

FINAL INSPECTION REPORT Under the Retirement Homes Act, 2010

Inspection Information

Date of Inspection: September 27, 2022 | **Name of Inspector:** Douglas Crust

Inspection Type: Routine Inspection

Licensee: 2259976 Ontario Inc. / 1685 3rd Avenue, Owen Sound, ON N4K 4R3 (the "Licensee")

Retirement Home: Kelso Pines Retirement Home / 1685 3rd Avenue, Owen Sound, ON N4K 4R3 (the

"home")

Licence Number: S0105

Purpose of Inspection

The RHRA conducts routine inspections as set out in section 77(3) of the *Retirement Homes Act, 2010* (the "RHA").

NON-COMPLIANCE

1. The Licensee failed to comply with O. Reg. 166/11, s. 23; Behaviour management.

Specifically, the Licensee failed to comply with the following subsection(s):

- **23. (1)** Every licensee of a retirement home shall develop and implement a written behaviour management strategy that includes,
 - (a) techniques to prevent and address resident behaviours that pose a risk to the resident or others in the home;
 - (b) strategies for interventions to prevent and address resident behaviours that pose a risk to the resident or others in the home:

Inspection Finding

The inspector identified more than one incident of responsive behaviour by a resident of the Home. The resident's plan of care did not include any behaviour management strategy. The Licensee failed to implement their behaviour management strategy for a resident who repeatedly demonstrated responsive behaviours.

Outcome

The Licensee submitted a plan to achieve compliance by November 30, 2022. RHRA to confirm compliance by following up with the Licensee or by inspection.

2. The Licensee failed to comply with O. Reg. 166/11, s. 25; Emergency plan, retirement home with more than 10 residents.

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Specifically, the Licensee failed to comply with the following subsection(s):

- 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 testing record for the emergency kit of supplies, resources and equipment kept in the Home to respond to emergencies was inspected. Licensee was not able to demonstrate any evidence to confirm that regular testing of the kit had taken place. The Licensee failed to meet the requirement related to testing the emergency kit.

Outcome

The Licensee submitted a plan to achieve compliance by November 6, 2022. RHRA to confirm compliance by following up with the Licensee or by inspection.

3. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 62; Reassessment and revision.

Specifically, the Licensee failed to comply with the following subsection(s):

- 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 resident care files and found that the resident was not reassessed and the resident's plan of care was not updated when the resident's care needs changed. The Licensee failed to ensure that the resident's plans of care was reviewed and revised as required.

Outcome

The Licensee submitted a plan to achieve compliance by November 30, 2022. RHRA to confirm compliance by following up with the Licensee or by inspection.

4. The Licensee failed to comply with O. Reg. 166/11, s. 14; Staff training.

Specifically, the Licensee failed to comply with the following subsection(s):

14. (5) The licensee shall ensure that the persons who are required to receive the training described in subsection 65 (5) of the Act receive that training on an ongoing basis, namely at least annually after receiving the training described in subsection (4).

Inspection Finding

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The inspector reviewed a sample of staff training records and found that there was insufficient evidence to confirm that all staff performing medication administration had received the necessary training in 2021. The Licensee failed to ensure that all staff were trained as required.

Outcome

The Licensee submitted a plan to achieve compliance by November 27, 2022. RHRA to confirm compliance by following up with the Licensee or by inspection.

5. The Licensee failed to comply with O. Reg. 166/11, s. 21; Hazardous substances.

Specifically, the Licensee failed to comply with the following subsection(s):

21. (2) Every licensee of a retirement home shall ensure that all hazardous substances used by staff of the home or under their control are labelled properly and are kept inaccessible to residents at all times.

Inspection Finding

The inspector observed three separate instances, in different parts of the Home, where hazardous substances were left unattended and accessible to residents.

Outcome

The Licensee has advised it has taken corrective action to achieve compliance. 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	Date
Soft.	November 4, 2022

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