

# FINAL INSPECTION REPORT Under the Retirement Homes Act, 2010

**Inspection Information** 

**Date of Inspection:** February 3, 2016 Name of Inspector: Debbie Rydall

**Inspection Type:** Routine Inspection

Licensee: Sanpart Innisfil Beach Limited / 985 Innisfil Beach Road, Innisfil, ON L9S 4M8 (the "Licensee")

Retirement Home: Lakeside Retirement at Innisfil / 985 Innisfil Beach Road, Innisfil, ON L9S 4M8 (the

"home")

Licence Number: N0102

#### **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 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 inspection revealed that the information package wasn't completely aligned with the requirements of the legislation.

#### **Outcome**

Corrective action taken by the Licensee.

2. 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.

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#### 24. (5) The licensee shall,

- (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,
  - (i) the loss of essential services,
  - (ii) situations involving a missing resident,
  - (iii) medical emergencies,
  - (iv) violent outbursts;
- (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.
- **25. (5)** The licensee shall ensure that the emergency plan for the retirement home is evaluated and updated at least annually and that the updating includes contact information for the relevant community agencies, partner facilities and resources that will be involved in responding to an emergency.

### **Inspection Finding**

There was no evidence provided to support that the Licensee's arrangements with community agencies, partner facilities and resources was current or that the emergency plan had been evaluated and updated annually as per the requirements of the legislation. The home hadn't completed the required annual testing of their emergency plan as per the legislation.

#### **Outcome**

Corrective action taken by the Licensee.

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. 29; Administration of drugs or other substances.

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,
  - (a) the Residents' Bill of Rights;
  - (b) the licensee's policy mentioned in subsection 67 (4) to promote zero tolerance of abuse and neglect of residents;
  - (c) the protection afforded for whistle-blowing described in section 115;
  - (d) the licensee's policy mentioned in subsection 68 (3) regarding the use of personal assistance services devices for residents;
  - (f) fire prevention and safety;
- <u>29.</u> If one of the care services that the licensee or the staff of a retirement home provide to a resident of the home is the administration of a drug or other substance, the licensee shall ensure that,
  - (e) if the licensee or a staff member is involved in the administration of the drug or other substance at the home, that the licensee or staff member is trained in,

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(ii) the safe disposal of syringes and other sharps,

## **Inspection Finding**

There was no documented evidence to support that all employees had received the mandatory training prior to working in the home as is required by the legislation or that those staff responsible for medication administration had been trained in the safe disposal of syringes and other sharps.

### **Outcome**

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

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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 <a href="http://rhra.ca/en/register/">http://rhra.ca/en/register/</a>

Signature of Inspector	Date
Affolas	March 9, 2016

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