

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

Inspection Information	
Date of Inspection: May 2, 2017	Name of Inspector: Debbie Rydall
Inspection Type: Routine Inspection	
Licensee: 1411693 Ontario Ltd. / 275 Tenth Street, Hanover, ON N4N 1P1 (the "Licensee")	
Retirement Home: Serenity-Durham / 618 William Street , Durham, ON N0G 1R0 (the "home")	
Licence Number: S0114	

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 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. (2) The package of information shall include, at a minimum,</p> <ul style="list-style-type: none"> (k) an itemized list of the different types of accommodation and care services provided in the retirement home and their prices; (t) information relating to staffing, including night time staffing levels and qualifications of staff of the retirement home;
<p>Inspection Finding</p> <p>The routine inspection revealed that the home's information package was not completely aligned with the legislation in the areas listed.</p>
<p>Outcome</p> <p>The Licensee submitted plan to achieve compliance by May 26, 2017. RHRA to confirm compliance by inspection.</p>
<p>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.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p>

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.

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. (3) The licensee shall ensure that the emergency plan provides for the following:

1. Dealing with,
 - ii. community disasters,
 - vi. chemical spills,
 - viii. loss of one or more essential services.
2. Evacuation of the retirement home, including a system in the home to account for the whereabouts of all residents in the event that it is necessary to evacuate and relocate residents and evacuate staff and others in case of an emergency.

Inspection Finding

The emergency plan reviewed at the time of the inspection was not completely aligned with the legislation in the areas listed; further the required annual testing of the emergency plan had not been completed and there was no evidence to support that current arrangements with community partners were in place as per the requirements of the legislation.

Outcome

The Licensee submitted plan to achieve compliance by June 15, 2017. 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. (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.

<p>Inspection Finding</p> <p>The routine inspection revealed that the Licensee had not consulted with the local medical officer of health or designate on an annual basis as per the requirements of the legislation.</p>
<p>Outcome</p> <p>The Licensee submitted plan to achieve compliance by May 23, 2017. RHRA to confirm compliance by inspection.</p>
<p>4. The Licensee failed to comply with O. Reg. 166/11, s. 43; Initial assessment of care needs.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p>43. (2) The initial assessment mentioned in subsection (1) shall consider the following matters with respect to the resident:</p> <p>5. Dietary needs including known food restrictions.</p>
<p>Inspection Finding</p> <p>The routine inspection revealed that the initial assessment form did not consider the area listed as per the requirements of the legislation.</p>
<p>Outcome</p> <p>The Licensee submitted plan to achieve compliance by May 24, 2017. RHRA to confirm compliance by inspection.</p>
<p>5. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 67; Contents.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p>67. (5) At a minimum, the policy to promote zero tolerance of abuse and neglect of residents shall, (d) contain an explanation of the duty under section 75 to report to the Registrar the matters specified in that section;</p>
<p>Inspection Finding</p> <p>The zero abuse policy provided for review at the time of the inspection was not completely aligned with the legislation in the area listed.</p>
<p>Outcome</p> <p>The Licensee submitted plan to achieve compliance by May 25, 2017. RHRA to confirm compliance by inspection.</p>
<p>6. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 73; Procedure for complaints to licensee.</p> <p>The Licensee failed to comply with O. Reg. 166/11, s. 59; Procedure for complaints to licensee.</p>

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

73. (1) Every licensee of a retirement home shall ensure that there is a written procedure for a person to complain to the licensee about the operation of the home and for the way in which the licensee is required to deal with complaints.

59. (2) The licensee shall ensure that a written record is kept in the retirement home that includes,

- (b) the date that the complaint was received;
- (c) the type of action taken to resolve the complaint, including the date of the action, time frames for actions to be taken and any follow-up action required;
- (d) the final resolution, if any, of the complaint;
- (e) every date on which any response was provided to the complainant and a description of the response;

Inspection Finding

The Licensee's complaints procedure did not clearly set out the procedure for a person to complain to the Licensee about the operation of the home; further the template to record any complaints was not aligned with the requirements of the legislation.

Outcome

The Licensee submitted plan to achieve compliance by June 23, 2017. RHRA to confirm compliance by inspection.

7. 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. (4) The licensee shall ensure that whenever food is prepared in the retirement home, at least one person involved in preparing the food holds a current certificate in food handling from the local public health unit or has recently successfully completed a food handling training program equivalent to that offered by public health units.

Inspection Finding

The inspection revealed that none of the staff responsible for preparing food in the home held a current certificate in food handling from the local public health unit as per the requirements of the legislation.

Outcome

The Licensee submitted plan to achieve compliance by May 26, 2017. RHRA to confirm compliance by inspection.

8. The Licensee failed to comply with O. Reg. 166/11, s. 23; Behaviour management.

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

23. (1) Every licensee of a retirement home shall develop and implement a written behaviour management strategy that includes,

(c) strategies for monitoring residents that have demonstrated behaviours that pose a risk to the resident or others in the home;

(d) protocols for how staff and volunteers shall report and be informed of resident behaviours that pose a risk to the resident or others in the home.

Inspection Finding

The home's behaviour management strategy was not completely aligned with the requirements of the legislation in the areas listed.

Outcome


The Licensee submitted plan to achieve compliance by June 30, 2017. 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 June 30, 2017
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