

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

Inspection Information	
<b>Date of Inspection:</b> October 1, 2020	<b>Name of Inspector:</b> Pam Hand
<b>Inspection Type:</b> Compliance Inspection	
<b>Licensee:</b> 11878131 Canada Inc. / 118 Paige St, Kitchener, ON N2K 4P6 (the "Licensee")	
<b>Retirement Home:</b> Victoria Manor (Woodstock) / 265 Victoria Street, Woodstock, ON N4S 6W2 (the "home")	
<b>Licence Number:</b> S0492	

Purpose of Inspection
The RHRA conducts compliance inspections as set out in section 77(1) of the <i>Retirement Homes Act, 2010</i> (the "RHA").

NON-COMPLIANCE
<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><u>27. (5)</u></b> The licensee of a retirement home shall ensure that,</p> <p>(0.b) all reasonable steps are taken in the retirement home to follow,</p> <p>(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,</p> <p>(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);</p>
<p><b>Inspection Finding</b></p> <p>The Licensee failed to take all reasonable steps to follow the recommendations, guidance and advice and directives of the Chief Medical Officer of Health regarding COVID-19. Specifically, staff, visitors and residents are not properly or adequately screened, the home did not have a written staffing contingency plan, there was not a dedicated area for outside visitation, all staff had not completed training of donning and doffing of personal protection equipment, and a new admission was not transferred to the home within 24 hours of receiving a negative COVID-19 test result. In addition, on the day of inspection, residents were observed not adhering to physical distancing guidelines, a staff member was observed in the home without the required face mask, and a resident who had returned from an overnight visit was observed in the dining room and common area without a face mask.</p>
<p><b>Outcome</b></p>

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. 118; False information.**

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

**118.** No person shall knowingly provide false or misleading information to an inspector, the Registrar or any person employed or retained by the Authority in any statement or document in respect of any matter relating to this Act or the regulations, whether made or given orally, on paper or electronically.

**Inspection Finding**

The Licensee provided false and misleading information to an inspector.

**Outcome**

The Licensee must take corrective action to achieve compliance.

**3. The Licensee failed to comply with O. Reg. 166/11, s. 30; Storage of drugs or other substances.**

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

**30.** If drugs or other substances are stored in a retirement home on behalf of a resident, the licensee of the home shall ensure that,

- (a) the drugs or other substances are stored in an area or a medication cart that,
  - (ii) is locked and secure,
- (b) controlled substances as defined in the Controlled Drugs and Substances Act (Canada) are stored in a separate, double-locked stationary cupboard in the locked area or stored in a separate locked area within the locked medication cart;

**Inspection Finding**

The Licensee failed to ensure the medication cart was locked and secured and that controlled substances were stored, as per the legislation.

**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):

**27. (7)** The licensee of a retirement home shall ensure that waterless, alcohol-based hand sanitizer or another form of hand sanitation that provides equivalent protection against infectious disease

transmission is available for use by residents and staff in communal resident areas and in staff work areas.

**Inspection Finding**

The evidence showed the home had an inadequate supply of alcohol-based hand sanitizer for use by the residents and staff.

**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. 27; Infection prevention and control program.**

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

- 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**

The Licensee failed to ensure that all staff were trained or adequately trained in the home's infection prevention and control policy.

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

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

- 17. (3)** The licensee shall document the routines and methods used to comply with subsections (1) and (2).

**Inspection Finding**

The Licensee failed to provide sufficient documentary evidence of completed cleaning records.

**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 	Date 202010/22
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