

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

| Inspection Information                             |  |
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| <b>Date of Inspection:</b> May 30, 2023            | <b>Name of Inspector:</b> Julie Hebert |
| <b>Inspection Type:</b> Routine Inspection         |  |
| <b>Licensee:</b> ACC-002444 - 2615412 Ontario Inc. |  |
| <b>Retirement Home:</b> Park Street Place          |  |
| <b>License Number:</b> S0447                       |  |

| About Routine Inspections  |
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| <p>A routine inspection, performed by an RHRA inspector, is a physical inspection of a licensed retirement home. During a routine inspection, an RHRA inspector will walk through the home, speak to residents and staff, observe care services and conditions in the home, and ensure the licensee's management and staff follow mandatory policies and practices designed to protect the welfare of residents.</p> <p>Following a routine inspection, the RHRA inspector prepares a draft inspection report which is sent to the licensee. The draft report may include instances where the licensee has failed to meet the standards of the <i>RHA</i>. If included, the licensee can respond to these instances and is strongly encouraged to inform RHRA of its plans to meet the standards of the <i>RHA</i>.</p> <p>Following the draft report, the RHRA inspector prepares this final inspection report, incorporating any response from the licensee with their plans to meet the standards of the <i>RHA</i>. The most recent final inspection report must be posted in the home in a visible and easily accessible location. All final inspection reports from the previous two years must also be made available in an easily accessible location in the home. The licensee must provide a copy of this report to the home's Residents' Council, if one exists.</p> <p>In addition to inspection reports, RHRA may provide information to a licensee to encourage improvements of their current practices.</p> <p>If the licensee repeatedly does not meet the required standards, RHRA may take further action.</p> |

| Focus Areas  |
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| <p><i>During a routine inspection, an inspector will focus primarily on a set number of areas which have been identified as related to the health, safety and wellbeing of resident, and may take various actions to determine whether the licensee is compliant with the RHA in relating to the areas. The areas listed in this section are ones which an inspector has identified as non-compliant.</i></p>  |
| Focus Area #1: Emergency Plan  |
| <p><b>RHRA Inspector Findings</b></p> <p>There is a requirement that resources, supplies, and equipment vital for the emergency response be set aside and readily available at the retirement home with regular testing of all such resources, supplies, and equipment to ensure that they are in working order. The inspector discovered that the home had not set aside all reasonable supplies nor were the supplies tested to ensure they were in working order. The Licensee failed to ensure that testing of the supplies was done annually as required.</p> |
| <p><b>Outcome</b></p> <p>The Licensee submitted a plan to achieve compliance by June 09, 2023. RHRA to confirm compliance by following up with the Licensee or by inspection.</p>  |

## Focus Area #2: Resident Record, Assessment, Plan of Care

### RHRA Inspector Findings

As part of a routine inspection, the inspector reviewed plans of care that had been cited during a responsive inspection conducted March 17th, as well as plans of care completed for residents who had moved into the home following that inspection. Part of the requirements in the legislation for plans of care, are that they be updated as care needs change or at least every 6 months, in addition they must include all care services and needs and must include clear directions to staff for the care services.

The inspector found that the plans of care for the new residents had been completed in compliance with the legislation. In addition, four of the plans of care that were cited during the previous inspection had now been revised and were compliant; however, two of the plans of care that were cited for content had not yet been revised and an additional fifteen had not been updated in the past 6 months.

The Licensee was not able to demonstrate that all plans of care had been revised and updated as required.

### Outcome

The Licensee submitted a plan to achieve compliance by June 30, 2023. RHRA to confirm compliance by following up with the Licensee or by inspection.

## Focus Area #3: Staff Training

### RHRA Inspector Findings

The inspector reviewed a sample of training records in the areas of zero tolerance of abuse, Bill of Rights, Infection control, Whistle Blower protection, PASDs, fire prevention and safety, complaints, behaviour management and care services. The inspector reviewed not only records for staff recently hired to determine compliance with orientation training, but also a sample of training records for those hired previously to determine compliance with annual training in these areas.

The inspector found that the orientation training for the three staff reviewed had not been completed in all areas at the time of the inspection. In addition, the inspector found that annual staff training did not include the home's zero tolerance of abuse policy, complaint policy and PASD policy.

The home had been previously cited in a March 2023 responsive inspection for staff not completing training on care services and this had now been completed.

The home was not able to determine that orientation and annual training was being completed in alignment with the regulations.

### Outcome

The Licensee submitted a plan to achieve compliance by June 14, 2023. RHRA to confirm compliance by following up with the Licensee or by inspection.

