

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

Inspection Information	
<b>Date of Inspection:</b> October 26, 2021	<b>Name of Inspector:</b> Gina Cook
<b>Inspection Type:</b> Routine Inspection	
<b>Licensee:</b> Zest Retirement Residence Inc / 391 Rymal Road, Hamilton, ON L9B 1V2 (the "Licensee")	
<b>Retirement Home:</b> St. Elizabeth Retirement Residence / 391 Rymal Road, Hamilton, ON L9B 1V2 (the "home")	
<b>Licence Number:</b> S0464	

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. 62; Contents of plan. 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. (4)</b> 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,</p> <ul style="list-style-type: none"> <li>(b) the planned care services for the resident that the licensee will provide, including, <ul style="list-style-type: none"> <li>(iii) clear directions to the licensee's staff who provide direct care to the resident;</li> </ul> </li> <li>(c) if the resident has consented to the inclusion of the information in the plan of care, the planned care services for the resident that external care providers will provide with the consent of the resident, to the extent that such information is available to the licensee after the licensee has taken all reasonable steps to obtain such information from the resident and the external care provider, including, <ul style="list-style-type: none"> <li>(i) the details of the services,</li> <li>(ii) the goals that the services are intended to achieve;</li> </ul> </li> </ul> <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> <ul style="list-style-type: none"> <li>(b) the resident's care needs change or the care services set out in the plan are no longer necessary;</li> </ul>
<p><b>Inspection Finding</b></p> <p>The Licensee failed to ensure that the resident care plans were updated in accordance with legislation or when a resident's care needs changed. In addition, the Licensee could not provide evidence that plans of</p>

care outlined the details of the care services and goals of those services provided by external care providers and clear directions to the Licensee's staff who provide care services.

**Outcome**

The Licensee submitted a plan to achieve compliance by January 15, 2022. RHRA to confirm compliance by inspection.

**2. The Licensee failed to comply with O. Reg. 166/11, s. 29; Administration of drugs or other substances.**

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

- 29.** If one of the care services that the licensee or the staff of a retirement home provide to a resident of the home is the administration of a drug or other substance, the licensee shall ensure that,
- (e) if the licensee or a staff member is involved in the administration of the drug or other substance at the home, that the licensee or staff member is trained in,
    - (i) ways of reducing the incidence of infectious disease, including maintaining proper hand hygiene,
    - (ii) the safe disposal of syringes and other sharps,
    - (iii) recognizing an adverse drug reaction and taking appropriate action;
  - (c) neither the licensee nor a staff member administers a drug to a resident in the home unless the licensee or the staff member has received training in the procedures applicable to the administration of the drug;

**Inspection Finding**

The Licensee could not provide evidence that staff administering medications were trained in all the areas required by the legislation.

**Outcome**

The Licensee submitted a plan to achieve compliance by November 30, 2021. 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):

- 24. (4)** The licensee shall keep current all arrangements with community agencies, partner facilities and resources that will be involved in responding to an emergency.
- 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,
    - (i) the loss of essential services,

(iv) violent outbursts;

**Inspection Finding**

On the day of the inspection the Licensee did not provide evidence that accommodation agreements with community partners in response to an emergency were current. In addition, the Licensee did not provide evidence that the emergency plans required by the legislation were tested annually.

**Outcome**

At the time of the inspection, the Licensee was not in compliance. The home has since taken corrective action to achieve compliance.

**4. 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**

On the day of the inspection the Licensee did not provide evidence that resources, supplies and equipment vital for the emergency response were set aside, readily available and tested.

**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 the RHA, S.O. 2010, c. 11, s. 65; On-going training. The Licensee failed to comply with O. Reg. 166/11, s. 14; Staff training.**

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

**65. (4)** The licensee shall ensure that the persons who are required to receive the training described in subsection (2) receive on-going training as described in that subsection at the times required by the regulations.

**14. (2)** For the purposes of subsection 65 (4) of the Act, the licensee shall ensure that the persons who are required to receive training under subsection 65 (2) of the Act receive the training at least annually.

**14. (5)** The licensee shall ensure that the persons who are required to receive the training described in subsection 65 (5) of the Act receive that training on an ongoing basis, namely at least annually after receiving the training described in subsection (4).

**Inspection Finding**

The Licensee could not provide evidence that all staff received annual training in the Resident's Bill of Rights, zero tolerance of abuse, whistle-blowing protection, use of personal assistance services and fire prevention and safety.

**Outcome**

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

Signature of Inspector  <i>G. Cook</i>	Date  November 23, 2021
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