

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

Inspection Information	
<b>Date of Inspection:</b> September 7, 2022	<b>Name of Inspector:</b> Angela Butler
<b>Inspection Type:</b> Routine Inspection	
<b>Licensee:</b> St. Andrew's Residence, Chatham / 99 Park Street, Chatham, ON N7M 3R5 (the "Licensee")	
<b>Retirement Home:</b> St. Andrew's Residence / 99 Park Street, Chatham, ON N7M 3R5 (the "home")	
<b>Licence Number:</b> S0196	

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; Plan of care.</b>  <b>The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 62; Contents of plan.</b>  <b>The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 62; Assessment of resident.</b>  <b>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 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. (1)</b> When a resident commences his or her residency in a retirement home, the licensee shall, within the prescribed times, ensure that the resident is assessed and that a plan of care is developed based on the assessment and in accordance with this section and the regulations.</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> <p style="padding-left: 40px;">(b) the planned care services for the resident that the licensee will provide, including,</p> <p style="padding-left: 80px;">(i) the details of the services,</p> <p style="padding-left: 80px;">(ii) the goals that the services are intended to achieve,</p> <p style="padding-left: 80px;">(iii) clear directions to the licensee's staff who provide direct care to the resident;</p> <p><b>62. (6)</b> 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><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>

1. The resident or the resident's substitute decision-maker.

**62. (12)** 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,  
(b) the resident's care needs change or the care services set out in the plan are no longer necessary;

**Inspection Finding**

The inspector reviewed a sample of six resident care files. For the first resident, there was no plan of care. For the second resident, the plan of care was not approved by the resident or their substitute decision maker. For the third resident, the plan of care was not revised and updated within the time frame specified. The fourth resident's plan of care did not include the planned care services, any goals, or specific directions to the staff who provide care services to the resident, the needs and preferences of the residents, was not approved by the resident or SDM and the plan of care was not updated as care needs changed. The other two plans of care met all the requirements. The Licensee failed to ensure that the resident's plans of care met the requirements.

**Outcome**

The Licensee submitted a plan to achieve compliance by October 26, 2022. RHRA to confirm compliance by following up with the Licensee or by inspection.

**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. 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;
- (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 inspector reviewed staff training records and found that 2 staff members had not been trained prior to orientation on the floor. The Licensee failed to ensure that staff was trained as required.

**Outcome**

The Licensee submitted a plan to achieve compliance by September 28, 2022. RHRA to confirm compliance by following up with the Licensee or 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,
  - (iii) medical emergencies,

**Inspection Finding**

The inspector reviewed the Licensee’s records of testing for their emergency plans and found that the testing for situations involving medical emergencies and signed agreements with community partners in case of an emergency were not completed within the last year. The Licensee failed to ensure that testing was done annually as required.

**Outcome**

The Licensee submitted a plan to achieve compliance by September 28, 2022. RHRA to confirm compliance by following up with the Licensee or 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>Angela Butler</i> RN	Date September 22, 2022
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