

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

Inspection Information	
<b>Date of Inspection:</b> June 22, 2017	<b>Name of Inspector:</b> Mark Dennis
<b>Inspection Type:</b> Routine Inspection	
<b>Licensee:</b> Dre's Lodge Inc. / 10 Empringham Drive, Scarborough, ON M1B 3T5 (the "Licensee")	
<b>Retirement Home:</b> Dre's Lodge Inc. / 82 River Street, Sunderland, ON L0C 1H0 (the "home")	
<b>Licence Number:</b> T0487	

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><b>1. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 54; Contents.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><b>54. (2)</b> The package of information shall include, at a minimum,</p> <ul style="list-style-type: none"> <li>(l) a statement that a resident may purchase or apply for care services, other services, programs or goods from external care providers;</li> <li>(s) information as to whether the retirement home has automatic sprinklers in each resident's room;</li> </ul>
<p><b>Inspection Finding</b></p> <p>The Licensee Information Package does not contain all the required minimum information.</p>
<p><b>Outcome</b></p> <p>The Licensee submitted a plan to achieve compliance by 17-August-2017. RHRA to confirm compliance by inspection.</p>
<p><b>2. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 53; Agreement required.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><b>53. (1)</b> The licensee of a retirement home shall enter into a written agreement with every resident of the home before the resident commences residency in the home.</p>

**Inspection Finding**

The Licensee has not entered into a written agreement with a resident of the home.

**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. 11; Posted information.**

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

**11. (1)** For the purposes of paragraph 4 of subsection 55 (2) of the Act, the following information is prescribed as information that must be posted in a retirement home under that subsection:

- 6. A copy of the most recent final inspection report prepared by an inspector under section 77 of the Act, subject to section 114 of the Act.

**Inspection Finding**

During an inspection the Licensee did not have posted the most recent RHRA Inspection Report.

**Outcome**

The Licensee must take corrective action to achieve compliance.

**4. 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.

**25. (2)** The licensee shall ensure that the development of the emergency plan includes,  
(b) identification of hazards and risks that may give rise to an emergency affecting the home, whether the hazards and risks arise within the home or in the surrounding vicinity or community, and strategies to address those hazards and risks.

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

- 1. Dealing with,
  - ii. community disasters,
- 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.

**Inspection Finding**

The Licensee Emergency Plan does not contain current arrangements with partners, identification of risks or a plan for community disasters. Further during the inspection resources, supplies and equipment vital for an emergency response could not be located and was not readily available.

**Outcome**

The Licensee submitted a plan to achieve compliance by 17-August-2017. RHRA to confirm compliance by inspection.

**5. 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.**

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

**43. (2)** The initial assessment mentioned in subsection (1) shall consider the following matters with respect to the resident:

1. Continence.
2. Presence of infectious diseases.
3. Risk of falling.
4. Known allergies.
5. Dietary needs including known food restrictions.
6. Cognitive ability.
7. Risk of harm to self and to others.
8. Risk of wandering.
9. Needs related to drugs and other substances.

**44. (2)** The full assessment mentioned in subsection (1) shall consider the following matters with respect to the resident:

1. Physical and mental health.
2. Functional capacity.
3. Cognitive ability.
4. Behavioural issues.
5. Need for care services.
6. Need for assistance with the activities of daily living.
7. The matters listed in subsection 43 (2).
8. Any other matter relevant to developing a plan of care for the resident.

**Inspection Finding**

The Licensee has not completed an initial or full assessment of a resident as prescribed.

**Outcome**

The Licensee must take corrective action to achieve compliance.

**6. 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. (1)** The program for preventing abuse and neglect described in clause 67 (5) (c) of the Act shall entail training and retraining requirements for all staff of the retirement home, including,

- (a) training on the relationship between power imbalances between staff and residents and the potential for abuse and neglect by those in a position of trust, power and responsibility for resident care;
- (b) situations that may lead to abuse and neglect and how to avoid such situations.

