RHRA Retirement Homes Regulatory Authority

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

Inspection Information	
Date of Inspection: November 28, 2014	**Name of Inspector:** Susan Lines
Inspection Type: Routine Inspection	
Licensee: 480 Metcalfe Street (Ottawa) LP / 20 Toronto Street, Toronto, ON M5C 2B8 (the "Licensee")	
Retirement Home: The Palisades Retirement Residence / 480 Metcalfe Street, Ottawa, ON K1S 3N6 (the "home")	
Licence Number: N0191	

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; Contents. Specifically, the Licensee failed to comply with the following subsection(s): **54. (2)** The package of information shall include, at a minimum, (k) an itemized list of the different types of accommodation and care services provided in the retirement home and their prices; (l) a statement that a resident may purchase or apply for care services, other services, programs or goods from external care providers; (s) information as to whether the retirement home has automatic sprinklers in each resident's room;
Inspection Finding The home's information package did not include a full list of the care services offered by the home, a statement about external care providers and accurate sprinkler information as required.
Outcome Corrective action scheduled to be completed by the Licensee by February 1, 2015.
2. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 53; Agreement required. Specifically, the Licensee failed to comply with the following subsection(s):

53. (1) The licensee of a retirement home shall enter into a written agreement with every resident of the home before the resident commences residency in the home.

Inspection Finding

There was no evidence that a resident had signed a residency agreement prior to moving into the home.

Outcome

Corrective action taken by the Licensee.

3. 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 subsection(s):

24. (4) The licensee shall keep current all arrangements with community agencies, partner facilities and resources that will be involved in responding to an emergency.

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,

(iv) violent outbursts;

(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.

25. (2) The licensee shall ensure that the development of the emergency plan includes,

(a) consultation with the relevant community agencies, partner facilities and resources that will be involved in responding to an emergency;

(b) identification of hazards and risks that may give rise to an emergency affecting the home, whether the hazards and risks arise within the home or in the surrounding vicinity or community, and strategies to address those hazards and risks.

25. (3) The licensee shall ensure that the emergency plan provides for the following:

1. Dealing with,

vii. situations involving a missing resident,

2. Evacuation of the retirement home, including a system in the home to account for the whereabouts of all residents in the event that it is necessary to evacuate and relocate residents and evacuate staff and others in case of an emergency.

3. Resources, supplies and equipment vital for the emergency response being set aside and readily available at the retirement home and regular testing of all such resources, supplies and equipment to ensure that they are in working order.

4. Identification of the community agencies, partner facilities and resources that will be involved in responding to an emergency.

Inspection Finding

The home's emergency plan did not meet the requirements.

Outcome

Corrective action scheduled to be completed by the Licensee by January 9, 2015.

4. 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 subsection(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.

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

2. Presence of infectious diseases.
9. Needs related to drugs and other substances.

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.

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

7. The matters listed in subsection 43 (2).

Inspection Finding

The home's initial assessment did not consider the presence of infectious diseases or needs related to other substances other than smoking. The home's full assessment did not consider all the matters listed in the initial assessment. Three out of the four residents' charts reviewed showed that the Licensee did not ensure that residents had initial and full assessments completed within the specified time frames.

Outcome

Corrective action taken by the Licensee.

5. The Licensee failed to comply with O. Reg. 166/11, s. 20; Food preparation.

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

20. (4) The licensee shall ensure that whenever food is prepared in the retirement home, at least one person involved in preparing the food holds a current certificate in food handling from the local public health unit or has recently successfully completed a food handling training program equivalent to that offered by public health units.

Inspection Finding

The home's records showed that only one of the six staff who required certification in food handling had certification in the required topic.

Outcome

Corrective action scheduled to be completed by the Licensee by February 17, 2015.

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
	January 7, 2015