## Additional Findings

*During a routine inspection, an inspector may observe areas of non-compliance that are not related to the standard focus areas. In these cases, an inspector may cite the home for these contraventions at the time of this inspection. In addition, an inspector may follow-up on findings of non-compliance from previous inspections. Where the licensee is unable to demonstrate they have come into compliance or maintained compliance, an inspector may cite the home for these repeat contraventions at the time of this inspection.*

### Not Applicable

## Current Inspection – Citations

*Citations relating to the above Focus Areas or Additional Findings made during the current inspection are listed below.*

### The Licensee failed to comply with the RHA s. 14. (1); Staff training

#### s. 14. (1); Staff training

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.

### The Licensee failed to comply with the RHA s. 14. (2); Staff training

#### s. 14. (2); Staff training

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.

**The Licensee failed to comply with the RHA s. 25. (3); Emergency plan, retirement home with more than 10 residents**

**s. 25. (3); Emergency plan, retirement home with more than 10 residents**

25. (3) The licensee shall ensure that the emergency plan provides for the following:

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

**s. 25. (3), para. 3**

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.

**The Licensee failed to comply with the RHA s. 27. (9); Infection prevention and control program**

**s. 27. (9); Infection prevention and control program**

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,

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

**s. 27. (9), (a)**

(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;

**s. 27. (9), (b)**

(b) the need for and process of reporting, providing surveillance of and documenting incidents of infectious illness.

**The Licensee failed to comply with the RHA s. 62. (12); Reassessment and revision**

**s. 62. (12); Reassessment and revision**

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,

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

**s. 62. (12), (b)**

(b) the resident's care needs change or the care services set out in the plan are no longer necessary;

**The Licensee failed to comply with the RHA s. 62. (4); Contents of plan**

**s. 62. (4); Contents of plan**

62. (4) The licensee of a retirement home shall ensure that there is a written plan of care for each resident of the home that sets out,

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

**s. 62. (4), (a)**

(a) the care services that are part of a package of care services that the resident is entitled to receive under the resident's agreement with the licensee, whether or not the resident receives the services;

**s. 62. (4), (b)**

(b) the planned care services for the resident that the licensee will provide, including,

**s. 62. (4), (b), 3.**

(iii) clear directions to the licensee's staff who provide direct care to the resident;

**s. 62. (4), (c)**

(c) if the resident has consented to the inclusion of the information in the plan of care, the planned care services for the resident that external care providers will provide with the consent of the resident, to the extent that such information is available to the licensee after the licensee has taken all reasonable steps to obtain such information from the resident and the external care provider, including,

**s. 62. (4), (c), 1.**

(i) the details of the services,

**The Licensee failed to comply with the RHA s. 62. (6); Assessment of resident**

**s. 62. (6); Assessment of resident**

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.

**The Licensee failed to comply with the RHA s. 65. (2); Training**

**s. 65. (2); Training**

65. (2) Every licensee of a retirement home shall ensure that no staff work in the home unless they have received training in,

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

**s. 65. (2), (a)**

(a) the Residents' Bill of Rights;

**s. 65. (2), (b)**

(b) the licensee's policy mentioned in subsection 67 (4) to promote zero tolerance of abuse and neglect of residents;

**s. 65. (2), (c)**

(c) the protection afforded for whistle-blowing described in section 115;

**s. 65. (2), (d)**

(d) the licensee's policy mentioned in subsection 68 (3) regarding the use of personal assistance services devices for residents;

**s. 65. (2), (f)**

(f) fire prevention and safety;

**s. 65. (2), (g)**

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

**s. 65. (2), (h)**

(h) the emergency plan and the infection prevention and control program of the licensee for the home mentioned in subsection 60 (4);

**The Licensee failed to comply with the RHA s. 65. (4); On-going training**

**s. 65. (4); On-going training**

65. (4) 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.

**The Licensee failed to comply with the RHA s. 65. (5); Additional training for direct care staff**

**s. 65. (5); Additional training for direct care staff**

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:

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

**s. 65. (5), para. 3**

3. Behaviour management.

**Closed Citations**

*During an inspection, an inspector may follow-up with areas of non-compliance cited during a previous inspection, or verify compliance with areas initially cited during the current inspection. The*

*inspector has verified that at the time of this report, the licensee was able to demonstrate that the following areas have come into compliance.*

**Ontario Regulation 166/11:**

**s. 14. (3); Staff training**

14. (3) For the purposes of paragraph 5 of subsection 65 (5) of the Act, every licensee of a retirement home shall ensure that every staff member who provides a care service to a resident has received or receives training in,

**s. 14. (3), (b)**

(b) each care service offered in the home so that the staff member is able to understand the general nature of each of those services, the standards applicable under the Act to each of those services and the aspects of each of those services that may be relevant to the staff member's own duties in the home.

**NOTICE**

The Final Inspection Report is being provided to the Licensee, the Registrar of 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>.

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| Signature of Inspector<br><br><i>Julie Hebert</i> | Date<br><br>June 5, 2023 |
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