

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

Inspection Information	
Date of Inspection: June 25, 2020	Name of Inspector: Michele Clarke
Inspection Type: Mandatory Reporting Inspection	
Licensee: Dre's Lodge Inc. / 10 Empringham Drive, Scarborough, ON M1B 3T5 (the "Licensee")	
Retirement Home: Dre's Lodge Inc. / 82 River Street, Sunderland, ON L0C 1H0 (the "home")	
Licence Number: T0487	

Purpose of Inspection
The RHRA received a report under section 75(1) of the <i>Retirement Homes Act, 2010</i> (the "RHA").

NON-COMPLIANCE
<p>1. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 67; Same, neglect.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p>67. (2) Every licensee of a retirement home shall ensure that the licensee and the staff of the home do not neglect the residents.</p>
<p>Inspection Finding</p> <p>The Licensee failed to ensure the staff of the home do not neglect the residents by ensuring the living conditions are of acceptable standards regarding cleanliness and general repair.</p>
<p>Outcome</p> <p>The Licensee has advised it has taken corrective action to achieve compliance. RHRA to confirm compliance by inspection.</p>
<p>2. The Licensee failed to comply with O. Reg. 166/11, s. 36; Contenance care.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p>36. (1) If one of the care services that the licensee or the staff of a retirement home provide to a resident of the home is continence care, the licensee shall establish a continence care program that includes,</p> <ul style="list-style-type: none"> (a) measures to promote continence; (b) measures to prevent constipation, including nutrition and hydration protocols; (c) toileting programs; (d) strategies to maximize the resident's independence, comfort and dignity, including the use of

equipment, supplies, devices and assistive aids.

Inspection Finding

The licensee offers continence care as a care service. The licensee has a written incontinence management policy. However, the policy cannot be implemented as written due to the lack of qualified staff and is not being implemented as outlined in the policy.

Outcome

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

- 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; Persons who approve plans of care.**
- The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 62; Reassessment and revision.**
- The Licensee failed to comply with O. Reg. 166/11, s. 48; Approval of the plan of care.**

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;

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:

62. (12) 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,

48. (1) For the purposes of paragraph 2 of subsection 62 (9) of the Act and subject to subsection (2), the licensee shall ensure that a resident’s plan of care is approved by,

- (b) a person acting under the supervision of a member of the College of Physicians and Surgeons of Ontario or the College of Nurses of Ontario.

Inspection Finding

The plan of care for a resident receiving continence care is not in compliance. There are no details of the service, goals the service is to achieve or detailed instructions for staff. There is no evidence that the plan of care was approved by the required persons. Evidence at the time of inspection revealed that the licensee had not reassessed the resident or updated the plan of care within the prescribed timeframe.

Outcome

The Licensee has advised it has taken corrective action to achieve compliance. 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 Retirement Home Database, available online at <http://www.rhra.ca/en/retirement-home-database>.

Signature of Inspector <i>Michele Clarke</i>	Date September 14, 2020
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