RHRA Retirement Homes Regulatory Authority

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

Inspection Information	
Date of Inspection: October 4, 2017	**Name of Inspector:** Douglas Crust
Inspection Type: Mandatory Reporting Inspection	
Licensee: 692536 Ontario Limited / 120 Elizabeth Street, Brighton, ON K0K 1H0 (the "Licensee")	
Retirement Home: Applefest Lodge / 120 Elizabeth Street, Brighton, ON K0K 1H0 (the "home")	
Licence Number: N0084	

Purpose of Inspection
The RHRA received a report under section 75(1) of the *Retirement Homes Act, 2010* (the "RHA").

NON-COMPLIANCE
1. The Licensee failed to comply with O. Reg. 166/11, s. 19; Maintenance. Specifically, the Licensee failed to comply with the following subsection(s): **19. (2)** The maintenance program shall include policies and procedures for routine, preventative and remedial maintenance of the following in the retirement home: 1. Plumbing fixtures, toilets and sinks located in common areas of the home. 2. Heating systems and hot water boilers. 3. If provided by the licensee, ventilation systems, air conditioning systems, hot water holding tanks and computerized systems monitoring the home's water temperature.
Inspection Finding The Licensee did not provide evidence of a maintenance program that was aligned with the regulation. Specifically, there was no evidence of written policies and procedures for each of: routine, preventative and remedial maintenance, in the areas prescribed.
Outcome The Licensee took corrective action to achieve compliance.
2. 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.

Inspection Finding

The Licensee did not provide evidence of procedures to keep the Home free of pests. Specifically, there were no written policies or procedures describing the surveillance procedures used in the Home to identify if pests were present or the process to be followed to deal with any reports of pests on the premises.

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 the RHA, S.O. 2010, c. 11, s. 65; Training.

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,

(i) all Acts, regulations, policies of the Authority and similar documents, including policies of the licensee, that are relevant to the person's duties;

Inspection Finding

The Licensee was not able to provide evidence of staff training in the hot weather guidelines that are to be implemented in the Home during extreme weather events.

Outcome

The Licensee submitted a plan to achieve compliance by December 27,2017. RHRA to confirm compliance by inspection.

4. 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

At the time of inspection, the Licensee's behaviour management strategy was inspected. The strategy did not describe how staff and volunteers shall report and be informed of resident behaviours. There was also no evidence documenting how a resident with dementia, who was perceived as at risk of wandering and possibly falling down the stairs, would be monitored.

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 the RHA, S.O. 2010, c. 11, s. 62; Involvement of resident, etc..

The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 62; Persons who approve plans of care.

The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 62; Reassessment and revision.

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

62. (5) The licensee shall ensure that the resident, the resident's substitute decision-maker, if any, and any other persons designated by the resident or substitute decision-maker are given an opportunity to participate in the development, implementation and reviews of the resident's plan of care.

62. (9) The licensee shall ensure that the following persons have approved the plan of care, including any revisions to it, and that a copy is provided to them:

1. The resident or the resident's substitute decision-maker.

62. (12) The licensee shall ensure that the resident is reassessed and the plan of care reviewed and revised at least every six months and at any other time if, in the opinion of the licensee or the resident,

(b) the resident's care needs change or the care services set out in the plan are no longer necessary;

Inspection Finding

At the time of inspection, the plan of care for a resident was found not to have been revised when the resident's care needs changed. There were no clear directions to the Licensee's staff who provided direct care, particularly concerning management of the resident's dementia/ responsive behaviours. There was no evidence that the resident or the substitute decision-maker had the opportunity to participate in the development or review of the plan. Also, there was no evidence that the resident or the substitute decision-maker had approved the plan or been provided with a copy, as prescribed.

Outcome

The Licensee submitted a plan to achieve compliance by January 30, 2018. 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
	January 10, 2018