

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

Inspection Information	
Date of Inspection: June 14, 2018	Name of Inspector: Georges Gauthier
Inspection Type: Routine Inspection	
Licensee: Paris Nursing Home Limited / 185 Grand River Street, Paris, ON N3L 2N2 (the "Licensee")	
Retirement Home: Penmarvian Retirement Home / 185 Grand River Street, Paris, ON N3L 2N2 (the "home")	
Licence Number: S0222	

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"> (d) the licensee's procedure for complaints mentioned in subsection 73 (1); (k) an itemized list of the different types of accommodation and care services provided in the retirement home and their prices; (l) a statement that a resident may purchase or apply for care services, other services, programs or goods from external care providers;
<p>Inspection Finding</p> <p>The listed items were not fully addressed in relation to the information package.</p>
<p>Outcome</p> <p>The Licensee has advised it has taken corrective action to achieve compliance. RHRA to confirm compliance by inspection.</p>
<p>2. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 53; Agreement required.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p>

53. (1) 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.

Inspection Finding

The listed item was not addressed in relation to a resident's residency agreement.

Outcome

The Licensee took corrective action to achieve compliance.

**3. 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. (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;

25. (2) The licensee shall ensure that the development of the emergency plan includes,

(a) consultation with the relevant community agencies, partner facilities and resources that will be involved in responding to an emergency;

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

- 1. Dealing with,
 - viii. loss of one or more essential services.
- 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 listed items were not addressed in relation to the emergency plan.

Outcome

The Licensee submitted plan to achieve compliance by July 6, 2018. RHRA to confirm compliance by inspection.

4. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 65; On-going training.

<p>The Licensee failed to comply with O. Reg. 166/11, s. 14; Staff training.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p>65. (4) The licensee shall ensure that the persons who are required to receive the training described in subsection (2) receive on-going training as described in that subsection at the times required by the regulations.</p> <p>14. (2) For the purposes of subsection 65 (4) of the Act, the licensee shall ensure that the persons who are required to receive training under subsection 65 (2) of the Act receive the training at least annually.</p>
<p>Inspection Finding</p> <p>The evidence did not show the listed items had not been addressed in relation to the annual retraining staff in the areas of the Residents' Bill of Rights, whistle blower protection, and fire prevention and safety.</p>
<p>Outcome</p> <p>The Licensee has advised it has taken corrective action to achieve compliance. RHRA to confirm compliance by inspection.</p>
<p>5. The Licensee failed to comply with O. Reg. 166/11, s. 15; Policy of zero tolerance of abuse and neglect.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p>15. (3) The policy to promote zero tolerance of abuse and neglect of residents described in subsection 67 (4) of the Act shall,</p> <ul style="list-style-type: none"> (g) provide that the licensee of the retirement home shall ensure that, <ul style="list-style-type: none"> (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.
<p>Inspection Finding</p> <p>The listed items were not addressed in relation to the written policy to promote zero tolerance of abuse and neglect of residents.</p>
<p>Outcome</p> <p>The Licensee submitted plan to achieve compliance by July 14, 2018. RHRA to confirm compliance by inspection.</p>
<p>6. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 73; Requirements for procedure.</p>

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

73. (2) The procedure shall comply with the regulations.

Inspection Finding

The listed item was not addressed as the complaint procedure did not fully address Ontario Regulation 166/11 section 59(1)(1),(2),(3), and (4) in relation to the investigation and responses to complaints.

Outcome

The Licensee submitted plan to achieve compliance by July 14, 2018. RHRA to confirm compliance by inspection.

7. 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,
(b) controlled substances as defined in the Controlled Drugs and Substances Act (Canada) are stored in a separate, double-locked stationary cupboard in the locked area or stored in a separate locked area within the locked medication cart;

Inspection Finding

The listed item was not addressed in relation to the storage of some controlled substances.

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 June 25, 2018
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