

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

Inspection Information	
Date of Inspection: 5/24/2023	Name of Inspector: Tania Buko
Inspection Type: Routine Inspection	
Licensee: ACC-002539 - Gardens of Ingersoll Inc.	
Retirement Home: Gardens of Ingersoll	
License Number: S0554	

**About Routine Inspections**

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.

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 *RHA*. 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 *RHA*.

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 *RHA*. 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.

In addition to inspection reports, RHRA may provide information to a licensee to encourage improvements of their current practices.

If the licensee repeatedly does not meet the required standards, RHRA may take further action.

**Focus Areas**  
*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.*

**Focus Area #1: Complaints**

**RHRA Inspector Findings**  
 As part of the routine inspection, the Inspector reviewed the Licensee's complaints log and complaints policy, 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 few reviewed complaints. Specifically, that responses were provided to the complainants at all or within 10 business days, and for a complaint that could not be investigated and resolved within 10 business days, that an acknowledgment of receipt of the complaint be provided. Further, there was insufficient evidence to show that all complaints were resolved if possible; what the final resolution was for each of the complaints; dates that responses were provided to the complainants and a description of the responses; and the responses made in turn by the complainants. The Inspector confirmed the Licensee failed to fully comply with their 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.

## Focus Area #2: Emergency Plan

### RHRA Inspector Findings

The Inspector reviewed the Emergency Plan and interviewed staff and found that the Licensee was unable to demonstrate that there was a written Endemic and Pandemic plan that is required as part of the home's Emergency Plan.

### Outcome

At the time of the inspection, the Licensee was not in compliance. The home has since taken corrective action to achieve compliance.

## Focus Area #3: Resident Record, Assessment, Plan of Care

### RHRA Inspector Findings

The Inspector reviewed a sample of resident care files and interviewed staff and found that none of them were approved by the residents or their substitute decision-makers, and that the majority of the reviewed plans of care were not approved by a member of the College of Physicians and Surgeons of Ontario or the College of Nurses of Ontario or someone working under their supervision. In addition, the two different assessment forms used by the home do not consider risk of harm to self and to others, and one does not consider the presence of infectious diseases. The Licensee failed to ensure the plans of care were approved and the assessments considered all the required areas.

### Outcome

At the time of the inspection, the Licensee was not in compliance. The home has since taken corrective action to achieve compliance.

## Focus Area #4: Staff Training

### RHRA Inspector Findings

The Inspector reviewed a sample of new staff training records and interviewed staff and found that none of the staff had been trained on the Licensee's policies of PASDs and Complaints. The Licensee failed to ensure that staff were trained as required.

### Outcome

At the time of the inspection, the Licensee was not in compliance. The home has since taken corrective action to achieve compliance.

## 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. 59. (1); Procedure for complaints to licensee

#### s. 59. (1); Procedure for complaints to licensee

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:

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

##### s. 59. (1), para. 2

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.

**s. 59. (1), para. 3**

3. For those complaints that cannot be investigated and resolved within 10 business days, an acknowledgement of receipt of the complaint shall be provided within 10 business days of receipt of the complaint, including the date by which the complainant can reasonably expect a resolution, and a follow-up response that complies with paragraph 4 shall be provided as soon as possible in the circumstances.

**s. 59. (1), para. 4**

4. A response shall be made to the person who made the complaint, indicating,

**s. 59. (1), para. 4, 1.**

i. what the licensee has done to resolve the complaint,

**The Licensee failed to comply with the RHA s. 59. (2); Procedure for complaints to licensee**

**s. 59. (2); Procedure for complaints to licensee**

59. (2) The licensee shall ensure that a written record is kept in the retirement home that includes,

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

**s. 59. (2), (d)**

(d) the final resolution, if any, of the complaint;

**s. 59. (2), (e)**

(e) every date on which any response was provided to the complainant and a description of the response;

**s. 59. (2), (f)**

(f) any response made in turn by the complainant.

**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.*

**Retirement Homes Act, 2010:**

**s. 62. (9); Persons who approve plans of care**

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:

**s. 62. (9), para. 1**

1. The resident or the resident's substitute decision-maker.

**s. 62. (9); Persons who approve plans of care**

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:

**s. 62. (9), para. 2**

2. The prescribed person if there is a person prescribed for the purpose of this paragraph.

**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,

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

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

**Ontario Regulation 166/11:**

**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.

**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:

**s. 25. (3), para. 1**

1. Dealing with,

**s. 25. (3), para. 1, 5.1**

v.1 epidemics and pandemics,

**s. 44. (2); Full assessment of care needs**

44. (2) The full assessment mentioned in subsection (1) shall consider the following matters with respect to the resident:

**s. 44. (2), para. 7**

7. The matters listed in subsection 43 (2).

**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>.

Signature of Inspector	<i>Tania Buko</i>	Date	June 6, 2023
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