

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

| Inspection Information  |                                    |  |
|---|------------------------------------|--|
| Date of Inspection: June 3, 2020  | Name of Inspector: Rachelle Harber |  |
| Inspection Type: Mandatory Reporting Inspection   |                                    |  |
| Licensee: 2428577 Ontario Inc. / 8158 Lundy's Lane, Niagara Falls , ON L2H 1H1 (the "Licensee") |                                    |  |
| Retirement Home: Greycliff Manor / 8158 Lundy's Lane, Niagara Falls, ON L2H 1H1 (the "home")    |                                    |  |

Licence Number: S0360

**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 the RHA, S.O. 2010, c. 11, s. 60; Safety standards. The Licensee failed to comply with O. Reg. 166/11, s. 19; Maintenance.

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

**60. (3)** Every licensee of a retirement home shall comply with all prescribed safety standards for the home, including standards with respect to fire, safety and public health requirements and emergency evacuation plans.

**19. (1)** Every licensee of a retirement home shall ensure that a maintenance program is in place to ensure that the building forming the retirement home, including both interior and exterior areas and its operational systems, are maintained in good repair.

## **Inspection Finding**

The Licensee did not ensure that safety standards are maintained as all interior areas are not maintained in good repair. Specifically, areas of the kitchen floor as well as carpeting in some areas of the home. These areas of poor repair are tripping hazards for both staff and residents.

#### 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 O. Reg. 166/11, s. 17; Cleanliness.

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

**<u>17. (1)</u>** Every licensee of a retirement home shall ensure that the common areas of the home, including the floors and any furnishings, equipment and linens in those areas, are clean and sanitary.

<u>17. (3)</u> The licensee shall document the routines and methods used to comply with subsections (1) and (2).

#### Inspection Finding

Evidence shows that the Licensee did not ensure that all common areas of the home are clean and sanitary. Further, the Licensee did not ensure that staff document the routines and methods used to comply with those areas that are cleaned.

#### 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 O. Reg. 166/11, s. 18; Pest control.

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

**18. (3)** The licensee shall ensure that timely action is taken to deal with pests in the retirement home.

### **Inspection Finding**

Evidence shows that there is a lack of timely action to deal with pests in the home as evidenced by bed bug activity in the hallway, a residents filthy mattress and bed sheets, and evidence that staff not always having the time to follow protocol in a timely manner.

#### Outcome

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

#### 4. The Licensee failed to comply with O. Reg. 166/11, s. 27; Infection prevention and control program.

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

**<u>27. (5)</u>** The licensee of a retirement home shall ensure that,

(0.b) all reasonable steps are taken in the retirement home to follow,

(i) any directive respecting coronavirus (COVID-19) issued to long-term care homes by the Chief Medical Officer of Health under section 77.7 of the Health Protection and Promotion Act,

(ii) any guidance, advice or recommendations respecting coronavirus (COVID-19) that are given to long-term care homes by the Chief Medical Officer of Health and made available on the Government of Ontario's website respecting coronavirus (COVID-19);

#### **Inspection Finding**



Evidence shows that the home is not taking reasonable steps to follow guidance, advise and directives of the Chief Medical Officer of Health.

#### Outcome

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

#### 5. The Licensee failed to comply with O. Reg. 166/11, s. 36; Continence care.

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

**<u>36. (2)</u>** If, as part of the continence care program, a licensee provides continence care products to a resident, the licensee shall,

- (a) provide products that,
  - (i) are based on the resident's individually assessed needs,
  - (ii) properly fit the resident,
  - (iii) promote the resident's comfort, ease of use, dignity and good skin integrity,
  - (iv) promote continued independence wherever possible,
  - (v) are appropriate for the time of day, and for the individual resident's type of incontinence;

#### Inspection Finding

Evidence shows that for those residents that the home supplies continent products for, the continent product is not always available, and when it is, the home is unable to demonstrate that continent product that is provided meets the legislative requirements as listed under O. Reg. s. 36 (2).

#### Outcome

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

#### 6. The Licensee failed to comply with an Order made under s. 90 RHA, S.O. 2010

#### **Inspection Finding**

Inspection revealed the Licensee is in contravention of compliance order 2020-S0360-90-01 dated April 24, 2020.

#### 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 <a href="http://www.rhra.ca/en/retirement-home-database">http://www.rhra.ca/en/retirement-home-database</a>.

| Signature of Inspector | Date             |
|------------------------|------------------|
| Rachelle Harber RN     | October 20, 2020 |