

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

Inspection Information	
Date of Inspection: March 17, 2017	Name of Inspector: Douglas Crust
Inspection Type: Routine Inspection	
Licensee: Thomas and Clover Tuah / 379 Lake Promenade, Etobicoke, ON M8W 1C1 (the "Licensee")	
Retirement Home: Adeline's Lodge / 379 Lake Promenade, Etobicoke, ON M8W 1C1 (the "home")	
Licence Number: T0191	

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

NON-COMPLIANCE
<p>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. 26; Emergency plan, retirement home with 10 or fewer residents.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><u>24. (4)</u> 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><u>24. (5)</u> The licensee shall,</p> <ul style="list-style-type: none"> (b) at least once every two years, conduct a planned evacuation of the retirement home; (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><u>26.</u> The emergency plan for a retirement home that has 10 or fewer residents shall, in addition to the requirements in section 24, meet the following requirements:</p> <ul style="list-style-type: none"> 2. The plan shall identify and address hazards and risks that may give rise to an emergency affecting the home. 6. The licensee shall ensure that the plan is 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.
<p>Inspection Finding</p> <p>At the time of the inspection, no evidence of current arrangements with community agencies, partner facilities or resources was presented for inspection. There also was no evidence of a full evacuation of the</p>

home within the preceding 2 years, and no written record of a full evacuation, as prescribed. There was no evidence that the specific hazards and risks which may give rise to an emergency affecting the home had been identified, and no evidence that the emergency plan had been updated annually, as prescribed.

Outcome

The Licensee has advised it has taken corrective action to achieve compliance. RHRA to confirm compliance by inspection.

2. The Licensee failed to comply with O. Reg. 166/11, s. 27; Infection prevention and control program.

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

27. (2) The licensee shall consult on an ongoing basis and not less than once a year with the local medical officer of health or designate about identifying and addressing health care issues in the retirement home in order to reduce the incidence of infectious disease outbreaks in the home.

27. (3) The licensee shall keep a written record of the consultation required under subsection (2) that shall include a record of when the consultation took place, what was discussed and any recommendations that the local medical officer of health or designate made.

Inspection Finding

At the time of the inspection, the Licensee did not provide evidence of a consultation with the local medical officer of health, or designate, in 2016, and did not provide evidence of a record of the consultation, as prescribed.

Outcome

The Licensee has advised it has taken corrective action to achieve compliance. RHRA to confirm compliance by inspection.

3. The Licensee failed to comply with O. Reg. 166/11, s. 27; Infection prevention and control program.

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

27. (9) The licensee shall ensure that each staff member who works in the retirement home receives training on how to reduce the incidence of infectious disease transmission, including,
(b) the need for and process of reporting, providing surveillance of and documenting incidents of infectious illness.

Inspection Finding

At the time of the inspection, the Licensee did not provide evidence to confirm that all staff had been trained in the required item.

Outcome

The Licensee has advised it has taken corrective action to achieve compliance. RHRA to confirm compliance by inspection.

4. The Licensee failed to comply with O. Reg. 166/11, s. 15; Policy of zero tolerance of abuse and neglect.

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

15. (3) The policy to promote zero tolerance of abuse and neglect of residents described in subsection 67 (4) of the Act shall,

(e) provide that the licensee of the retirement home shall ensure that the resident and the resident's substitute decision-makers, if any, are notified of the results of an investigation described in clause 67 (5) (e) of the Act immediately upon the completion of the investigation;

Inspection Finding

The policy provided for inspection did not contain the required item.

Outcome

The Licensee has advised it has taken corrective action to achieve compliance. RHRA to confirm compliance by inspection.

5. The Licensee failed to comply with O. Reg. 166/11, s. 30; Storage of drugs or other substances. The Licensee failed to comply with O. Reg. 166/11, s. 31; Medication management system.

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

30. If drugs or other substances are stored in a retirement home on behalf of a resident, the licensee of the home shall ensure that,

(a) the drugs or other substances are stored in an area or a medication cart that,
(iv) complies with the manufacturer's instructions for the storage of the drugs or other substances;

31. (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 the administration of a drug or other substance, the licensee shall establish a medication management system, which includes written policies and procedures, to ensure that all drugs and other substances to be administered to residents of the home are acquired, received in the home, stored, dispensed, administered, destroyed and disposed of correctly as required by law and in accordance with prevailing practices.

Inspection Finding

At the time of the inspection, the temperature gauge attached to the fridge used to store medications, including a resident's insulin, was broken and there was no log to confirm that the fridge temperature was within the range specified by the insulin manufacturer's instructions. In addition, the medication management policy did not address all the required items.

Outcome


The Licensee has advised it has taken corrective action to achieve compliance. RHRA to confirm compliance by inspection.

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 May 9, 2017
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