

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

Inspection Information	
<b>Date of Inspection:</b> December 12, 2022	<b>Name of Inspector:</b> Michele Davidson
<b>Inspection Type:</b> Routine Inspection	
<b>Licensee:</b> Oxford SC William Lindsay LP / 5420 Service Rd, Burlington, ON L7L 6C7 (the "Licensee")	
<b>Retirement Home:</b> William Place / 140 William Street, Lindsay, ON K9V 5R4 (the "home")	
<b>Licence Number:</b> T0574	

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. 65; Training.</b>  <b>The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 65; On-going training.</b>  <b>The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 65; Additional training for direct care staff.</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>  <b>The Licensee failed to comply with O. Reg. 166/11, s. 55; Contents of records.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><b>65. (2)</b> Every licensee of a retirement home shall ensure that no staff work in the home unless they have received training in,</p> <ul style="list-style-type: none"> <li>(a) the Residents' Bill of Rights;</li> <li>(b) the licensee's policy mentioned in subsection 67 (4) to promote zero tolerance of abuse and neglect of residents;</li> <li>(c) the protection afforded for whistle-blowing described in section 115;</li> <li>(d) the licensee's policy mentioned in subsection 68 (3) regarding the use of personal assistance services devices for residents;</li> <li>(f) fire prevention and safety;</li> <li>(h) the emergency plan and the infection prevention and control program of the licensee for the home mentioned in subsection 60 (4);</li> </ul> <p><b>65. (4)</b> The licensee shall ensure that the persons who are required to receive the training described in subsection (2) receive on-going training as described in that subsection at the times required by the regulations.</p>

**65. (5)** The licensee shall ensure that all staff who provide care services to residents receive training in the following matters and at the times required by the regulations, as a condition of continuing to have contact with residents, in addition to the other training that they are required to receive under this section:

3. Behaviour management.

**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.

**14. (2)** For the purposes of subsection 65 (4) of the Act, the licensee shall ensure that the persons who are required to receive training under subsection 65 (2) of the Act receive the training at least annually.

**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).

**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.

**55. (5)** A licensee of a retirement home shall keep records proving compliance with the Act and this Regulation in relation to,

- (c) the skills, qualifications and training of the staff who work in the home;

**Inspection Finding**

The inspector requested a sample of staff training records. The Licensee failed to produce evidence of annual training in the areas indicated. The Licensee failed to ensure staff had received mandatory training prior to commencing work and annual training as required by the RHA.

**Outcome**

The Licensee submitted a plan to achieve compliance by January 30, 2023. 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. 22; Risk of falls.**

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

**22. (4)** Every licensee of a retirement home shall keep a written record of all falls for which the licensee is required to ensure documentation under subsection (2) or (3) and that occur in each year, evaluate the

risk of falls in the home at least annually and keep a written record of each evaluation.

**Inspection Finding**

The inspector reviewed the Licensee's falls records and found no evidence of an analysis of falls in the home. The Licensee did not conduct a yearly analysis of falls risks in the home as prescribed by the RHA.

**Outcome**

The Licensee submitted a plan to achieve compliance by December 31, 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.

**Inspection Finding**

The inspector reviewed the home's emergency response plan and found that the arrangements with agencies and partners that would be involved in responding to an emergency situation were outdated. The Licensee failed to keep current arrangements with emergency response partners.

**Outcome**

The Licensee submitted a plan to achieve compliance by January 30, 2023. 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. 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.a) any guidance, advice or recommendations given to retirement homes by the Chief Medical Officer of Health are followed in the retirement home;

**Inspection Finding**

A report was made to the RHRA regarding the use of personal protective equipment. During the inspection, the inspector observed two staff members wearing their masks improperly. The Licensee failed to ensure that the guidance of the Chief Medical Officer of Health was followed.

**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  <i>M. Davidson</i>	Date  January 9, 2023
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