

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

Inspection Information	
<b>Date of Inspection:</b> July 13, 2021	<b>Name of Inspector:</b> Ingrid Boiago
<b>Inspection Type:</b> Routine Inspection	
<b>Licensee:</b> Heritage Green Retirement Home / 351 Isaac Brock Drive, Stoney Creek, ON L8J 1Y1 (the "Licensee")	
<b>Retirement Home:</b> Heritage Green Retirement Home / 351 Isaac Brock Drive, Stoney Creek, ON L8J 1Y1 (the "home")	
<b>Licence Number:</b> S0149	

Purpose of Inspection
The RHRA conducts routine inspections as set out in section 77(3) of the <i>Retirement Homes Act, 2010</i> (the "RHA").

NON-COMPLIANCE
<p><b>1. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 73; Procedure for complaints to licensee.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><b>73. (1)</b> Every licensee of a retirement home shall ensure that there is a written procedure for a person to complain to the licensee about the operation of the home and for the way in which the licensee is required to deal with complaints.</p>
<p><b>Inspection Finding</b></p> <p>The licensee was unable to show evidence of written procedure of complaints</p>
<p><b>Outcome</b></p> <p>The licensee must take corrective action to achieve compliance</p>
<p><b>2. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 62; Reassessment and revision.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><b>62. (12)</b> 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,</p> <p>(b) the resident's care needs change or the care services set out in the plan are no longer necessary;</p>

<p><b>Inspection Finding</b></p> <p>The Licensee did not meet the legislative requirements related to plans of care as listed.</p>
<p><b>Outcome</b></p> <p>The Licensee must take corrective action to achieve compliance.</p>
<p><b>3. 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>27. (5)</b> 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,</p>
<p><b>Inspection Finding</b></p> <p>The Licensee failed to meet the legislative requirements related to infection, prevention and control specific to COVID-19 PPE requirements and screening of visitors, staff and residents.</p>
<p><b>Outcome</b></p> <p>The Licensee must take corrective action to achieve compliance.</p>
<p><b>4. The Licensee failed to comply with O. Reg. 166/11, s. 24; Emergency plan, general. The Licensee failed to comply with O. Reg. 166/11, s. 25; Emergency plan, retirement home with more than 10 residents.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><b>24. (4)</b> The licensee shall keep current all arrangements with community agencies, partner facilities and resources that will be involved in responding to an emergency.</p> <p><b>24. (5)</b> 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,          (i) the loss of essential services,          (ii) situations involving a missing resident,          (iii) medical emergencies,          (iv) violent outbursts;          (b) at least once every two years, conduct a planned evacuation of the retirement home;</p> <p><b>25. (3)</b> The licensee shall ensure that the emergency plan provides for the following:</p>

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 meet the legislative requirements related to emergency planning.

**Outcome**

The Licensee must take corrective action to achieve compliance.

**5. 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 demonstrate proper and safe storage of medication including narcotics.

**Outcome**

The licensee must take corrective action to achieve compliance.

**6. The Licensee failed to comply with O. Reg. 166/11, s. 55; Contents of records.**

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

- 55. (5)** A licensee of a retirement home shall keep records proving compliance with the Act and this Regulation in relation to,
- (c) the skills, qualifications and training of the staff who work in the home;

**Inspection Finding**

The licensee was unable to produce records for the training of staff

**Outcome**

The Licensee must take corrective action to achieve compliance




**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  RN	Date  August 13, 2021
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