

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

Inspection Information	
<b>Date of Inspection:</b> November 15, 2018	<b>Name of Inspector:</b> Mark Dennis
<b>Inspection Type:</b> Routine Inspection	
<b>Licensee:</b> CVH (NO. 8) LP / 766 Hespeler Road, Cambridge, ON N3H 5L8 (the "Licensee")	
<b>Retirement Home:</b> Errinrung Retirement Community / 67 Bruce Street, Thornbury, ON N0H 2P0 (the "home")	
<b>Licence Number:</b> S0414	

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><b>1. The Licensee failed to comply with O. Reg. 166/11, s. 24; Emergency plan, general.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><b>24. (4)</b> The licensee shall keep current all arrangements with community agencies, partner facilities and resources that will be involved in responding to an emergency.</p> <p><b>24. (5)</b> The licensee shall,</p> <ul style="list-style-type: none"> <li>(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,               <ul style="list-style-type: none"> <li>(i) the loss of essential services,</li> <li>(ii) situations involving a missing resident,</li> <li>(iii) medical emergencies,</li> </ul> </li> <li>(c) keep a written record of the testing of the emergency plan and planned evacuations and of any changes made to improve the emergency plan.</li> </ul>
<p><b>Inspection Finding</b></p> <p>During the inspection the Licensee was unable to show evidence of current arrangements with community partners that may be required to transport residents in the event of an emergency. The Licensee was unable to show annual testing and written record of that testing of the home emergency plan for loss of essential services, missing resident and medical emergency.</p>
<p><b>Outcome</b></p> <p>The Licensee has advised it has taken corrective action to achieve compliance. RHRA to confirm compliance by inspection.</p>

**2. 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):

**27. (2)** The licensee shall consult on an ongoing basis and not less than once a year with the local medical officer of health or designate about identifying and addressing health care issues in the retirement home in order to reduce the incidence of infectious disease outbreaks in the home.

**27. (3)** The licensee shall keep a written record of the consultation required under subsection (2) that shall include a record of when the consultation took place, what was discussed and any recommendations that the local medical officer of health or designate made.

**Inspection Finding**

During the inspection the Licensee was unable to show annual consultation with the local medical officer of health or designate had been completed. There was no written record of that consultation.

**Outcome**

The Licensee submitted a plan to achieve compliance by December 18, 2018. RHRA to confirm compliance by inspection.

**3. 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; On-going training.  
The Licensee failed to comply with O. Reg. 166/11, s. 14; Staff 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,  
(d) the licensee’s policy mentioned in subsection 68 (3) regarding the use of personal assistance services devices for residents;

**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.

**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.

**Inspection Finding**

During the inspection the Licensee was unable to show that a staff member had completed the prescribed training prior to commencing work in the home. Further, the Licensee has not completed the prescribed annual training.

**Outcome**

The Licensee submitted a plan to achieve compliance by November 30, 2018. RHRA to confirm compliance by inspection.

**4. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 67; Contents.  
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):

**67. (5)** At a minimum, the policy to promote zero tolerance of abuse and neglect of residents shall,  
 (c) provide for a program for preventing abuse and neglect;  
 (f) set out the consequences for those who abuse or neglect residents;

**15. (3)** The policy to promote zero tolerance of abuse and neglect of residents described in subsection 67 (4) of the Act shall,

(d) provide that the licensee of the retirement home shall ensure that the resident’s substitute decision-makers, if any, and any other person specified by the resident,

(ii) are notified within 12 hours upon the licensee becoming aware of any other alleged, suspected or witnessed incident of abuse or neglect of a resident;

(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 Licensee Zero Tolerance of Abuse and Neglect policy did not contain the prescribed content.

**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 November 28, 2018
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