

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

Inspection Information	
<b>Date of Inspection:</b> January 8, 2016	<b>Name of Inspector:</b> Janet Evans
<b>Inspection Type:</b> Compliance Inspection	
<b>Licensee:</b> 1411693 Ontario Ltd. / 275 Tenth Street, Hanover, ON N4N 1P1 (the "Licensee")	
<b>Retirement Home:</b> Serenity-Durham / 618 William Street , Durham, ON N0G 1R0 (the "home")	
<b>Licence Number:</b> S0114	

Purpose of Inspection
The RHRA conducts compliance inspections as set out in section 77(1) of the <i>Retirement Homes Act, 2010</i> (the "RHA").

NON-COMPLIANCE
<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. (5)</b> The licensee shall,</p> <p>(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>(i) the loss of essential services,</p> <p>(ii) situations involving a missing resident,</p> <p>(iv) violent outbursts;</p> <p>(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.</p> <p><b>25. (3)</b> The licensee shall ensure that the emergency plan provides for the following:</p> <p>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.</p>
<p><b>Inspection Finding</b></p> <p>The Licensee had not completed the required testing of the emergency plan as listed. The Licensee's emergency plan did not provide for resources and supplies being set aside; readily available and regularly tested.</p>

<p><b>Outcome</b> Corrective action scheduled to be completed by the Licensee by March 18, 2016.</p>
<p><b>2. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 60; Safety plans. The Licensee failed to comply with O. Reg. 166/11, s. 27; Infection prevention and control program.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><b>60. (4)</b> Every licensee of a retirement home shall ensure that the following are in place for the home: 2. An infection prevention and control program that meets the prescribed requirements.</p> <p><b>27. (4)</b> The licensee of a retirement home shall ensure that a written surveillance protocol is established in consultation with the local medical officer of health or designate in order to identify, document and monitor residents who report symptoms of respiratory or gastrointestinal illness.</p> <p><b>27. (5)</b> The licensee of a retirement home shall ensure that, (a) if an infectious disease outbreak occurs in the home, the outbreak is reported to the local medical officer of health or designate and the licensee defers to the officer or designate, as the case may be, for assistance and consultation as appropriate; (b) if there is an increase in the number of symptomatic residents in the home, the increase is reported immediately to the local medical officer of health or designate and that the officer or designate, as the case may be, is consulted; (c) processes for meeting the requirements in clauses (a) and (b) are established and the processes are recorded in writing.</p>
<p><b>Inspection Finding</b> A written surveillance protocol was seen however it was not developed in consultation with the local medical officer of health or designate. In addition to this, the protocol did not include notification of public health in the event of an outbreak or increase in symptomatic residents.</p>
<p><b>Outcome</b> Corrective action scheduled to be completed by the Licensee by February 29, 2016.</p>
<p><b>3. 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.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><b>43. (2)</b> The initial assessment mentioned in subsection (1) shall consider the following matters with respect to the resident: 2. Presence of infectious diseases.</p>

**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 Licensee's assessment did not show evidence of documenting information with respect to the presence of an infectious disease.

**Outcome**


Corrective action scheduled to be completed by the Licensee by February 15, 2016.

**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 February 3, 2016
---	--------------------------