RHRA Retirement Homes Regulatory Authority

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

Inspection Information	
Date of Inspection: November 1, 2017	**Name of Inspector:** Douglas Crust
Inspection Type: Routine Inspection	
Licensee: 848357 Ontario Limited / 33 Christie Street, Toronto, ON M6G 3B1 (the "Licensee")	
Retirement Home: The O'Neill Centre Long Term Care and Retirement Living / 33 Christie Street, Toronto, ON M6G 3B1 (the "home")	
Licence Number: T0134	

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

NON-COMPLIANCE
1. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 54; Contents. Specifically, the Licensee failed to comply with the following subsection(s): **54. (2)** The package of information shall include, at a minimum, (l) a statement that a resident may purchase or apply for care services, other services, programs or goods from external care providers; (t) information relating to staffing, including night time staffing levels and qualifications of staff of the retirement home;
Inspection Finding The package of information provided for residents and substitute decision-makers provided for inspection did not include the listed items.
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. 26; Emergency plan, retirement home with 10 or fewer residents. Specifically, the Licensee failed to comply with the following subsection(s):

26. 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:

2. The plan shall identify and address hazards and risks that may give rise to an emergency affecting the home.

Inspection Finding

At the time of the inspection, the Emergency Plan presented for inspection did not contain a list of hazards and risks which may give rise to an emergency affecting 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. 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.
5. Dietary needs including known food restrictions.
7. Risk of harm to self and to others.
8. Risk of wandering.

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

2. Functional capacity.
5. Need for care services.
7. The matters listed in subsection 43 (2).

Inspection Finding

The resident assessments selected for inspection did not contain the listed items for one or more of the resident files selected.

Outcome

The Licensee submitted a plan to achieve compliance by March 11, 2018. 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,

(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,

(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 to promote zero tolerance of abuse and neglect which was presented for inspection was found not to be aligned with the listed requirements.

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. 59; Procedure for complaints to licensee.

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

59. (1) Every licensee of a retirement home shall ensure that every written or verbal complaint made to the licensee or a staff member concerning the care of a resident or operation of the home is dealt with as follows:

1. The complaint shall be investigated. If the complaint alleges harm or risk of harm to one or more residents, the investigation shall be commenced immediately.

Inspection Finding

The complaint procedure which was presented for inspection did not contain the required item.

Outcome

The Licensee submitted a plan to achieve compliance by February 28, 2018. RHRA to confirm compliance by inspection.

6. 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,

(a) techniques to prevent and address resident behaviours that pose a risk to the resident or others in the home;

(b) strategies for interventions to prevent and address resident behaviours that pose a risk to the resident or others in the home;

(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 behaviour management strategy which was presented for inspection did not contain all of the listed requirements.

Outcome

The Licensee submitted a plan to achieve compliance by March 11, 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 26, 2018