

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

Inspection Information

Date of Inspection: September 27, 2018 | **Name of Inspector:** Debbie Rydall

Inspection Type: Routine Inspection

Licensee: Sienna Ontario RH GP Inc. / 302 Town Centre Boulevard , Markham, ON L3R 0E8 (the "Licensee")

Retirement Home: Kingsmere Retirement Residence / 287 King Street, Alliston, ON L9R 0C4 (the "home")

Licence Number: T0527

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,
 - (s) information as to whether the retirement home has automatic sprinklers in each resident's room;

Inspection Finding

The package of information reviewed at the time of inspection was not completely aligned with the requirements of the legislation in the area listed.

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 the RHA, S.O. 2010, c. 11, s. 60; Safety plans.

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):

60. (4) Every licensee of a retirement home shall ensure that the following are in place for the home:

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- 1. An emergency plan that responds to emergencies in the home or in the community in which the home is located and that meets the prescribed requirements.
- 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;
 - (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,
 - iii. violent outbursts,
 - ii. community disasters,
 - vi. chemical spills,
 - 2. Evacuation of the retirement home, including a system in the home to account for the whereabouts of all residents in the event that it is necessary to evacuate and relocate residents and evacuate staff and others in case of an emergency.
- **25. (4)** The licensee shall ensure that the emergency plan addresses the following components:
 - 1. Plan activation.
 - 2. Lines of authority.
 - 4. Specific staff roles and responsibilities.
- **25. (5)** The licensee shall ensure that the emergency plan for the retirement home is evaluated and updated at least annually and that the updating includes contact information for the relevant community agencies, partner facilities and resources that will be involved in responding to an emergency.

Inspection Finding

The emergency plan provided for review at the time of the inspection was not that of the current Licensee and was not specific to the home in the areas listed.

Outcome

The Licensee submitted a plan to achieve compliance by November 31, 2018. RHRA to confirm compliance by inspection.

3. The Licensee failed to comply with O. Reg. 166/11, s. 43; Initial assessment of care needs.

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

43. (1) Subject to section 45, no later than two days after a resident commences residency in a retirement home, the licensee of the home shall ensure that an initial assessment of the resident's immediate care needs is conducted.

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Inspection Finding

The routine inspection revealed that the required assessments for 2 out of 4 reviewed resident files had not been completed within the required time line as per the requirements of the legislation.

Outcome

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

4. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 65; Training.

The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 65; Additional training for direct care staff.

The Licensee failed to comply with O. Reg. 166/11, s. 14; Staff training.

The Licensee failed to comply with O. Reg. 166/11, s. 27; Infection prevention and control program.

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,
 - (a) the Residents' Bill of Rights;
 - (b) the licensee's policy mentioned in subsection 67 (4) to promote zero tolerance of abuse and neglect of residents;
 - (c) the protection afforded for whistle-blowing described in section 115;
 - (d) the licensee's policy mentioned in subsection 68 (3) regarding the use of personal assistance services devices for residents;
 - (f) fire prevention and safety;
- <u>65. (5)</u> The licensee shall ensure that all staff who provide care services to residents receive training in the following matters and at the times required by the regulations, as a condition of continuing to have contact with residents, in addition to the other training that they are required to receive under this section:
 - 3. Behaviour management.
- **14. (1)** For the purposes of clause 65 (2) (j) of the Act, every licensee of a retirement home shall ensure that all staff who work in the home receive training in the procedure described in subsection 73 (1) of the Act for a person to complain to the licensee.
- **27. (9)** The licensee shall ensure that each staff member who works in the retirement home receives training on how to reduce the incidence of infectious disease transmission, including,
 - (a) the need for and method of maintaining proper hand hygiene and method of preventing cross contamination, including proper handling of soiled linens, the protection of uniforms, and the separation of clean and dirty items;
 - (b) the need for and process of reporting, providing surveillance of and documenting incidents of infectious illness.

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Inspection Finding

The home was unable to provide any evidence at the time of the inspection to support that any staff had received the required mandatory training in the prescribed areas as per the requirements of the legislation.

Outcome

The Licensee submitted a plan to achieve compliance by November 15,2018. RHRA to confirm compliance by inspection.

5. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 73; Requirements for procedure. 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):

- 73. (2) The procedure shall comply with the regulations.
- 59. (2) The licensee shall ensure that a written record is kept in the retirement home that includes,
 - (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;
 - (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

The home's complaint management policy was not completely aligned with the requirements of the regulations; specifically, s. 59 (1) 3. Further the written log reviewed at the time of the inspection was not aligned with the legislation in the areas listed.

Outcome

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

6. 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

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There was no evidence provided during the inspection to support that all of the required staff held current food handling certificates as per the requirements of the legislation.

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
Afolal	October 24, 2018

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