

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

| Inspection Information   |  |
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| <b>Date of Inspection:</b> December 17, 2018   | <b>Name of Inspector:</b> Corina Gadde |
| <b>Inspection Type:</b> Routine Inspection   |  |
| <b>Licensee:</b> Thorncliffe Place Retirement Home Ltd. / 1 Thorncliffe Place, Ottawa, ON K2H 9N9 (the "Licensee") |  |
| <b>Retirement Home:</b> Thorncliffe Place Retirement Home / 1 Thorncliffe Place, Ottawa, ON K2H 9N9 (the "home")   |  |
| <b>Licence Number:</b> N0008   |  |

| Purpose of Inspection   |
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| The RHRA conducts routine inspections as set out in section 77(3) of the <i>Retirement Homes Act, 2010</i> (the "RHA"). |

| NON-COMPLIANCE   |
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| <p><b>1. The Licensee failed to comply with O. Reg. 166/11, s. 27; Infection prevention and control program.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><b>27. (2)</b> 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.</p> <p><b>27. (3)</b> 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> |
| <p><b>Inspection Finding</b></p> <p>The home had not conducted the required annual consultation with Public Health.</p>  |
| <p><b>Outcome</b></p> <p>Licensee must take corrective action to achieve compliance.</p>   |
| <p><b>2. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 65; Training.</b></p> <p><b>The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 65; On-going training.</b></p> <p><b>The Licensee failed to comply with O. Reg. 166/11, s. 14; Staff training.</b></p> <p><b>The Licensee failed to comply with O. Reg. 166/11, s. 27; Infection prevention and control program.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p>   |

**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;

**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. (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.

**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.

**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.

**Inspection Finding**

Annual staff training did not include the required policies for Zero Tolerance of Abuse and Neglect, PASDs, or the Complaint Procedure. 3 new staff reviewed had not completed the required training prior to working in the home.

**Outcome**


Licensee submitted a plan to achieve compliance by January 15, 2019. 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/>

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| Signature of Inspector<br> | Date<br>January 9, 2019 |
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