

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

Inspection Information				
Date of Inspection: June 29, 2021	Name of Inspector: Angela Butler			
Inspection Type: Routine Inspection				
Licensee: Caressant Care Nursing and Retirement Homes Limited / 264 Norwich Avenue, Woodstock, ON N4S 3V9 (the "Licensee")				
<b>Retirement Home:</b> Caressant Care On Bonnie Place / 15 Bonnie Place, St. Thomas, ON N5R 5T8 (the "home")				
Licence Number: S0021				

#### **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

# The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 62; Plan of care. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 62; Reassessment and revision.

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

**62. (1)** When a resident commences his or her residency in a retirement home, the licensee shall, within the prescribed times, ensure that the resident is assessed and that a plan of care is developed based on the assessment and in accordance with this section and the regulations.

<u>62. (12)</u> 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,

#### **Inspection Finding**

The Licensee failed to implement the Plans of Care for Admission within the timelines and to update Plans of Care every 6 months.

#### Outcome

The Licensee submitted a plan to achieve compliance by August 31, 2021. RHRA to confirm compliance by inspection.

2. 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>43. (1)</u>** Subject to section 45, no later than two days after a resident commences residency in a retirement home, the licensee of the home shall ensure that an initial assessment of the resident's immediate care needs is conducted.

**44. (1)** Subject to section 46, no later than 14 days after a resident commences residency in a retirement home, the licensee shall ensure that a full assessment of the resident's care needs and preferences is conducted.

**47. (2)** 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.

#### **Inspection Finding**

The Licensee failed to complete an Initial Assessment, a Full Assessment, and a Plan of Care within the appropriate timelines.

#### 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. 24; Emergency plan, general.

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

**<u>24. (4)</u>** The licensee shall keep current all arrangements with community agencies, partner facilities and resources that will be involved in responding to an emergency.

#### Inspection Finding

The Licensee failed to keep up to date all current arrangements with community partners that would be involved in responding to an emergency.

#### Outcome

The Licensee submitted a plan to achieve compliance by August 20, 2021. RHRA to confirm compliance by inspection.

#### 4. The Licensee failed to comply with O. Reg. 166/11, s. 24; Emergency plan, general.

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,

(ii) situations involving a missing resident,

#### **Inspection Finding**

The Licensee failed to test on an annual basis the emergency plan for responding to a missing resident.

#### Outcome

The Licensee submitted a plan to achieve compliance by August 20, 2021. RHRA to confirm compliance by inspection.

#### 5. The Licensee failed to comply with O. Reg. 166/11, s. 24; Emergency plan, general.

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,

(iv) violent outbursts;

#### **Inspection Finding**

The Licensee failed to test annually the emergency plan for a violent resident.

#### Outcome

The Licensee submitted a plan to achieve compliance by August 20, 2021. RHRA to confirm compliance by inspection.

#### 6. The Licensee failed to comply with O. Reg. 166/11, s. 24; Emergency plan, general.

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

24. (5) The licensee shall,

(b) at least once every two years, conduct a planned evacuation of the retirement home;

#### **Inspection Finding**

The Licensee failed to test every two years the evacuation of the home.

#### Outcome

The Licensee submitted a plan to achieve compliance by August 20, 2021. RHRA to confirm compliance by inspection.



## 7. The Licensee failed to comply with O. Reg. 166/11, s. 25; Emergency plan, retirement home with more than 10 residents.

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

**25. (3)** The licensee shall ensure that the emergency plan provides for the following:

3. Resources, supplies and equipment vital for the emergency response being set aside and readily available at the retirement home and regular testing of all such resources, supplies and equipment to ensure that they are in working order.

#### **Inspection Finding**

The Licensee failed to provide supplies and equipment for an emergency.

#### Outcome

The Licensee submitted a plan to achieve compliance by August 15, 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 <u>http://www.rhra.ca/en/retirement-home-database</u>.

Signature of Inspector	Angela Surle	RN 2	Date July 29, 2021
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