

FINAL INSPECTION REPORT
Under the Retirement Homes Act, 2010

Inspection Information

Date of Inspection: July 4, 2023

Name of Inspector: Angela Newman

Inspection Type: Routine Inspection

Licensee: ACC-002551 - NLG LP One General Partner Inc.

Retirement Home: Harbour Hill Retirement Community

License Number: S0503

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 a part of the routine inspection, the inspector reviewed the home's complaint log and noted the home failed to complete the required quarterly trend analysis since 2021. The Licensee failed to ensure their written records of complaints included all the required elements.

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 #2: Emergency Plan

RHRA Inspector Findings

As a part of the routine inspection, the inspector reviewed the home's emergency plan and noted several items had not been completed annually as required. Specifically, the last annual review of the emergency plan was in 2021 and partner agreements for assistance with transportation and accommodations during an emergency evacuation was last updated in 2022. The licensee failed to ensure certain components of the emergency plan were updated annually as required by legislation.

Outcome

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

Focus Area #3: Resident Record, Assessment, Plan of Care**RHRA Inspector Findings**

During the routine inspection, a sample of resident care plans were reviewed. One care plan was not approved by the resident or their substitute decision maker. Furthermore, another care plan was not updated when a resident's care need regarding medication administration had changed.

Outcome

The Licensee submitted a plan to achieve compliance by July 31, 2023. RHRA to confirm compliance by following up with the Licensee or by inspection.

Focus Area #4: Staff Training**RHRA Inspector Findings**

As part of the routine inspection, a sample of staff training records were reviewed for annual training requirements. This review found that two care staff had not received annual training in the care services offered by the home which was an area cited on a previous inspection at the home. The Licensee failed to ensure that staff were trained as required.

Outcome

The Licensee submitted a plan to achieve compliance by August 15, 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. (3); Staff training**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,

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

The Licensee failed to comply with the RHA s. 24. (4); Emergency plan, general**s. 24. (4): Emergency plan, general**

24. (4) The licensee shall keep current all arrangements with community agencies, partner facilities and resources that will be involved in responding to an emergency.

The Licensee failed to comply with the RHA s. 25. (5); Emergency plan, retirement home with more than 10 residents

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25. (5) The licensee shall ensure that the emergency plan for the retirement home is evaluated and updated at least annually and that the updating includes contact information for the relevant community agencies, partner facilities and resources that will be involved in responding to an emergency.

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. (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. (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,

Ontario Regulation 166/11:

s. 59. (3); Procedure for complaints to licensee

59. (3) The licensee shall ensure that,

s. 59. (3), (a)

(a) the written record is reviewed and analyzed for trends at least quarterly;

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>Angela Newman</i>	Date July 18, 2023
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