

FINAL INSPECTION REPORT

Under the Retirement Homes Act, 2010

Inspection Information	
Date of Inspection: 6/29/2023	Name of Inspector: Shara Bundy
Inspection Type: Routine Inspection	
Licensee: ACC-003065 - Schlegel Villages Inc.	
Retirement Home: The Village of Erin Meadows	
License Number: T0550	

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: Emergency Plan

RHRA Inspector Findings

The inspector reviewed the Licensee's records of testing for their emergency plans and found that the home was unable to provide evidence of testing for situations involving a medical emergency. The Licensee failed to ensure that testing was done annually 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.

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

RHRA Inspector Findings

The inspector reviewed a sample of resident care files and found that the Licensee failed to ensure that the plan of care is based on the needs and preferences of a resident who is experiencing falls. Additionally, the Licensee failed to ensure that a resident is reassessed and the plan of care is reviewed and revised every six months and that the plan of care, including any revisions to it have been approved the resident or the resident's substitute decision maker and a member of the College of Physicians and Surgeons of Ontario or the College of Nurses of Ontario. Further the Licensee failed to ensure that, if a licensee or a staff member of a retirement home has reason to believe that a 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 the full assessment is conducted by a member of a College. The Licensee failed to ensure that assessments and plans of care are completed and approved as required.

Outcome

The Licensee submitted a plan to achieve compliance by Wed Sep 20 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.

Additional Finding#1: Food Preparation and Provision

RHRA Inspector Findings

The inspector reviewed the health files for a number of residents, as well as spoke with staff and found that the Licensee does not communicate to the staff serving the residents' meals and snacks if a resident is diabetic and therefore should be provided with appropriate food options so that the resident can make informed decisions. The Licensee failed to ensure that food service workers and staff assisting the resident are aware of the resident's diet, special needs and preferences;

Outcome

The Licensee submitted a plan to achieve compliance by Tue Sep 12 2023. RHRA to confirm compliance by following up with the Licensee or by inspection.

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. 40.; Provision of a meal

s. 40.; Provision of a meal

40. If one of the care services that the licensee or the staff of a retirement home provide to a resident of the home is the provision of a meal, the licensee shall ensure that,

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

<u>s. 40. (i)</u>

(i) food service workers and staff assisting the resident are aware of the resident's diet, special needs and preferences;

The Licensee failed to comply with the RHA s. 44. (3); Full assessment of care needs

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44. (3) If a licensee or a staff member of a retirement home has reason to believe that a 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 the full assessment is,

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

<u>s. 44. (3), (a)</u>

(a) conducted by a member of a College, as defined in the Regulated Health Professions Act, 1991;

The Licensee failed to comply with the RHA s. 48. (1); Approval of the plan of care

s. 48. (1); Approval of the plan of care

48. (1) For the purposes of paragraph 2 of subsection 62 (9) of the Act and subject to subsection (2), the licensee shall ensure that a resident's plan of care is approved by,

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

<u>s. 48. (1), (a)</u>

(a) a member of the College of Physicians and Surgeons of Ontario or the College of Nurses of Ontario;

The Licensee failed to comply with the RHA s. 48. (2); Approval of the plan of care

s. 48. (2); Approval of the plan of care

48. (2) For the purposes of paragraph 2 of subsection 62 (9) of the Act, 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 the resident's plan of care is approved by a member of the College of Physicians and Surgeons of Ontario or the College of Nurses of Ontario.

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,

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. 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):

<u>s. 62. (9), para. 1</u>

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.

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), 3. (iii) medical emergencies,

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 <u>http://www.rhra.ca/en/retirement-home-database</u>.

Signature of Inspector	Date
Shara Bundy	September 8, 2023