

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

Inspection Information	
Date of Inspection: October 29, 2021	Name of Inspector: Lori Dupere
Inspection Type: Compliance Inspection	
Licensee: 1902347 Ontario Ltd / 1 Chippenham Lane, Markham, ON L6B 1L6 (the "Licensee")	
Retirement Home: Birdsilver Gardens Senior Support Centre / 16 Birdsilver Gardens, Scarborough, ON M1C 4M5 (the "home")	
Licence Number: T0389	

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>1. The Licensee failed to comply with O. Reg. 166/11, s. 27; Infection prevention and control program.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><u>27. (5)</u> 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>(0.a) any guidance, advice or recommendations given to retirement homes by the Chief Medical Officer of Health are followed in the retirement home;</p>
<p>Inspection Finding</p> <p>On the day of inspection the Licensee could not provide evidence of following the directives of the Chief Medical Officer of Health as required. Specifically the Licensee could not provide evidence of the following: COVID-19 screening; a visitor log; use of Ministry of Health COVID-19 screening tool; compliance with public health measures to reduce risk of COVID-19 transmission; use of medical-grade masks; use of eye protection when necessary; training relating to personal protective equipment; hand cleaning and disinfection of high-touch surfaces; following policy relating to essential and general visitors; a dedicated area for indoor visits; policies relating to COVID-19 outbreak preparedness; COVID-19 test kits; existence of COVID-19 policies relating to resident absences; a vaccination policy; and employee vaccination.</p>
<p>Outcome</p> <p>The Licensee must take corrective action to achieve compliance.</p>

**2. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 65; Training.
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):

65. (2) Every licensee of a retirement home shall ensure that no staff work in the home unless they have received training in,

(h) the emergency plan and the infection prevention and control program of the licensee for the home mentioned in subsection 60 (4);

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

On the day of inspection the Licensee was unable to show evidence of infection prevention and control training for staff.

Outcome

The Licensee must take corrective action to achieve compliance.

3. 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. (2) Every licensee of a retirement home shall ensure that bathrooms in common areas of the home that are used by residents are adequately stocked with supplies including toilet paper.

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

Inspection Finding

At the time of inspection the bathrooms were not adequately stocked. In addition, the Licensee could not provide documentation of the routines and methods used to clean the home.

Outcome

The Licensee must take corrective action to achieve compliance.

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. (3) The licensee shall keep a written record of the consultation required under subsection (2) that shall include a record of when the consultation took place, what was discussed and any recommendations that the local medical officer of health or designate made.

Inspection Finding

On the day of inspection the Licensee did not provide any evidence of a written record of consultation with the local medical officer of health.

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 <i>Lori Dupere</i>	Date December 3, 2021
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