

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

Inspection Information	
Date of Inspection: March 15, 2022	Name of Inspector: Rachelle Harber
Inspection Type: Compliance Inspection	
Licensee: 2396745 Ontario Inc. / 258 Talbot Street, Aylmer, ON N5H 1H7 (the "Licensee")	
Retirement Home: Aylmer Retirement Residence / 258 Talbot Street, Aylmer, ON N5H 1H7 (the "home")	
Licence Number: S0435	

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 the RHA, S.O. 2010, c. 11, s. 62; Assessment of resident.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p>62. (6) The licensee shall ensure that the plan of care is based on an assessment of the resident and the needs and preferences of the resident.</p>
<p>Inspection Finding</p> <p>The inspector reviewed the assessment and plan of care for one resident was assessed to be at risk for falls, and found that the residents needs related to falls were not addressed on the plan of care. The Licensee failed to ensure that the residents plan of care was based on the residents needs related to falls.</p>
<p>Outcome</p> <p>The Licensee has demonstrated it has taken corrective action to achieve compliance. RHRA to confirm compliance by inspection.</p>
<p>2. 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>27. (5) The licensee of a retirement home shall ensure that,</p> <p style="padding-left: 40px;">(0.b) all reasonable steps are taken in the retirement home to follow,</p> <p style="padding-left: 80px;">(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>

Inspection Finding

The inspector reviewed the IPAC program as it relates to Directive #3 and found that the home did not show evidence of conducting IPAC audits. Further, the home’s visitor’s policy does not align fully with the requirements and even though the home verbally reported they had a staff contingency plan, they could not produce the plan. Not all staff has been trained on the visitor’s policy. The home failed to take all reasonable steps to follow Directive #3 respecting coronavirus.

Outcome

The Licensee has advised it has taken corrective action to achieve compliance. RHRA to confirm compliance by inspection.

- 3. 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.**

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,
- (ii) situations involving a missing resident,
- (iii) medical emergencies,
- (iv) violent outbursts;

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

The inspector reviewed the Licensee’s emergency plan and found that testing related to loss of essential services, missing resident, medical emergencies and violent outbursts have not been completed in at least the past two years. The Licensee reported a full evacuation of the home in 2021 but did not keep a written record of the evacuation. Further, the Licensee did not keep current arrangements with partners in response to an emergency. Furthermore, the Licensee was able to demonstrate that supplies and equipment are being set aside but could not show that the supplies are regularly tested to ensure they are in good working order. The Licensee failed to meet the requirements related to the emergency plan as listed.

Outcome


The Licensee submitted a plan to achieve compliance by April 29, 2022. 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  RN	Date April 8, 2022
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