

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

Inspection Information	
<b>Date of Inspection:</b> February 22, 2022	<b>Name of Inspector:</b> Angela Butler
<b>Inspection Type:</b> Routine Inspection	
<b>Licensee:</b> Oxford SC Inspirit London LP / 5420 North Service Road, Toronto, ON L7L 6C7 (the "Licensee")	
<b>Retirement Home:</b> Inspirit Residences / 81 Base Line Road, London, ON N6J 4Y5 (the "home")	
<b>Licence Number:</b> S0467	

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; Persons who approve plans of care.</b> <b>The Licensee failed to comply with O. Reg. 166/11, s. 43; Initial assessment of care needs.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><b>62. (9)</b> The licensee shall ensure that the following persons have approved the plan of care, including any revisions to it, and that a copy is provided to them:</p> <p><b>43. (1)</b> 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.</p>
<p><b>Inspection Finding</b></p> <p>The Licensee failed to complete residents' Initial Assessments within the timelines and to ensure the resident's Plan Of Care was approved and signed by the resident or SDM.</p>
<p><b>Outcome</b></p> <p>The Licensee submitted a plan to achieve compliance by March 30, 2022. RHRA to confirm compliance by inspection.</p>
<p><b>2. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 65; Training.</b> <b>The Licensee failed to comply with O. Reg. 166/11, s. 14; Staff training.</b> <b>The Licensee failed to comply with O. Reg. 166/11, s. 27; Infection prevention and control program.</b></p>

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

**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 staff was trained prior to their first shift in the complaints procedure, cross-contamination, emergency plan and IPAC, residents bill of rights, zero tolerance of abuse and neglect, whistleblowing, PASD, and fire prevention and safety.

**Outcome**

The Licensee submitted a plan to achieve compliance by March 30, 2022. RHRA to confirm compliance by inspection.

**3. 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,
- (0.a) any guidance, advice or recommendations given to retirement homes by the Chief Medical

<p>Officer of Health are followed in the retirement home;</p>
<p><b>Inspection Finding</b></p> <p>The Licensee failed to actively screen individuals for Covid 19 symptoms on entry to the home and to establish, implement and ensure compliance with Covid 19 vaccination policy.</p>
<p><b>Outcome</b></p> <p>The Licensee has advised it has taken corrective action to achieve compliance. RHRA to confirm compliance by inspection.</p>
<p><b>4. The Licensee failed to comply with O. Reg. 166/11, s. 24; Emergency plan, general.</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,</p> <ul style="list-style-type: none"> <li>(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, <ul style="list-style-type: none"> <li>(ii) situations involving a missing resident,</li> <li>(iii) medical emergencies,</li> <li>(iv) violent outbursts;</li> </ul> </li> </ul>
<p><b>Inspection Finding</b></p> <p>The Licensee failed to keep updated Memorandums of Understanding with community partners for an emergency and to complete Emergency Plan testing yearly for a missing resident, a medical emergency, and a violent outburst.</p>
<p><b>Outcome</b></p> <p>The Licensee submitted a plan to achieve compliance by March 30, 2022. RHRA to confirm compliance by inspection.</p>
<p><b>5. The Licensee failed to comply with O. Reg. 166/11, s. 11; Posted information.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><b>11. (1)</b> For the purposes of paragraph 4 of subsection 55 (2) of the Act, the following information is prescribed as information that must be posted in a retirement home under that subsection:</p> <ul style="list-style-type: none"> <li>6. A copy of the most recent final inspection report prepared by an inspector under section 77 of the Act, subject to section 114 of the Act.</li> </ul>

**Inspection Finding**

The Licensee failed to post the final report done by the inspectors in the previous 2 years.

**Outcome**

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

*Angela Butler RN*

Date

March 23, 2022