

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

Inspection Information	
Date of Inspection: September 1, 2016	Name of Inspector: Rachele Harber
Inspection Type: Complaint Inspection	
Licensee: Rosslyn Retirement Inc. / 307 King Street, Hamilton, ON L8N 1C1 (the "Licensee")	
Retirement Home: Rosslyn Retirement Residence / 1322 King Street, Hamilton, ON L8M 1H3 (the "home")	
Licence Number: S0404	

Purpose of Inspection
The RHRA received a complaint under section 83(1) of the Retirement Homes Act, 2010 (the "RHA").

NON-COMPLIANCE
<p>1. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 54; Information for residents. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 54; Contents.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p>54. (1) Every licensee of a retirement home shall ensure that,</p> <p style="padding-left: 40px;">(d) any material revisions to the package of information are provided to any person who has received the original package and who is still a resident of the home or substitute decision-maker of a resident of the home.</p> <p>54. (2) The package of information shall include, at a minimum,</p> <p style="padding-left: 40px;">(f) the name, telephone number and e-mail address of the licensee;</p>
<p>Inspection Finding</p> <p>The Licensee did not ensure that all of the residents were provided with a revised package of information to include the name, telephone number and email address of the new licensee.</p>
<p>Outcome</p> <p>The Licensee submitted plan to achieve compliance by October 13, 2016. RHRA to confirm compliance by inspection.</p>
<p>2. The Licensee failed to comply with O. Reg. 166/11, s. 36; Continence care.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p>

36. (1) If one of the care services that the licensee or the staff of a retirement home provide to a resident of the home is continence care, the licensee shall establish a continence care program that includes,

- (a) measures to promote continence;
- (b) measures to prevent constipation, including nutrition and hydration protocols;
- (c) toileting programs;
- (d) strategies to maximize the resident’s independence, comfort and dignity, including the use of equipment, supplies, devices and assistive aids.

Inspection Finding

The staff of the home is providing continence care as a care service and the licensee did not establish a continence care program.

Outcome

The Licensee submitted plan to achieve compliance by October 28, 2016. RHRA to confirm compliance by inspection.

3. The Licensee failed to comply with O. Reg. 166/11, s. 20; Food preparation.

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

20. (2) The licensee shall ensure that all foods and fluids used in food preparation are prepared, stored, and served using methods to prevent contamination and food borne illness.

20. (3) The licensee shall implement procedures for each of the following matters and ensure that all staff involved in preparing food receives adequate training in them and are retrained annually:

- 1. The safe handling and storage of food, including how to maintain food at an appropriate temperature and how to practice good hand hygiene.
- 2. The safe operation, cleaning and sanitizing of all dishes, utensils and equipment involved in food preparation.
- 3. The separation of clean and dirty dishes during the service of food.
- 4. The safe disposal of leftover food.
- 5. Appropriate cleaning schedules and sanitation practices.

Inspection Finding

The Licensee did not implement procedures to ensure that all foods are prepared, stored and served using methods to prevent contamination and food borne illness. In addition, the licensee did not ensure that all staff involved in preparing food receives adequate training and retraining in the procedures.

Outcome

The Licensee submitted plan to achieve compliance by October 28, 2016. RHRA to confirm compliance by inspection.

4. The Licensee failed to comply with O. Reg. 166/11, s. 18; Pest control.

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

18. (1) Every licensee of a retirement home shall ensure that there are procedures in place to keep the home free from pests and to deal with pests in the home.

18. (2) The licensee shall document the procedures implemented.

18. (3) The licensee shall ensure that timely action is taken to deal with pests in the retirement home.

Inspection Finding

The licensee did not ensure that there are procedures in place to keep the home free from bedbugs. The Licensee did not document any procedures that the home did implement. Further, there is a lack of evidence to support that timely action was taken to deal with the bedbugs.

Outcome

The Licensee took corrective action to achieve compliance.

5. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 66; Training of volunteers.

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

66. Every licensee of a retirement home who allows volunteers to participate in the lives and activities of residents of the home shall ensure that the volunteers are trained in applying the emergency plan and the infection prevention and control program of the licensee for the home mentioned in subsection 60 (4) and the licensee’s policy to promote zero tolerance of abuse and neglect of residents mentioned in subsection 67 (4).

Inspection Finding

The licensee did not ensure that a volunteer was trained according to the legislative requirements.

Outcome

The Licensee must take corrective action to achieve compliance.

**6. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 64; Hiring staff.
The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 64; Police background checks.
The Licensee failed to comply with O. Reg. 166/11, s. 13; Hiring staff and volunteers.**

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

64. (1) A licensee of a retirement home shall ensure that screening measures are conducted in accordance with the regulations before hiring staff and accepting volunteers to work in the home.

64. (2) The screening measures shall include a police background check as defined in the regulations, unless the person being screened is under 18 years of age.

13. (1) The police background check required by section 64 of the Act for a staff member or a volunteer working in a retirement home shall be,

(a) conducted by a police force;

(b) conducted within six months before the licensee of the home hires the staff member or accepts the volunteer to work in the home, as the case may be.

13. (2) The police background check shall include a vulnerable sector screen to determine the person's suitability to be a staff member or volunteer in a retirement home and to protect residents from abuse and neglect.

Inspection Finding

The licensee did not ensure that screening measures were conducted before accepting a volunteer to work in the home.

Outcome


The Licensee must take corrective action to achieve compliance.

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 October 3, 2016
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