

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

Inspection Information	
Date of Inspection: March 20, 2023	Name of Inspector: Tania Buko
Inspection Type: Routine Inspection	
Licensee: Romko Residences LP / 2 St. Clair Avenue, Toronto, ON M4V 1L5 (the "Licensee")	
Retirement Home: Fergus Place / 164 Fergus Avenue, Kitchener, ON N2A 2H2 (the "home")	
Licence Number: T0598	

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 O. Reg. 166/11, s. 59; Procedure for complaints to licensee.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p>59. (1) Every licensee of a retirement home shall ensure that every written or verbal complaint made to the licensee or a staff member concerning the care of a resident or operation of the home is dealt with as follows:</p> <ul style="list-style-type: none"> 4. A response shall be made to the person who made the complaint, indicating, <ul style="list-style-type: none"> i. what the licensee has done to resolve the complaint, 2. The complaint shall be resolved if possible, and a response that complies with paragraph 4 provided within 10 business days of the receipt of the complaint. <p>59. (2) The licensee shall ensure that a written record is kept in the retirement home that includes,</p> <ul style="list-style-type: none"> (c) the type of action taken to resolve the complaint, including the date of the action, time frames for actions to be taken and any follow-up action required; (d) the final resolution, if any, of the complaint; (e) every date on which any response was provided to the complainant and a description of the response.
<p>Inspection Finding</p> <p>As part of the routine inspection, the Licensee's complaints log and complaints policy were reviewed, The Inspector found there was a lack of documented evidence to support the home fully complied with the Licensee's complaints policy in the handling of a complaint in relation to that the complaint was investigated, what actions were taken to resolve the complaints within the required timeframe, what the final resolutions were if any, and dates which any responses were provided to the complainant and a</p>

description of those responses. The Inspector confirmed that the Licensee failed to comply with the home's complaints policy.

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.

2. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 62; Assessment of resident.

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

62. (6) 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.

Inspection Finding

The Inspector reviewed a sample of resident care files and found that a resident's falls risk and their needs related to the risk were not documented in their plan of care.

Outcome

The Licensee submitted a plan to achieve compliance by April 3, 2023. 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. (5) The licensee shall,
(c) keep a written record of the testing of the emergency plan and planned evacuations and of any changes made to improve the emergency plan.

Inspection Finding

The Inspector reviewed the Licensee's records of testing for their emergency plans and found that the testing for responding to situations involving the loss of essential services and violent outbursts had been completed; however, scenarios and details of the testing were insufficiently documented.

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.

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

The Inspector interviewed staff and reviewed documentation and found the Licensee failed to follow all the Chief Medical Officer of Health and the Ministry of Health's recommendations outlined in the updated COVID-19 Guidance. Specifically, resident temperatures and symptoms screening were not being consistently completed on a daily basis as required.

Outcome

The Licensee submitted a plan to achieve compliance by April 3, 2023. 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>Tania Buko</i>	Date April 3, 2023
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