

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

**Inspection Information**

**Date of Inspection: November 01, 2023**

**Name of Inspector: Mark Dennis**

**Inspection Type: Routine Inspection**

**Licensee: ACC-002832 - Castle Peak Fieldgate Living Inc.**

**Retirement Home: Castle Peak Retirement Residence**

**License Number: N0567**

**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 a final inspection report, incorporating any response from the licensee with their plans to meet the standards of the *RHA*.

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**

During the inspection the Inspector reviewed annual testing of the home emergency plan. There is a requirement that annual testing of the plan must be completed for emergencies involving loss of an essential service, medical emergency, violent outbursts and epidemics/pandemics. Annual testing had not been completed. Further, the home must have agreements with community partners that would respond to the home in an emergency. The home failed to produce current agreements.

**Outcome**

The Licensee must take corrective action to achieve compliance.

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

During the inspection, the Inspector reviewed a random sample of resident plans of care. There is a requirement that plans of care must be revised every 6 months or if a resident care needs change. Further, the plan must be approved by the resident or their substitute decision maker and must be approved by a Regulated Health Professional. The plan must also include the care services that the resident receives. The Inspector identified six resident care plans that did not either contain all or some of the prescribed content, and were not approved as prescribed.

**Outcome**

The Licensee must take corrective action to achieve compliance.

**Focus Area #3: Staff Training****RHRA Inspector Findings**

During the inspection, the Inspector reviewed staff training documents. There is a requirement that staff must be trained annually in a number of area's including the home Zero Tolerance of Abuse and Neglect policy and Resident Bill of Rights. The inspection showed these two training requirements were not completed.

**Outcome**

The Licensee must take corrective action to achieve compliance.

**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. 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. 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), 3.**

(iii) medical emergencies,

**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), 3.1**

(iii.1) epidemics and pandemics,

**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;

**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. (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), (a)**

(a) the care services that are part of a package of care services that the resident is entitled to receive under the resident's agreement with the licensee, whether or not the resident receives the services;

**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.

**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. (4); On-going training**

**s. 65. (4); On-going training**

65. (4) The licensee shall ensure that the persons who are required to receive the training described in subsection (2) receive on-going training as described in that subsection at the times required by the regulations.

**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 Licensee may provide written comments regarding matters that are addressed in the above Draft Inspection Report. Comments must be submitted within 10 business days to:

Attention: Mark Dennis  
Retirement Homes Regulatory Authority  
55 York St, Suite 700  
Toronto, ON M5J 1R7  
[Mark.Dennis@rhra.ca](mailto:Mark.Dennis@rhra.ca)  
Fax: 1-855-630-3775

The Licensee's written comments will be considered in the preparation of a Final Inspection Report. For matters where corrective action is required, including action relating to a written request for compliance, the Licensee should set out any proposed plans for achieving compliance. Pursuant to section 77(14) of the RHA, if an inspection is conducted for the purpose of determining whether the Licensee of a retirement home is in compliance with the requirements of the RHA, a Final Inspection Report must be given to the Licensee, the Registrar of the Retirement Homes Regulatory Authority and the Home's Residents' Council, if any.

Signature of Inspector 	Date November 3, 2023
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