection as staff training records were not kept at the facility.

**Outcome**

Corrective action taken.

**3. The Licensee failed to comply with O. Reg. 166/11 s. 59; Procedure for complaints to licensee.**

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

**s. 59. (2)** The licensee shall ensure that a written record is kept in the retirement home that includes,  
(a) the nature of each verbal or written complaint;  
(b) the date that the complaint was received;  
(c) the type of action taken to resolve the complaint, including the date of the action, time frames for actions to be taken and any follow-up action required;  
(d) the final resolution, if any, of the complaint;  
(e) every date on which any response was provided to the complainant and a description of the response; and  
(f) any response made in turn by the complainant.

**Inspection Finding**

Inspection confirmed that a written record of complaints was not kept by the home with the prescribed contents outlined in s. 59(2) of the regulation.

**Outcome**

Corrective action taken.

**4. The Licensee failed to comply with O. Reg. 166/11 s. 23; Behaviour management.**

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

- 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.

**Inspection Finding**

Inspection confirmed that a written behaviour management strategy was not developed by the Licensee at the time of inspection.

**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 June 3, 2014
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