

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

Inspection Information	
<b>Date of Inspection:</b> January 7, 2022	<b>Name of Inspector:</b> Pam Hand
<b>Inspection Type:</b> Routine Inspection	
<b>Licensee:</b> Paris Nursing Home Limited / 185 Grand River Street, Paris, ON N3L 2N2 (the "Licensee")	
<b>Retirement Home:</b> Penmarvian Retirement Home / 185 Grand River Street , Paris, ON N3L 2N2 (the "home")	
<b>Licence Number:</b> S0222	

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 O. Reg. 166/11, s. 22; Risk of falls.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><b>22. (4)</b> Every licensee of a retirement home shall keep a written record of all falls for which the licensee is required to ensure documentation under subsection (2) or (3) and that occur in each year, evaluate the risk of falls in the home at least annually and keep a written record of each evaluation.</p>
<p><b>Inspection Finding</b></p> <p>The Licensee was unable to demonstrate that there had been an evaluation of the risk of the falls that occurred in the home during the past year.</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>Inspection Finding</b></p>

The Licensee failed to ensure that residents were assessed and their plans of care revised every six months.

**Outcome**

The Licensee must take corrective action to achieve compliance.

- 3. 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. 14; Staff 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,

- (a) the Residents’ Bill of Rights;
- (b) the licensee’s policy mentioned in subsection 67 (4) to promote zero tolerance of abuse and neglect of residents;
- (c) the protection afforded for whistle-blowing described in section 115;
- (d) the licensee’s policy mentioned in subsection 68 (3) regarding the use of personal assistance services devices for residents;
- (f) fire prevention and safety;

**14. (1)** For the purposes of clause 65 (2) (j) of the Act, every licensee of a retirement home shall ensure that all staff who work in the home receive training in the procedure described in subsection 73 (1) of the Act for a person to complain to the licensee.

**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**

The Licensee failed to ensure that all new staff received orientation training prior to commencing work in 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. (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,

**Inspection Finding**

The entrance to the home was moved to the side door for the winter and visitors/staff have to walk through the entire main floor of the home past common areas and resident room hallways to get to the screening area by the front foyer. The Licensee failed to ensure that residents maintained social distancing while seated in the common areas of the home.

**Outcome**

The Licensee must take corrective action to achieve compliance.

**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. (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,
  - (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;

**Inspection Finding**

The Licensee failed to keep current the arrangements with community agencies, partners, and facilities and resources that would be involved with responding to an emergency. The licensee also failed to annually test the emergency plan with regard to missing residents, medical emergencies and violent outbursts. The Licensee could not demonstrate that the home had a planned evacuation during the past 2 years.

**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 	Date  January 28, 2022
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