

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

| Inspection Information  |  |
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| <b>Date of Inspection:</b> May 7, 2015  | <b>Name of Inspector:</b> Julie Hebert |
| <b>Inspection Type:</b> Routine Inspection  |  |
| <b>Licensee:</b> St. Andrew's Residence, Chatham / 99 Park Street, Chatham, ON N7M 3R5 (the "Licensee") |  |
| <b>Retirement Home:</b> St. Andrew's Residence / 99 Park Street, Chatham, ON N7M 3R5 (the "home")       |  |
| <b>Licence Number:</b> S0196  |  |

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

| NON-COMPLIANCE  |
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| <p><b>1. 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.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><b>24. (4)</b> The licensee shall keep current all arrangements with community agencies, partner facilities and resources that will be involved in responding to an emergency.</p> <p><b>24. (5)</b> The licensee shall,</p> <p style="padding-left: 40px;">(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,</p> <p style="padding-left: 80px;">(ii) situations involving a missing resident,</p> <p style="padding-left: 80px;">(iv) violent outbursts;</p> <p><b>25. (2)</b> The licensee shall ensure that the development of the emergency plan includes,</p> <p style="padding-left: 40px;">(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.</p> |
| <p><b>Inspection Finding</b></p> <p>The home's emergency plan was not in compliance in the above noted areas.</p>   |
| <p><b>Outcome</b></p>   |

Corrective action scheduled to be completed by the Licensee by August 1, 2015.

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

- 3. Risk of falling.
- 6. Cognitive ability.

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

- 1. Physical and mental health.
- 3. Cognitive ability.
- 5. Need for care services.
- 6. Need for assistance with the activities of daily living.
- 7. The matters listed in subsection 43 (2).

**Inspection Finding**

The home's initial and full assessments were not in compliance in the above noted areas.

**Outcome**

Corrective action scheduled to be completed by the Licensee by July 10, 2015.

- 3. 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,

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

**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 home could not show documentation of training with all staff in the above noted areas.


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| <p><b>Outcome</b></p> <p>Corrective action scheduled to be completed by the Licensee by August 15, 2015.</p>  |
| <p><b>4. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 67; Contents. The Licensee failed to comply with O. Reg. 166/11, s. 15; Policy of zero tolerance of abuse and neglect.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><b>67. (5)</b> At a minimum, the policy to promote zero tolerance of abuse and neglect of residents shall,<br/>(f) set out the consequences for those who abuse or neglect residents;</p> <p><b>15. (3)</b> The policy to promote zero tolerance of abuse and neglect of residents described in subsection 67 (4) of the Act shall,<br/>(b) contain procedures and interventions to deal with persons who have abused or neglected or allegedly abused or neglected residents, as appropriate;</p> |
| <p><b>Inspection Finding</b></p> <p>The home's abuse policy was not in compliance with the above noted sections.</p>  |
| <p><b>Outcome</b></p> <p>Corrective action scheduled to be completed by the Licensee by July 1, 2015.</p>   |
| <p><b>5. The Licensee failed to comply with O. Reg. 166/11, s. 59; Procedure for complaints to licensee.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><b>59. (2)</b> The licensee shall ensure that a written record is kept in the retirement home that includes,<br/>(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;<br/>(d) the final resolution, if any, of the complaint;<br/>(e) every date on which any response was provided to the complainant and a description of the response;</p>   |
| <p><b>Inspection Finding</b></p> <p>The home could not produce the above mentioned documentation regarding their complaints procedure.</p>  |
| <p><b>Outcome</b></p> <p>Corrective scheduled to be completed by the Licensee by June 1, 2015.</p>  |

**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/>

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| Signature of Inspector<br> | Date<br>May 25, 2015 |
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