

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

Inspection Information	
Date of Inspection: January 12, 2023	Name of Inspector: Ingrid Boiago RN
Inspection Type: Routine Inspection	
Licensee: 236 Catharine Inc. / PO Box 982, Barrie, ON L4M 5E1 (the "Licensee")	
Retirement Home: Residence on Catharine / 236 Catharine Street, Hamilton, ON L8L 4S6 (the "home")	
Licence Number: S0510	

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>1. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 65; Training. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 65; Additional training for direct care staff.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p>65. (2) 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"> (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; <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:</p> <ul style="list-style-type: none"> 3. Behaviour management. 1. Abuse recognition and prevention.
<p>Inspection Finding Inspector requested to review annual training records for all staff. At the time of inspection, staff were</p>

unable to retrieve these records. A demand to produce was issued but no training records were provided

Outcome

The Licensee must take corrective action to achieve compliance

- 2. The Licensee failed to comply with O. Reg. 166/11, s. 17; Cleanliness.
The Licensee failed to comply with O. Reg. 166/11, s. 18; Pest control.**

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

17. (1) Every licensee of a retirement home shall ensure that the common areas of the home, including the floors and any furnishings, equipment and linens in those areas, are clean and sanitary.

17. (3) The licensee shall document the routines and methods used to comply with subsections (1) and (2).

18. (3) The licensee shall ensure that timely action is taken to deal with pests in the retirement home.

Inspection Finding

During the inspection, inspector found common areas in the home which were dirty and unsanitary. No cleaning records could be produced at the time of inspection. In addition the home has an active and ongoing bed bug and lice infestation. Due to staffing demands, the laundry containing lice is not being laundered in a timely fashion. Pest control records show that the home has not been sprayed since November 2021 allowing the infestation to continue to spread. Staffing is not sufficient to allow for consistent cleaning of the home and laundry. The Licensee failed to ensure that the cleanliness of the common areas was maintained and failed to ensure preventative measures of an active bed bug and lice infestation.

Outcome

The Licensee must take corrective action to achieve compliance

- 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. (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

During the routine inspection, staff was unable to locate or access the emergency testing records. A Demand to Produce was issued however inspector only received the home's policy and not the training records. Moreover the staff was unable to show evidence that an emergency kit containing resources, supplies and equipment vital for an emergency response. is available in the home .

Outcome


The Licensee must take corrective action to achieve compliance

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 February 6, 2023
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