

FINAL INSPECTION REPORT Under the Retirement Homes Act, 2010

Inspection Information

Date of Inspection: February 27, 2020 Name of Inspector: Douglas Crust

Inspection Type: Routine Inspection

Licensee: Crescent Hill Place Retirement Home Inc. / 3 Crescent Hill Drive, Brampton, ON L6S 2P2 (the

"Licensee")

Retirement Home: Crescent Hill Place Retirement / 3 Crescent Hill Drive, Brampton, ON L6S 2P2 (the

"home")

Licence Number: T0325

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. 32; Records.

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

- <u>32.</u> If the licensee or a member of the staff of a retirement home administers a drug or other substance to a resident, the licensee shall ensure that,
 - (b) if a drug is administered, there is written evidence that the drug was prescribed for the resident by a person who is authorized to prescribe a drug under section 27 of the Regulated Health Professions Act, 1991;

Inspection Finding

At the time of the inspection, evidence in the form of copies of current prescriptions or physician's orders showing that all drugs were prescribed for a resident could not be located for medications that were being administered in the Home.

Outcome

The Licensee has advised it has taken corrective action to achieve compliance. RHRA to confirm compliance by inspection.

2. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 65; On-going training.

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

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<u>65. (4)</u> 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.

Inspection Finding

The evidence submitted did not confirm that each of the Licensee's staff had been trained on the Home's own policy to promote zero tolerance of abuse and neglect and the policy for personal assistance service devices, as prescribed.

Outcome

The Licensee submitted a plan to achieve compliance by April 5, 2020. RHRA to confirm compliance by inspection.

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. 26; Emergency plan, retirement home with 10 or fewer residents.

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

- 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;
- <u>26.</u> The emergency plan for a retirement home that has 10 or fewer residents shall, in addition to the requirements in section 24, meet the following requirements:
 - 4. The plan shall require that resources, supplies and equipment vital for the emergency response are set aside, readily available at the home and tested regularly to ensure that they are in working order.

Inspection Finding

At the time of the inspection, there was no evidence of annual testing of the emergency plan, specifically testing of the loss of essential services, missing resident, medical emergencies, and violent outbursts. Also, there was no evidence of regular testing of the emergency resources, supplies and equipment, as prescribed.

Outcome

The Licensee has advised it has taken corrective action to achieve compliance. RHRA to confirm compliance by inspection.

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4. 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; Persons who approve plans

The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 62; Persons who approve plans of care.

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.

The Licensee failed to comply with O. Reg. 166/11, s. 47; Development of plan of care.

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

- <u>62. (4)</u> 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,
 - (iii) clear directions to the licensee's staff who provide direct care to the resident;
- **62. (9)** The licensee shall ensure that the following persons have approved the plan of care, including any revisions to it, and that a copy is provided to them:
 - 1. The resident or the resident's substitute decision-maker.
 - 2. The prescribed person if there is a person prescribed for the purpose of this paragraph.
- **43. (2)** The initial assessment mentioned in subsection (1) shall consider the following matters with respect to the resident:
 - 2. Presence of infectious diseases.
 - 3. Risk of falling.
 - 5. Dietary needs including known food restrictions.
 - 6. Cognitive ability.
 - 7. Risk of harm to self and to others.
 - 8. Risk of wandering.
- **44. (2)** The full assessment mentioned in subsection (1) shall consider the following matters with respect to the resident:
 - 1. Physical and mental health.
 - 2. Functional capacity.
 - 3. Cognitive ability.
 - 4. Behavioural issues.
 - 5. Need for care services.
 - 6. Need for assistance with the activities of daily living.
 - 7. The matters listed in subsection 43 (2).
- 47. (1) Subject to subsection (4), as soon as possible and not later than two days after a resident commences residency in a retirement home, the licensee of a retirement home shall develop an initial plan of care for the resident based on the initial assessment of the resident's immediate care needs conducted under section 43 that includes all of the information listed in subsection 62 (4) of the Act that is relevant to the resident's immediate care needs.

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<u>47. (2)</u> No later than 21 days after a resident commences residency in a retirement home, the licensee of the home shall develop a complete plan of care for the resident based on the full assessment of the resident's care needs and preferences conducted under section 44 that takes into account all of the matters that must be considered in a full assessment.

47. (5) If an assessment of a resident indicates that the resident's care needs may include dementia care, skin and wound care or the use of a personal assistance services device, the licensee shall ensure that an interdisciplinary care conference is held as part of the development of the resident's plan of care and that the resident's plan of care takes into account the results of the care conference.

Inspection Finding

The written assessments did not include the listed items. There was no evidence of an interdisciplinary care conference for two residents with identified skin care needs and for another resident with a diagnosis of dementia, as prescribed. Each of the plans of care inspected were not dated so it was not possible to verify that they were completed within the prescribed timelines. The plans of care did not provide clear directions to the licensee's staff who provide direct care to the resident. Finally, each of the inspected plans of care were not approved, as prescribed.

Outcome

The Licensee submitted a plan to achieve compliance by April 10, 2020. RHRA to confirm compliance by inspection.

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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 Retirement Home Database available online at http://www.rhra.ca/en/retirement-home-database.

Signature of Inspector	Date
Sof.	March 16, 2020

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