

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

Inspection Information	
<b>Date of Inspection:</b> November 5, 2018	<b>Name of Inspector:</b> Susan Lines
<b>Inspection Type:</b> Routine Inspection	
<b>Licensee:</b> 458422 Ontario Limited / 220 Emma Avenue, Cornwall, ON K6J 5V8 (the "Licensee")	
<b>Retirement Home:</b> Sandfield Place / 220 Emma Avenue, Cornwall, ON K6J 5V8 (the "home")	
<b>Licence Number:</b> N0020	

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 the RHA, S.O. 2010, c. 11, s. 53; Agreement required.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><b>53. (1)</b> 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.</p>
<p><b>Inspection Finding</b></p> <p>The home's records showed that a resident had not signed an agreement with the home prior to moving into the home.</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>
<p><b>2. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 55; Posting information.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><b>55. (2)</b> Every licensee of a retirement home shall ensure that the following information is posted in the home in a conspicuous and easily accessible location and in a manner that complies with the prescribed requirements, if any:</p> <p>1. The Residents' Bill of Rights.</p>

**Inspection Finding**

The home did not have the current Bill of Rights posted as required.

**Outcome**

The Licensee must take 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. (4)** The licensee shall keep current all arrangements with community agencies, partner facilities and resources that will be involved in responding to an emergency.

**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,

(iii) medical emergencies,

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

(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.

**Inspection Finding**

The home's emergency plan did not meet the requirements.

**Outcome**

The Licensee must take corrective action to achieve compliance.

- 4. 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.

<p><b>Inspection Finding</b></p> <p>The home's infection prevention and control program did not meet the requirements.</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>
<p><b>5. 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.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><b>43. (2)</b> The initial assessment mentioned in subsection (1) shall consider the following matters with respect to the resident:</p> <ul style="list-style-type: none"> <li>2. Presence of infectious diseases.</li> <li>3. Risk of falling.</li> </ul> <p><b>44. (2)</b> The full assessment mentioned in subsection (1) shall consider the following matters with respect to the resident:</p> <ul style="list-style-type: none"> <li>7. The matters listed in subsection 43 (2).</li> </ul>
<p><b>Inspection Finding</b></p> <p>The home's assessments did not meet the requirements.</p>
<p><b>Outcome</b></p> <p>The Licensee must take corrective action to achieve compliance.</p>
<p><b>6. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 67; Contents.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><b>67. (5)</b> At a minimum, the policy to promote zero tolerance of abuse and neglect of residents shall, (d) contain an explanation of the duty under section 75 to report to the Registrar the matters specified in that section;</p>
<p><b>Inspection Finding</b></p> <p>The home's abuse policy did not meet the requirement.</p>
<p><b>Outcome</b></p> <p>The Licensee must take corrective action to achieve compliance.</p>
<p><b>7. The Licensee failed to comply with O. Reg. 166/11, s. 23; Behaviour management.</b></p>

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,
- (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 home's behaviour management strategy did not meet the requirement.

**Outcome**

The Licensee must take corrective action to achieve compliance.

**8. 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,
- (a) the drugs or other substances are stored in an area or a medication cart that,
    - (i) is used exclusively for drugs or other substances and for supplies related to drugs or other substances,
    - (ii) is locked and secure,
  - (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 home's medication storage did not meet the requirements.

**Outcome**


The Licensee must take corrective action to achieve compliance.

**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 December 4, 2018
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