

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

Inspection Information	
Date of Inspection: September 27, 2023	Name of Inspector: Georges Gauthier
Inspection Type: Responsive Inspection – Complaint	
Licensee: ACC-002761 - Lifetimes Limited Partnership	
Retirement Home: Peterborough Retirement Residence	
License Number: T0393	

About Responsive Inspections
<p>A responsive inspection, performed by an RHRA inspector, is a physical inspection of a licensed retirement home. A responsive inspection is conducted when RHRA receives information that the licensee may have failed to meet the standards of the <i>Retirement Homes Act, 2010</i> or its regulations (the “<i>RHA</i>”). An inspection being conducted does not infer that an allegation is substantiated or that a contravention of the RHA has occurred. A licensee is required to report to RHRA if they suspect harm or risk of harm to a resident. During a responsive inspection, an RHRA inspector may observe the operations of the home, interview relevant individuals, review records and other documentation, and determine whether the licensee’s management and staff have followed mandatory policies and practices designed to protect the welfare of residents.</p> <p>Following a responsive 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 there is a serious incident or the licensee repeatedly does not meet the required standards, RHRA may take further action.</p>

Concern(s)

During a responsive inspection, an inspector will focus primarily on the concern(s) which prompted the inspection and may take various actions to determine whether the licensee is compliant with the RHA in

Concern #1: CON-6547-Continance care**RHRA Inspector Findings**

A report was made to RHRA by a family member regarding the continence care for a resident. As part of the inspection in response to the allegation, the inspector reviewed the Licensee's care policies and procedures, staff training records, the resident's care file, and interviewed relevant staff. The evidence showed the plan of care did not contain the necessary details and directions to staff. Further, there was no evidence to show staff had received adequate training for catheter care. In addition, the continence care program for the resident did not contain a toileting program. The Licensee failed to ensure the provisions for continence care, plans of care, and training had been fully addressed.

Outcome

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

Concern #2: CON-6549-Maintenance & Pendants**RHRA Inspector Findings**

A report was made to RHRA by a family member regarding staff members' responses to call bells. As part of the inspection in response to the allegation, the inspector reviewed the Licensee's policies and procedures, manufacturer's documentation, and interviewed relevant staff. The evidence showed the maintenance policy did not fully address the call bell devices. The Licensee failed to ensure the maintenance program policy and procedure requirements were fully addressed.

Outcome

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

Concern #3: CON-6557-Staff Shortage**RHRA Inspector Findings**

A report was made to RHRA by a family member regarding staffing levels. As part of the inspection in response to the allegation, the inspector reviewed schedules, sign-in logs, screening logs, the home's information package, interviewed relevant staff, and made observations. The evidence did not confirm issues with staffing; however, the information package given to residents did not fully describe staffing levels and qualifications. The Licensee failed to ensure the package of information for residents requirements were fully addressed.

Outcome

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

Concern #4: CON-6558-Lift Transfers**RHRA Inspector Findings**

A report was made to RHRA by a family member regarding how assistance with ambulation was being provided to a resident. As part of the inspection in response to the allegation, the inspector reviewed the Licensee's care policies and procedures, staff training records, the resident's care file, and interviewed relevant staff. The inspector found instances of unsafe transfers, non-compliance with the existing plan

of care, the resident was not reassessed and the plan of care reviewed and revised to address the care service, and staff training requirements had not been met. The Licensee failed to ensure requirements related to assistance with ambulation, care planning, and the related training requirements had been met.

Outcome

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

Concern #5: CON-6560-Neglect and Improper Care

RHRA Inspector Findings

As part of the inspection in response to the allegations, the inspector reviewed the Licensee's care policies and procedures, staff training records, the resident's care file, and interviewed relevant witnesses and staff. The inspector found that the Licensee had failed to ensure that multiple requirements were complied with, including those relating to continence care, ambulation, assessments and plans of care, compliance with the plan of care, medication administration, staff training, complaints handling, and compliance with the Licensee's abuse and neglect policy. As a result, the Licensee's inactions jeopardized the health and safety of the resident, and the Licensee failed to protect the resident from neglect.

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 responsive inspection, an inspector may observe areas of non-compliance that are not related to the concern(s) which prompted the inspection. 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 Concerns or Additional Findings made during the current inspection are listed below.

