

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

Inspection Information	
Date of Inspection: May 26, 2023	Name of Inspector: Tania Buko
Inspection Type: Routine Inspection	
Licensee: ACC-003168 - Parkwood Mennonite Home Inc.	
Retirement Home: Parkwood Suites	
License Number: T0042	

About Routine Inspections
<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
<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: Behaviour Management and Dementia Care**

RHRA Inspector Findings
<p>As part of the routine inspection, the Inspector reviewed a sample of resident care files, the Licensee's policies and interviewed staff and found that a resident with dementia, has wandering, exit seeking and/or elopement behaviours that posed a risk to themselves. The Inspector found that the Licensee was unable to adequately demonstrate the home fully followed their behaviour management policy as there was a lack of sufficient evidence to support that interventions to address and prevent the behaviours were developed and implemented for the resident including strategies for on going monitoring that are all to be documented in the resident's plan of care, as per the Licensee's behaviour management policy. Further, the Licensee was unable to demonstrate that heightened monitoring of the resident was put in place following a recent elopement from the home and that heightened monitoring was consistently completed on an hourly basis following a previous incident of elopement.</p>

<p><b>Outcome</b> The Licensee submitted a plan to achieve compliance by Friday June 30, 2023. RHRA to confirm compliance by following up with the Licensee or by inspection.</p>
<p><b>Focus Area #2: Complaints</b></p>
<p><b>RHRA Inspector Findings</b> As part of the routine inspection, a Licensee's complaints log and records are reviewed; however, the Licensee was unable to produce a written record of complaints as the Licensee has not kept or documented managed complaints since 2021.</p>
<p><b>Outcome</b> The Licensee submitted a plan to achieve compliance by Friday July 07, 2023. RHRA to confirm compliance by following up with the Licensee or by inspection.</p>
<p><b>Focus Area #3: Emergency Plan</b></p>
<p><b>RHRA Inspector Findings</b> The Inspector interviewed staff and reviewed the Licensee's records of testing for their Emergency Plans and found that although the home completed all the required testing, it was not within the required time period of every 12 months for situations involving the loss of essential services and missing residents. The Licensee also failed to ensure the last full evacuation was completed within the time period of every 24 months.</p>
<p><b>Outcome</b> The Licensee submitted a plan to achieve compliance by Friday July 07, 2023. RHRA to confirm compliance by following up with the Licensee or by inspection.</p>
<p><b>Focus Area #4: Resident Record, Assessment, Plan of Care</b></p>
<p><b>RHRA Inspector Findings</b> The Inspector reviewed a sample of resident's care files and interviewed staff and found that the majority of the plans of care were not approved by the residents or their substitute decision-makers, and there was no evidence that an interdisciplinary care conference was held for resident whose care needs included dementia care.</p>
<p><b>Outcome</b> The Licensee submitted a plan to achieve compliance by Friday June 30, 2023. RHRA to confirm compliance by following up with the Licensee or by inspection.</p>
<p><b>Focus Area #5: Staff Training</b></p>
<p><b>RHRA Inspector Findings</b> The inspector reviewed a sample of staff training records and interviewed staff and found that a staff member who administers medications to the residents in the home had not completed annual training in the Licensee's procedures related to medication administration, as required.</p>
<p><b>Outcome</b> The Licensee submitted a plan to achieve compliance by Friday June 30, 2023. RHRA to confirm compliance by following up with the Licensee or by inspection.</p>

<p><b>Additional Findings</b> <i>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.</i></p>
<p><b>Not Applicable</b></p>

<p><b>Current Inspection – Citations</b></p>
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*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. (5); Staff training**

**s. 14. (5); Staff training**

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).

**The Licensee failed to comply with the RHA s. 23. (1); Behaviour management**

**s. 23. (1); Behaviour management**

23. (1) Every licensee of a retirement home shall develop and implement a written behaviour management strategy that includes,

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

**s. 23. (1), (b)**

(b) strategies for interventions to prevent and address resident behaviours that pose a risk to the resident or others in the home;

**s. 23. (1), (c)**

(c) strategies for monitoring residents that have demonstrated behaviours that pose a risk to the resident or others in the home;

**The Licensee failed to comply with the RHA s. 24. (5); Emergency plan, general**

**s. 24. (5); Emergency plan, general**

24. (5) The licensee shall,

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

**s. 24. (5), (a)**

(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,

**s. 24. (5), (a), 1.**

(i) the loss of essential services,

**s. 24. (5), (a)**

(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,

**s. 24. (5), (a), 2.**

(ii) situations involving a missing resident,

**s. 24. (5), (b)**

(b) at least once every two years, conduct a planned evacuation of the retirement home;

**The Licensee failed to comply with the RHA s. 47. (5); Development of plan of care**

**s. 47. (5); Development of plan of care**

47. (5) If an assessment of a resident indicates that the resident's care needs may include dementia care, skin and wound care or the use of a personal assistance services device, the licensee shall ensure that an interdisciplinary care conference is held as part of the development of the resident's plan of care and that the resident's plan of care takes into account the results of the care conference.

**The Licensee failed to comply with the RHA s. 56. (3); Format and retention of records**

**s. 56. (3); Format and retention of records**

56. (3) The licensee shall ensure that each of the records is kept in a readable and useable format that allows a complete copy of the record to be readily produced.

**The Licensee failed to comply with the RHA s. 62. (9); Persons who approve plans of care**

**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:

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

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

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

**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. (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,

**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;

**Ontario Regulation 166/11:**

**s. 23. (1); Behaviour management**

23. (1) Every licensee of a retirement home shall develop and implement a written behaviour management strategy that includes,

**s. 23. (1), (a)**

(a) techniques to prevent and address resident behaviours that pose a risk to the resident or others 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>.

Signature of Inspector  <i>Tania Buko</i>	Date  June 16, 2023
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