

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

Inspection Information	
Date of Inspection: 7/4/2023	Name of Inspector: Shara Bundy
Inspection Type: Routine Inspection	
Licensee: ACC-002357 - Armisaelcare Limited	
Retirement Home: Christie Oaks Care Home	
License Number: T0507	

**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: Infection Prevention and Control**

**RHRA Inspector Findings**

The inspector found that the home's supply of Alcohol Based Hand Sanitizer was expired. The Licensee failed to ensure that waterless, alcohol-based hand sanitizer or another form of hand sanitation that provides equivalent protection against infectious disease transmission is available for use by residents and staff in communal resident areas and in staff work areas 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.

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

**RHRA Inspector Findings**

The inspector reviewed the health files for the 3 residents in the home and found that for 2 of the residents, the home had not reassessed or reviewed/ revised the plan of care in the last six months, and had not reassessed and updated the plan of care for a resident to include the risk of falls and strategies to prevent falls as required. The assessments and plan of care for 1 resident were not completed within the required timelines and were not completed or approved by a registered member of a College, as required. Additionally, the plans of care for all residents do not include details of the service provided, the intended goals of the services and clear directions to staff providing direct care to the residents. Furthermore, the plans of care do not include information that is necessary to allow the licensee's staff to understand the resident's needs and preferences, including cultural, spiritual and religious preferences and customary routines, as required. The Licensee failed to ensure that assessments and plans of care are completed as required.

**Outcome**

The Licensee must take corrective action to achieve compliance.

**Focus Area #3: Resident Rights****RHRA Inspector Findings**

In review of the residents' health files, the inspector found that the home failed to provide evidence of a signed Residency Agreement/CHIP and failed to provide updated agreements to residents whose agreements contained outdated information or lacked the required information, as required. The Licensee failed to enter into a written agreement with a resident of the home before the resident commences residency in the home and failed to ensure that any material revisions to the package of information are provided to any person who has received the original package and who is still a resident of the home or substitute decision-maker of a resident of the home.

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

The inspector reviewed the staff training records and found that, the home was unable to provide evidence that the annual staff training included training in the area of Mental health issues, including caring for persons with dementia. The Licensee failed to ensure that staff receive the required training annually.

**Outcome**

The Licensee submitted a plan to achieve compliance by Fri Sep 08 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. 27. (7); Infection prevention and control program****s. 27. (7); Infection prevention and control program**

27. (7) The licensee of a retirement home shall ensure that waterless, alcohol-based hand sanitizer or another form of hand sanitation that provides equivalent protection against infectious disease transmission is available for use by residents and staff in communal resident areas and in staff work areas.

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

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):**

**s. 44. (3), (a)**

(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. 47. (4); Development of plan of care**

**s. 47. (4); Development of plan of care**

47. (4) Subject to subsections (5) and (6), a plan of care for a resident is complete if the plan,

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

**s. 47. (4), (b)**

(b) sets out,

**s. 47. (4), (b), 1.**

(i) any information that is necessary to allow the licensee's staff to understand the resident's needs and preferences, including cultural, spiritual and religious preferences and customary routines,

**s. 47. (4), (b)**

(b) sets out,

**s. 47. (4), (b), 2.**

(ii) the names and contact information of the resident's substitute decision-makers, if any,

**The Licensee failed to comply with the RHA s. 53. (1); Agreement required**

**s. 53. (1); Agreement required**

53. (1) The licensee of a retirement home shall enter into a written agreement with every resident of the home before the resident commences residency in the home.

**The Licensee failed to comply with the RHA s. 54. (1); Information for residents**

**s. 54. (1); Information for residents**

54. (1) Every licensee of a retirement home shall ensure that,

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

**s. 54. (1), (d)**

(d) any material revisions to the package of information are provided to any person who has received the original package and who is still a resident of the home or substitute decision-maker of a resident of the home.

**The Licensee failed to comply with the RHA s. 62. (1); Plan of care**

**s. 62. (1); Plan of care**

62. (1) When a resident commences his or her residency in a retirement home, the licensee shall, within the prescribed times, ensure that the resident is assessed and that a plan of care is developed based on the assessment and in accordance with this section and the regulations.

**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,

**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. (4); Contents of plan**

**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,

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

**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), (b)**

(b) the planned care services for the resident that the licensee will provide, including,

**s. 62. (4), (b), 2.**

(ii) the goals that the services are intended to achieve,

**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. (4), (c)**

(c) if the resident has consented to the inclusion of the information in the plan of care, the planned care services for the resident that external care providers will provide with the consent of the resident, to the extent that such information is available to the licensee after the licensee has taken all reasonable steps to obtain such information from the resident and the external care provider, including,

**s. 62. (4), (c), 2.**

(ii) the goals that the services are intended to achieve;

**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. 2**

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

**The Licensee failed to comply with the RHA s. 65. (5); Additional training for direct care staff**

**s. 65. (5); Additional training for direct care staff**

65. (5) The licensee shall ensure that all staff who provide care services to residents receive training in the following matters and at the times required by the regulations, as a condition of continuing to have contact with residents, in addition to the other training that they are required to receive under this section:

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

**s. 65. (5), para. 2**

2. Mental health issues, including caring for persons with dementia.

**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.*

**Not Applicable**

**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

*Shara Bundy*

Date

September 13, 2023