

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

| Inspection Information   |                                       |
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| <b>Date of Inspection:</b> February 8, 2021  | <b>Name of Inspector:</b> Shara Bundy |
| <b>Inspection Type:</b> Mandatory Reporting Inspection   |                                       |
| <b>Licensee:</b> Dementia Care Inc. / 35 Capulet Walk, London, ON N6H 5W4 (the "Licensee")         |                                       |
| <b>Retirement Home:</b> Highview Residences / 35, 41 Capulet Walk, London, ON N6H 5W4 (the "home") |                                       |
| <b>Licence Number:</b> S0029   |                                       |

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

| NON-COMPLIANCE   |
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| <p><b>1. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 69; Restrictions on use.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><b>69. (2)</b> A licensee of a retirement home or an external care provider who provides care services in the home may permit the use of a personal assistance services device for a resident of the home only if,</p> <ul style="list-style-type: none"> <li>(a) the licensee has considered or tried alternatives to the use of the device but has found that the alternatives have not been, or considers that they would not be, effective to assist the resident with a routine activity of living;</li> <li>(b) the use of the device is reasonable, in light of the resident's physical and mental condition and personal history, and is the least restrictive of such devices that would be effective to assist the resident with a routine activity of living;</li> <li>(d) the resident or, if the resident is incapable, the resident's substitute decision-maker, has consented to the use of the device;</li> </ul> |
| <p><b>Inspection Finding</b></p> <p>The Licensee failed to provide evidence that they considered alternatives to the use of the Personal Assistance Services Device or that the device used was the least restrictive that would be effective for a resident. The Licensee also failed to provide evidence that the resident or substitute decision maker had consented to use the device.</p>   |
| <p><b>Outcome</b></p> <p>The Licensee submitted a plan to achieve compliance by May 15, 2021. RHRA to confirm compliance by inspection.</p>  |
| <p><b>2. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 62; Contents of plan.</b></p>  |

**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):

**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;

**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 Licensee failed to provide evidence of a multidisciplinary care conference regarding the above-mentioned resident regarding the use of a Personal Assistance Services Device and revised the Plan of Care to include the details of the care, goals, and clear instructions to the staff who provide the care regarding the use of the device

**Outcome**

The Licensee submitted a plan to achieve compliance by May 15, 2021. RHRA to confirm compliance by inspection.

**3. 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. (5)** 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);
- (0.a) any guidance, advice or recommendations given to retirement homes by the Chief Medical Officer of Health are followed in the retirement home;

**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 Licensee failed to ensure that all reasonable steps are taken by the retirement home to follow the directives respecting coronavirus (COVID-19) issued the Chief Medical Officer of Health as well as the recommendations given to retirement homes by the Chief Medical Officer of Health, with regards to a resident exhibiting symptoms that could be related to COVID-19. Furthermore, the licensee failed to provide Alcohol Based Hand Rub in areas accessible for use by residents and staff in communal resident areas and in staff work areas.

**Outcome**

The Licensee submitted a plan to achieve compliance by April 10, 2021. 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>.

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| Signature of Inspector<br><br><i>Shara Bundy</i> | Date<br><br>April 1, 2021 |
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