

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

Inspection Information	
Date of Inspection: July 20, 2023	Name of Inspector: Angela Newman
Inspection Type: Routine Inspection	
Licensee: ACC-002673 - CVH (NO. 8) LP	
Retirement Home: Errinrung Retirement Community	
License Number: S0414	

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: Emergency Plan
<p><b>RHRA Inspector Findings</b> As part of the routine inspection, the inspector reviewed the Licensee’s records of testing for their emergency plans and found that the testing for situations involving the loss of essential services, violent outburst, medical emergencies, and missing resident had not been completed annually as required. Further, the Licensee failed to conduct regular testing of the resources, supplies, and equipment set aside for an emergency response. The Licensee failed to ensure that testing was done annually as required.</p>
<p><b>Outcome</b> The Licensee has demonstrated it has taken corrective action to achieve compliance.</p>

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

### RHRA Inspector Findings

During the routine inspection, the inspector reviewed the assessments and care plans for a sample of residents. The inspector found two residents' assessments that were missing two prescribed areas which was an area cited on a previous inspection. Three residents or their substitute decision makers had not been offered copies of the care plan. One care plan lacked resident consent for an assessment. Two residents' care plans had not been updated in response to a change in needs related to falls and behaviour management. Several residents had not been reassessed and care plans reviewed at least every six months. Finally, several care plans lacked details of the care services provided and clear directions to the staff that provide direct care to residents which was an area cited on a previous inspection.

### Outcome

The Licensee has demonstrated it has taken corrective action to achieve compliance.

## Focus Area #3: Staff Training

### RHRA Inspector Findings

As a part of the routine inspection, the inspector reviewed a sample of staff annual training records. The inspector found that two staff had not completed training on personal assistance services devices and one staff member had not received training on injury prevention, zero tolerance of abuse, whistle blower protection, resident bill of rights, fire prevention and safety, emergency plan, and evacuation. Finally, there were no records demonstrating staff were trained on the care services offered by the home. The Licensee failed to ensure that staff were trained as required.

### 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.

## 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. (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. 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. 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);

**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,

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

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

**s. 62. (2); Assessment only with consent, etc.**

62. (2) Nothing in this section authorizes a licensee to assess or to reassess a resident without the resident's consent.

**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), 1.**

(i) the details of the services,

**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;

**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.

**Ontario Regulation 166/11:**

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

24. (5) The licensee shall,

**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); Emergency plan, general**

24. (5) The licensee shall,

**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); Emergency plan, general**

24. (5) The licensee shall,

**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), 3.**

(iii) medical emergencies,

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

24. (5) The licensee shall,

**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), 4.**

(iv) violent outbursts;

**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. 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.

**s. 43. (2); Initial assessment of care needs**

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

**s. 43. (2), para. 7**

7. Risk of harm to self and to others.

**s. 43. (2); Initial assessment of care needs**

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

**s. 43. (2), para. 9**

9. Needs related to drugs and other substances.

## 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  
*Angela Newman*

Date  
August 8, 2023