

FINAL INSPECTION REPORT Under the Retirement Homes Act, 2010

Inspection Information

Date of Inspection: June 6, 2018 **Name of Inspector:** Georges Gauthier

Inspection Type: Mandatory Reporting Inspection

Licensee: Rosslyn Retirement Inc. / 307 King Street, Hamilton, ON L8N 1C1 (the "Licensee")

Retirement Home: Rosslyn Retirement Residence / 1322 King Street, Hamilton, ON L8M 1H3 (the "home")

Licence Number: S0404

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. 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

A resident wandered from the home on two occasions and demonstrated behaviours that posed a risk to herself or others. The Licensee failed to fully implement the behaviour management strategy and did not ensure the resident was reassessed, and the plan of care reviewed and revised.

Outcome

The Licensee submitted plan to achieve compliance by July 27, 2018 RHRA to confirm compliance by inspection.

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2. 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. (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,
 - (a) a goal in the plan is met;
 - (b) the resident's care needs change or the care services set out in the plan are no longer necessary;
 - (c) the care services set out in the plan have not been effective.

Inspection Finding

A resident's plan of care was not current. In addition, when the resident was originally assessed, the evidence did not show the risk of wandering had been considered.

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. 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:
 - 4. A response shall be made to the person who made the complaint, indicating,
 - i. what the licensee has done to resolve the complaint,
 - ii. that the licensee believes the complaint to be unfounded and the reasons for the belief.
 - 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.
 - 2. The complaint shall be resolved if possible, and a response that complies with paragraph 4 provided within 10 business days of the receipt of the complaint.
 - 3. For those complaints that cannot be investigated and resolved within 10 business days, an acknowledgement of receipt of the complaint shall be provided within 10 business days of receipt of the complaint, including the date by which the complainant can reasonably expect a resolution, and a follow-up response that complies with paragraph 4 shall be provided as soon as possible in the circumstances.
- 59. (2) The licensee shall ensure that a written record is kept in the retirement home that includes,
 - (a) the nature of each verbal or written complaint;
 - (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;

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- (e) every date on which any response was provided to the complainant and a description of the response;
- (f) any response made in turn by the complainant.

Inspection Finding

Complaints involving bedbugs had not been addressed in accordance with the listed items.

Outcome

The Licensee submitted plan to achieve compliance by July 27, 2018. RHRA to confirm compliance by inspection.

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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
A. Landle	June 28, 2018

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