

FINAL INSPECTION REPORT Under the Retirement Homes Act, 2010

Inspection Information

Date of Inspection: April 22, 2015 **Name of Inspector:** Janet Evans

Inspection Type: Routine Inspection

Licensee: Steeves and Rozema Enterprises Limited / 265 North Front Street, Sarnia, ON N7T 7X1 (the

"Licensee")

Retirement Home: Lanark Place Retirement Residence / 44 Lanark Crescent, Kitchener, ON N2N 2Z8 (the

"home")

Licence Number: T0253

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 O. Reg. 166/11, s. 21; Hazardous substances.

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

21. (2) Every licensee of a retirement home shall ensure that all hazardous substances used by staff of the home or under their control are labelled properly and are kept inaccessible to residents at all times.

Inspection Finding

At the time of the inspection a housekeeping cart with chemicals was left unattended in a hall outside resident suites.

Outcome

Corrective action taken by the Licensee at the time of the inspection.

2. 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):

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

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Inspection Finding

The Licensee's emergency plan failed to include an identification of hazards and risks that may give rise to an emergency and strategies to address those hazards and risks.

Outcome

Corrective action taken by the Licensee.

3. The Licensee failed to comply with O. Reg. 166/11, s. 15; Policy of zero tolerance of abuse and neglect.

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

- **15. (3)** The policy to promote zero tolerance of abuse and neglect of residents described in subsection 67 (4) of the Act shall,
 - (d) provide that the licensee of the retirement home shall ensure that the resident's substitute decision-makers, if any, and any other person specified by the resident,
 - (ii) are notified within 12 hours upon the licensee becoming aware of any other alleged, suspected or witnessed incident of abuse or neglect of a resident;
 - (e) provide that the licensee of the retirement home shall ensure that the resident and the resident's substitute decision-makers, if any, are notified of the results of an investigation described in clause 67 (5) (e) of the Act immediately upon the completion of the investigation;

Inspection Finding

The Licensee's policy of zero tolerance of abuse and neglect failed to include the required content as listed.

Outcome

Corrective action taken by the Licensee.

4. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 65; Training. The Licensee failed to comply with O. Reg. 166/11, s. 14; Staff training.

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

- **65. (2)** Every licensee of a retirement home shall ensure that no staff work in the home unless they have received training in,
 - (b) the licensee's policy mentioned in subsection 67 (4) to promote zero tolerance of abuse and neglect of residents;
 - (d) the licensee's policy mentioned in subsection 68 (3) regarding the use of personal assistance services devices for residents;

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14. (1) For the purposes of clause 65 (2) (j) of the Act, every licensee of a retirement home shall ensure that all staff who work in the home receive training in the procedure described in subsection 73 (1) of the Act for a person to complain to the licensee.

Inspection Finding

The Licensee had evidence of providing computer based staff training however the Licensee was not able to provide evidence that training had been completed for all required staff for the elements listed.

Outcome

Corrective action taken by the Licensee.

5. 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. (1)** The licensee of a retirement home shall keep a record for each resident of the home that complies with the requirements of this section.
- **55.** (2) The record for each resident shall include,
 - (b) if the resident was assessed for the purposes of developing the resident's plan of care, documentation of when the resident was assessed and by whom;
- **55. (5)** A licensee of a retirement home shall keep records proving compliance with the Act and this Regulation in relation to,
 - (f) the screening required under subsection 27 (8) of this Regulation.

Inspection Finding

The records reviewed did not consistently show evidence of when the resident was assessed or by whom. In addition to this the Licensee was unable to show evidence of completing the required screening of new residents for tuberculosis.

Outcome

Corrective action taken by the Licensee.

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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
Olyans	May 22, 2015
Julian	

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