

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

Inspection Information	
Date of Inspection: October 13, 2022	Name of Inspector: Jennifer Sarkis
Inspection Type: Mandatory Reporting Inspection	
Licensee: 2220458 Ontario Inc. / 98 Talbot Street, Jarvis, ON N0A 1J0 (the "Licensee")	
Retirement Home: Leisure Living Retirement Home / 98 Talbot Street , Jarvis, ON N0A 1J0 (the "home")	
Licence Number: S0104	

Purpose of Inspection
The RHRA received a report under section 75(1) of the <i>Retirement Homes Act, 2010</i> (the "RHA").

NON-COMPLIANCE
<p>1. The Licensee failed to comply with O. Reg. 166/11, s. 20; Food preparation.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p>20. (4) The licensee shall ensure that whenever food is prepared in the retirement home, at least one person involved in preparing the food,</p> <p style="padding-left: 40px;">(a) holds a current certificate in food handler training from a local board of health or an agency of the board of health;</p>
<p>Inspection Finding</p> <p>A report was made to the RHRA regarding staffing and meal service. In response the report, the inspector interviewed residents, staff, and families, observed meal services and reviewed staff training records. Staff on the day of the inspection, had no Food Handler's certification on file. The Licensee failed to ensure all staff had their required certificates as required.</p>
<p>Outcome</p> <p>The Licensee submitted a plan to achieve compliance by December 15, 2022. RHRA to confirm compliance by following up with the Licensee or by inspection.</p>
<p>2. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 62; Persons who approve plans of care.</p> <p>The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 62; Reassessment and revision.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p>

62. (9) 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:

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

In response to above-mentioned report, the inspector reviewed resident’s medical files and found one plan of care to not be approved by the resident or their substitute decision maker. Additionally, two plans of care, were found to not be revised within 6 months. Furthermore, one plan of care was found to not be revised when the resident had a change in status related to their diet and care needs. The Licensee failed to ensure all plans of care were completed as required.

Outcome

The Licensee has demonstrated it has taken corrective action to achieve compliance.

- 3. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 67; Policy to promote zero tolerance.**
The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 75; Reporting certain matters to Registrar.

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

67. (4) Without in any way restricting the generality of the duties described in subsections (1) and (2), the licensee shall ensure that there is a written policy to promote zero tolerance of abuse and neglect of residents and shall ensure that the policy is complied with.

75. (1) A person who has reasonable grounds to suspect that any of the following has occurred or may occur shall immediately report the suspicion and the information upon which it is based to the Registrar:

2. Abuse of a resident by anyone or neglect of a resident by the licensee or the staff of the retirement home of the resident if it results in harm or a risk of harm to the resident.

Inspection Finding

During the inspection, the inspector learned of an issue unrelated to the purpose of the inspection. The inspector discovered a report of 2 residents missing money. Although an internal investigation was completed, necessary documentation from the incident was not readily produced to the inspector. Additionally, the home failed to report the two incidents to the RHRA. The Licensee failed to ensure they followed their Zero Tolerance to Abuse policy fully as it related to documentation, and reporting where 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 the RHA, S.O. 2010, c. 11, s. 65; Training.

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,

(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);

(g) the licensee’s emergency evacuation plan for the home mentioned in subsection 60 (3);

Inspection Finding

As part of the inspection, the inspector reviewed staff training records and found 1 staff had not fully completed their required training before the start of being hired. The Licensee failed to ensure all staff had completed their training where required.

Outcome

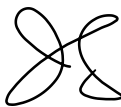
The Licensee submitted a plan to achieve compliance by December 3, 2022. RHRA to confirm compliance by following up with the Licensee or by inspection.

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		Date	November 24, 2022
------------------------	---	------	-------------------