

# FINAL INSPECTION REPORT Under the Retirement Homes Act, 2010

**Inspection Information** 

**Date of Inspection:** November 28, 2018 | Name of Inspector: Debbie Rydall

**Inspection Type:** Routine Inspection

Licensee: 2596217 Ontario Inc. / 515 Consumer's Road, North York, ON M2J 4Z2 (the "Licensee")

Retirement Home: Lakeridge Seniors Residence / 7 Harriet Street, Penetanguishene, ON L9M 1K8 (the

"home")

Licence Number: N0469

### **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 O. Reg. 166/11, s. 11; Posted information.

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

- **11. (1)** For the purposes of paragraph 4 of subsection 55 (2) of the Act, the following information is prescribed as information that must be posted in a retirement home under that subsection:
  - 6. A copy of the most recent final inspection report prepared by an inspector under section 77 of the Act, subject to section 114 of the Act.

## **Inspection Finding**

The routine inspection revealed that a copy of the most recent final inspection report had not been posted as per the requirements of the legislation.

#### Outcome

The Licensee must take corrective action to achieve compliance.

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.

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# 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;
- (b) at least once every two years, conduct a planned evacuation of the retirement home;
- (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.
- 25. (3) The licensee shall ensure that the emergency plan provides for the following:
  - 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.
  - 4. Identification of the community agencies, partner facilities and resources that will be involved in responding to an emergency.

## **Inspection Finding**

The routine inspection revealed that the home had not completed the required annual testing of their emergency plan or completed the required evacuation as per the requirements of the legislation. Further, the home's emergency plan was not completely aligned with the legislation in the areas listed.

#### **Outcome**

The Licensee must take corrective action to achieve compliance.

3. 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):

- **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;

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## **Inspection Finding**

The home's zero abuse policy reviewed at the time of the inspection was not completely aligned with the requirements of the legislation in the areas listed.

#### **Outcome**

The Licensee must take corrective action to achieve compliance.

4. 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**

The routine inspection revealed that not all of the required staff held a current safe food handling certificate as per the requirements of the legislation.

#### Outcome

The Licensee must take corrective action to achieve compliance.

5. 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,
  - (b) strategies for interventions to prevent and address resident behaviours that pose a risk to the resident or others in the home;

# **Inspection Finding**

The behaviour management strategy reviewed at the time of the inspection was not completely aligned with the requirements of the legislation in the area listed.

#### **Outcome**

The Licensee must take corrective action to achieve compliance.

6. 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):

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- <u>30.</u> 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,

# **Inspection Finding**

The routine inspection revealed that the medication cart was not used exclusively to store drugs and substances related to medication administration.as per the requirements of the legislation.

#### **Outcome**

The Licensee must take corrective action to achieve compliance.

7. The Licensee failed to comply with O. Reg. 166/11, s. 55; Contents of records.

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

- 55. (2) The record for each resident shall include,
  - (d) a copy of the resident's most recent plan of care;

# **Inspection Finding**

The routine inspection revealed that 1 of the reviewed resident files did not contain a plan of care as per the requirements of the legislation.

#### **Outcome**

The Licensee must take corrective action to achieve compliance.

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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 <a href="http://rhra.ca/en/register/">http://rhra.ca/en/register/</a>

Signature of Inspector	Date
Affolal	January 4, 2019

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