RHRA Retirement Homes Regulatory Authority

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

Inspection Information	
Date of Inspection: July 17, 2015	**Name of Inspector:** Susan Lines
Inspection Type: Mandatory Reporting 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 received a report under section 75(1) 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. 62; Contents of plan.
The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 62; Persons who approve plans of care.

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

62. (4) The licensee of a retirement home shall ensure that there is a written plan of care for each resident of the home that sets out,

(a) the care services that are part of a package of care services that the resident is entitled to receive under the resident's agreement with the licensee, whether or not the resident receives the services;

(b) the planned care services for the resident that the licensee will provide, including,

(c) if the resident has consented to the inclusion of the information in the plan of care, the planned care services for the resident that external care providers will provide with the consent of the resident, to the extent that such information is available to the licensee after the licensee has taken all reasonable steps to obtain such information from the resident and the external care provider, including,

62. (9) The licensee shall ensure that the following persons have approved the plan of care, including any revisions to it, and that a copy is provided to them:

1. The resident or the resident's substitute decision-maker.
2. The prescribed person if there is a person prescribed for the purpose of this paragraph.

Inspection Finding

The plan of care for one resident was not approved by the resident or the resident's substitute decision-maker as required. The plan of care for a second resident was not updated and approved as required. There

was no evidence that a third resident had been reassessed after a fire-safety incident in his suite. The plan of care for this resident did not reflect his current care needs and was not signed or dated as required. There was an inconsistent understanding among staff and managers in the home about whether or not a fourth resident was considered to be at risk of wandering and elopement. The final page of the resident's plan of care noted that an elopement assessment must be completed but there was no evidence that such an assessment had been completed at the time of the inspection. The Director of Wellness sent an email to the Executive Director asking if he would be following up with the family regarding the resident's risk for elopement but there was no evidence that this had happened. The resident's plan of care did not adequately address the fact that the resident was at risk for elopement. The plan of care was not fully updated, approved or made available to staff at the time of the inspection as required.

Outcome

Corrective action required by the Licensee.

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.

Inspection Finding

The home's Emergency Plan did not include risks and hazards and strategies to address them. The home's Emergency Response Plan showed that the home had not updated its plan with regard to Risk and Hazards and strategies to address them as was required by July 15, 2015 following a previous inspection.

Outcome

Corrective action taken by the Licensee.

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
	August 24, 2015