

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

Inspection Information	
Date of Inspection: February 24, 2015	Name of Inspector: Amy Shillington
Inspection Type: Routine Inspection	
Licensee: Palermo G.P. Inc. / 2121 Argentia Road, Mississauga, ON L5N 2X4 (the "Licensee")	
Retirement Home: Palermo Village Retirement Residence / 3136 Dundas Street, Oakville, ON L6M 4J3 (the "home")	
Licence Number: T0418	

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

NON-COMPLIANCE
<p>1. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 65; Additional training for direct care staff.</p> <p>The Licensee failed to comply with O. Reg. 166/11, s. 15; Policy of zero tolerance of abuse and neglect.</p> <p>The Licensee failed to comply with O. Reg. 166/11, s. 27; Infection prevention and control program.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p>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:</p> <p>3. Behaviour management.</p> <p>15. (1) The program for preventing abuse and neglect described in clause 67 (5) (c) of the Act shall entail training and retraining requirements for all staff of the retirement home, including,</p> <p>(a) training on the relationship between power imbalances between staff and residents and the potential for abuse and neglect by those in a position of trust, power and responsibility for resident care;</p> <p>(b) situations that may lead to abuse and neglect and how to avoid such situations.</p> <p>27. (9) The licensee shall ensure that each staff member who works in the retirement home receives training on how to reduce the incidence of infectious disease transmission, including,</p>

(a) the need for and method of maintaining proper hand hygiene and method of preventing cross contamination, including proper handling of soiled linens, the protection of uniforms, and the separation of clean and dirty items;

Inspection Finding

There was no evidence to show that all staff received the required training for the listed items.

Outcome

Corrective action scheduled to be completed by the Licensee by April 15, 2015.

2. 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,
 - (t) information relating to staffing, including night time staffing levels and qualifications of staff of the retirement home;

Inspection Finding

The information package did not contain staffing information, including qualifications and night time staffing levels.

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

Inspection Finding

The Emergency Plan did not have documentation of current arrangement with partners, consultation with community agencies, or identification of risks. The Emergency Plan did not show identification of community agencies involved in emergency response.

Outcome


Corrective action scheduled to be completed by the Licensee by June 1, 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 March 20, 2015
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