**15. (2)** The procedures for investigating and responding to alleged, suspected or witnessed abuse and neglect of residents described in clause 67 (5) (e) of the Act shall include details outlining who will undertake the investigation and who will be informed of the investigation.

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

- (g) provide that the licensee of the retirement home shall ensure that,
  - (i) an analysis of every incident of abuse or neglect of a resident at the home is undertaken promptly after the licensee becomes aware of it,
  - (iii) the results of the analysis undertaken under subclause (i) are considered in the evaluation mentioned in subclause (ii),
  - (iv) the changes and improvements mentioned in subclause (ii) are promptly implemented,
  - (v) a written record of everything provided for in subclauses (ii) and (iv) and the date of the evaluation, the names of the persons who participated in the evaluation and the date that the changes and improvements were implemented is promptly prepared.
- (a) contain procedures and interventions to assist and support residents who have been abused or neglected or allegedly abused or neglected;
- (b) contain procedures and interventions to deal with persons who have abused or neglected or allegedly abused or neglected residents, as appropriate;
- (c) identify measures and strategies to prevent abuse and neglect;
- (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 Licensee Zero Tolerance of Abuse and Neglect Policy did not contain all of the prescribed procedures and content.

**Outcome**

The Licensee submitted a plan to achieve compliance by 17-August-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**

During the inspection there was a staff member preparing meals that did not have a valid Food Handling Certificate.

**Outcome**

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

**8. The Licensee failed to comply with O. Reg. 166/11, s. 30; Storage of drugs or other substances.**

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,  
 (ii) is locked and secure,

**Inspection Finding**

The Licensee kept medications in an area that was not locked or secure.

**Outcome**

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

**9. The Licensee failed to comply with O. Reg. 166/11, s. 31; Medication management system.  
 The Licensee failed to comply with O. Reg. 166/11, s. 32; Records.**

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

**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.

**32.** If the licensee or a member of the staff of a retirement home administers a drug or other substance to a resident, the licensee shall ensure that,

- (a) the person who administered the drug or other substance prepares a written record noting the name and amount of the drug or other substance, the route of its administration and the time and date on which it was administered;
- (b) if a drug is administered, there is written evidence that the drug was prescribed for the resident by a person who is authorized to prescribe a drug under section 27 of the Regulated Health Professions Act, 1991;

**Inspection Finding**

The Licensee Medication Management policy does not contain procedures for acquiring, receiving or dispensing medications. Further, the Licensee did not keep a written record of administration of a drug or of the prescription for one of the residents.

**Outcome**

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

**10. The Licensee failed to comply with O. Reg. 166/11, s. 57; Trust for resident's money.**

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

**57. (2)** For the purposes of section 72 of the Act, if money is entrusted to the care of a licensee of a retirement home on behalf of residents of the home, the licensee shall establish and maintain at least one non-interest bearing trust account at a financial institution in which the licensee shall deposit all money entrusted to the licensee’s care on behalf of the residents.

**Inspection Finding**

The Licensee was entrusted with resident money but did not establish and maintain at least one non-interest bearing trust account at a financial institution in which the licensee shall deposit all money entrusted to the Licensee care on behalf of the residents.

**Outcome**

The Licensee must take corrective action to achieve compliance.

**11. The Licensee failed to comply with O. Reg. 166/11, s. 17; Cleanliness.**

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

**17. (2)** Every licensee of a retirement home shall ensure that bathrooms in common areas of the home that are used by residents are adequately stocked with supplies including toilet paper.

**Inspection Finding**

The bathroom on the main floor of the home that is used by residents was not stocked with supplies, specifically hand towels.

**Outcome**

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

**12. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 54; Information for residents.**

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

- 54. (1)** Every licensee of a retirement home shall ensure that,  
(c) the package of information is accurate and revised as necessary;

**Inspection Finding**

The content of the information package that the Licensee provides residents is inaccurate. The package contains a statement that a resident-staff communication and response system or emergency call-bell is provided in every resident room as part of a basic plan. There is a resident of the home that does not have such a system in his room.

**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  August 14, 2017
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