

# FINAL INSPECTION REPORT Under the Retirement Homes Act, 2010

**Inspection Information** 

**Date of Inspection:** September 17, 2019 **Name of Inspector:** Debbie Rydall

**Inspection Type:** Mandatory Reporting Inspection

Licensee: 2259976 Ontario Inc. / 1685 3rd Avenue, Owen Sound, ON N4K 4R3 (the "Licensee")

Retirement Home: Kelso Pines Retirement Home / 1685 3rd Avenue, Owen Sound, ON N4K 4R3 (the

"home")

**Licence Number: S0105** 

#### **Purpose of Inspection**

The RHRA received a report under section 75(1) of the Retirement Homes Act, 2010 (the "RHA").

#### **NON-COMPLIANCE**

1. 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):

- **59. (1)** Every licensee of a retirement home shall ensure that every written or verbal complaint made to the licensee or a staff member concerning the care of a resident or operation of the home is dealt with as follows:
  - 1. The complaint shall be investigated. If the complaint alleges harm or risk of harm to one or more residents, the investigation shall be commenced immediately.
  - 4. A response shall be made to the person who made the complaint, indicating,
- 59. (2) The licensee shall ensure that a written record is kept in the retirement home that includes,
  - (a) the nature of each verbal or written complaint;
  - (b) the date that the complaint was received;
  - (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 inspection revealed that management and staff of the home were aware of complaints concerning the care services provided to 1 or more residents but failed to manage the complaints as per the requirements of the legislation in the areas listed.

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#### **Outcome**

The Licensee must take corrective action to achieve compliance.

2. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 65; Obligations of licensees re staff.

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. (1) Every licensee of a retirement home shall ensure that all the staff who work in the home,
  - (a) have the proper skills and qualifications to perform their duties;
  - (b) possess the prescribed qualifications.
- **14. (3)** For the purposes of paragraph 5 of subsection 65 (5) of the Act, every licensee of a retirement home shall ensure that every staff member who provides a care service to a resident has received or receives training in,
  - (b) each care service offered in the home so that the staff member is able to understand the general nature of each of those services, the standards applicable under the Act to each of those services and the aspects of each of those services that may be relevant to the staff member's own duties in the home.

## **Inspection Finding**

The inspection revealed that not all staff, including high school students working in the home had the required skills and training required to provide some of the care services required by the identified residents as per the requirements of the legislation.

#### Outcome

The Licensee must take corrective action to achieve compliance.

3. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 62; Contents of plan.

The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 62; Reassessment and revision.

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

- **62. (4)** The licensee of a retirement home shall ensure that there is a written plan of care for each resident of the home that sets out,
  - (b) the planned care services for the resident that the licensee will provide, including,
    - (i) the details of the services,
    - (ii) the goals that the services are intended to achieve,
    - (iii) clear directions to the licensee's staff who provide direct care to the resident;

<u>62. (12)</u> The licensee shall ensure that the resident is reassessed and the plan of care reviewed and revised at least every six months and at any other time if, in the opinion of the licensee or the resident,

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(b) the resident's care needs change or the care services set out in the plan are no longer necessary;

# **Inspection Finding**

The inspection revealed that the reviewed plans of care for the identified residents who had specific care needs had not been updated or revised to reflect their needs and didn't provide clear direction to staff specific to the care needs of those residents 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	November 6, 2019

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