

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

Inspection Information		
Date of Inspection: April 25, 2014	Name of Inspector: Janet Evans	
Inspection Type: Routine Inspection		
Licensee: 1700350 Ontario Ltd. / 99 Walford Road, Sudbury, ON P3E 6K3 (the "Licensee")		
Retirement Home: The Walford Timmins / 750 Tamarack Street, Timmins, ON P4N 0A4 (the "home")		

Licence Number: N0170

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

1. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 54; Information for residents.

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

s. 54. (2) The package of information shall include, at a minimum,

(c) the licensee's policy mentioned in subsection 67 (4) to promote zero tolerance of abuse and neglect of residents;

(I) a statement that a resident may purchase or apply for care services, other services, programs or goods from external care providers;

(t) information relating to staffing, including night time staffing levels and qualifications of staff of the retirement home.

Inspection Finding

The Licensee's CHIP failed to include the above items as is required.

Outcome

Corrective action taken.

 The Licensee failed to comply with O. Reg. 166/11, s. 24; Emergency plan, general. The Licensee failed to comply with O. Reg. 166/11, s. 25; Emergency plan, retirement home with more than 10 residents.

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

s. 24. (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,

- (i) the loss of essential services,
- (ii) situations involving a missing resident,
- (iii) medical emergencies, and
- (iv) violent outbursts.
- s. 25. (3) The licensee shall ensure that the emergency plan provides for the following:
 - 1. Dealing with,
 - ii. community disasters,
 - iv. bomb threats,
 - vi. chemical spills,
 - 4. Identification of the community agencies, partner facilities and resources that will be involved in responding to an emergency.
- (4) The licensee shall ensure that the emergency plan addresses the following components: 3. Communications plan.

(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 evidence of a written emergency plan however their plan did not include all the above as required. The Licensee had not been conducting monthly fire drills with staff as per their plan.

Outcome

Corrective action taken.

3. The Licensee failed to comply with O. Reg. 166/11, s.43; Initial assessment of care needs. The Licensee failed to comply with O. Reg. 166/11, s.44: Full assessment of care needs.

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

<u>s. 43. (2)</u> The initial assessment mentioned in subsection (1) shall consider the following matters with respect to the resident:

- 2. Presence of infectious diseases.
- 3. Risk of falling.

<u>s. 44. (2)</u> The full assessment mentioned in subsection (1) shall consider the following matters with respect to the resident:

- 1. Physical and mental health.
- 5. Need for care services.

Inspection Finding

The Licensee showed evidence of completing assessments of residents; however the assessments did not contain the above elements.

Outcome

Corrective action taken.

4. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 65; Obligations of licensees re staff.

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

<u>s. 65. (2)</u> Every licensee of a retirement home shall ensure that no staff work in the home unless they have received training in,

(a) the Residents' Bill of Rights;

(b) the licensee's policy mentioned in subsection 67 (4) to promote zero tolerance of abuse and neglect of residents;

(c) the protection afforded for whistle-blowing described in section 115;

(d) the licensee's policy mentioned in subsection 68 (3) regarding the use of personal assistance services devices for residents;

(f) fire prevention and safety;

(j) all other prescribed matters.

Inspection Finding

The Licensee failed to show evidence of 100% of staff being trained on the above mandatory training subjects as per RHA, 2010, s. 65 and O. Reg. 166/11, s. 14.1.

Outcome

Corrective action required.

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

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

<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.

Inspection Finding

The Licensee's written policy related to falls failed to include strategies to reduce or mitigate the risk of falls in the common areas of the home.

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 <u>http://rhra.ca/en/register/</u>.

Signature of Inspector		Date
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