The Licensee failed to comply with the RHA s. 59. (1); Procedure for complaints to licensee

s. 59. (1); Procedure for complaints to licensee

59. (1) Every licensee of a retirement home shall ensure that every written or verbal complaint made to the licensee or a staff member concerning the care of a resident or operation of the home is dealt with as follows:

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

s. 59. (1), para. 1

1. The complaint shall be investigated. If the complaint alleges harm or risk of harm to one or more

residents, the investigation shall be commenced immediately.

s. 59. (1), para. 2

2. The complaint shall be resolved if possible, and a response that complies with paragraph 4 provided within 10 business days of the receipt of the complaint.

s. 59. (1), para. 3

3. For those complaints that cannot be investigated and resolved within 10 business days, an acknowledgement of receipt of the complaint shall be provided within 10 business days of receipt of the complaint, including the date by which the complainant can reasonably expect a resolution, and a follow-up response that complies with paragraph 4 shall be provided as soon as possible in the circumstances.

s. 59. (1), para. 4

4. A response shall be made to the person who made the complaint, indicating,

s. 59. (1), para. 4, 1.

i. what the licensee has done to resolve the complaint,

s. 59. (1), para. 4

4. A response shall be made to the person who made the complaint, indicating,

s. 59. (1), para. 4, 2.

ii. that the licensee believes the complaint to be unfounded and the reasons for the belief.

The Licensee failed to comply with the RHA s. 59. (2); Procedure for complaints to licensee

s. 59. (2); Procedure for complaints to licensee

59. (2) The licensee shall ensure that a written record is kept in the retirement home that includes,

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

s. 59. (2), (a)

(a) the nature of each verbal or written complaint;

s. 59. (2), (b)

(b) the date that the complaint was received;

s. 59. (2), (c)

(c) the type of action taken to resolve the complaint, including the date of the action, time frames for actions to be taken and any follow-up action required;

s. 59. (2), (d)

(d) the final resolution, if any, of the complaint;

s. 59. (2), (e)

(e) every date on which any response was provided to the complainant and a description of the response;

s. 59. (2), (f)

(f) any response made in turn by the complainant.

The Licensee failed to comply with the RHA s. 67. (2); Same, neglect

s. 67. (2); Same, neglect

67. (2) Every licensee of a retirement home shall ensure that the licensee and the staff of the home do not neglect the residents.

The Licensee failed to comply with the RHA s. 67. (4); Policy to promote zero tolerance

s. 67. (4); Policy to promote zero tolerance

67. (4) Without in any way restricting the generality of the duties described in subsections (1) and (2), the licensee shall ensure that there is a written policy to promote zero tolerance of abuse and neglect of residents and shall ensure that the policy is complied with.

The Licensee failed to comply with the RHA s. 74.; Licensee's duty to respond to incidents of wrongdoing

s. 74.; Licensee's duty to respond to incidents of wrongdoing

74. Every licensee of a retirement home shall ensure that,

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

s. 74. (a)

(a) every alleged, suspected or witnessed incident of the following of which the licensee knows or that is reported to the licensee is immediately investigated:

s. 74. (a), 2.

(ii) neglect of a resident of the home by the licensee or the staff of the home,

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. 54. (2); Contents

54. (2) The package of information shall include, at a minimum,

s. 54. (2), (t)

(t) information relating to staffing, including night time staffing levels and qualifications of staff of the retirement home;

s. 62. (10); Compliance with plan

62. (10) The licensee shall ensure that the care services that the licensee provides to the resident are set out in the plan of care and are provided to the resident in accordance with the plan and the prescribed requirements, if any.

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), (c)

(c) the care services set out in the plan have not been effective.

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. 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:

s. 65. (5), para. 5

5. All other prescribed matters.

Ontario Regulation 166/11:

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,

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.

s. 19. (2); Maintenance

19. (2) The maintenance program shall include policies and procedures for routine, preventative and remedial maintenance of the following in the retirement home:

s. 19. (2), para. 4

4. If provided by the licensee, equipment, devices, assistive aids, positioning aids and shower grab bars.

s. 29.; Administration of drugs or other substances

29. 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 administration of a drug or other substance, the licensee shall ensure that,

s. 29. (b)

(b) no drug is administered by the licensee or the staff to the resident in the home except in accordance with the directions for use specified by the person who prescribed the drug for the resident;

s. 36. (1); Continence care

36. (1) If one of the care services that the licensee or the staff of a retirement home provide to a resident of the home is continence care, the licensee shall establish a continence care program that includes,

s. 36. (1), (c)

(c) toileting programs;

s. 39.; Assistance with ambulation

39. If one of the care services that the licensee or the staff of a retirement home provide to a resident of

the home is assistance with ambulation, the licensee shall ensure that,

s. 39. (a)

(a) staff use safe transferring and positioning devices or techniques when assisting the resident;

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. 1

1. Continence.

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. 3

3. Risk of falling.

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. 6

6. Cognitive ability.

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	Date November 21, 2023
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