

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

Inspection Information	
Date of Inspection: Dec 12, 2023	Name of Inspector: Angela Newman
Inspection Type: Routine Inspection	
Licensee: ACC-003136 - Elgin Lodge Holding Corporation	
Retirement Home: Elgin Lodge	
License Number: S0412	

### 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

As part of the routine inspection, the inspector reviewed the Licensee's emergency plan and tests of the emergency plan. The home failed to have a pandemic/epidemic plan and conduct annual testing of this plan. The home had no record of a test of a full evacuation of the home. The Licensee failed to have an emergency plan and conduct tests of the emergency plan in accordance with legislative requirements.

**Outcome**

The Licensee submitted a plan to achieve compliance by May 23, 2024. 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**

As part of the routine inspection, the inspector reviewed a sample of residents' care plans and found two care plans were not approved by the resident or their substitute decision maker. In addition, the inspector found another resident's care plans were not updated at the time the residents' care needs changed or every six months. The Licensee failed to ensure all resident plans of care had been approved as required and plans of care were updated in compliance with the legislation.

**Outcome**

The Licensee submitted a plan to achieve compliance by Dec 31, 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. 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), 3.1**

(iii.1) epidemics and pandemics,

**s. 24. (5), (b)**

(b) at least once every two years, conduct a planned evacuation of the retirement home;

**s. 24. (5), (c)**

(c) keep a written record of the testing of the emergency plan and planned evacuations and of any changes made to improve the emergency plan.

**The Licensee failed to comply with the RHA s. 25. (3); Emergency plan, retirement home with more than 10 residents****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:

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

**s. 25. (3), para. 1**

1. Dealing with,

**s. 25. (3), para. 1, 5.1**

v.1 epidemics and pandemics,

**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. (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.

**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. 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,

**s. 65. (2), (a)**

(a) the Residents' Bill of Rights;

**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,

**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); Training**

65. (2) Every licensee of a retirement home shall ensure that no staff work in the home unless they have received training in,

**s. 65. (2), (c)**

(c) the protection afforded for whistle-blowing described in section 115;

**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,

**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); Training**

65. (2) Every licensee of a retirement home shall ensure that no staff work in the home unless they have received training in,

**s. 65. (2), (f)**

(f) fire prevention and safety;

**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,

**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);

**Ontario Regulation 166/11:**

**s. 14. (1); Staff training**

14. (1) For the purposes of clause 65 (2) (j) of the Act, every licensee of a retirement home shall ensure that all staff who work in the home receive training in the procedure described in subsection 73 (1) of the Act for a person to complain to the licensee.

**s. 23. (1); Behaviour management**

23. (1) Every licensee of a retirement home shall develop and implement a written behaviour management strategy that includes,

**s. 23. (1), (a)**

(a) techniques to prevent and address resident behaviours that pose a risk to the resident or others in the home;

**s. 23. (1); Behaviour management**

23. (1) Every licensee of a retirement home shall develop and implement a written behaviour management strategy that includes,

**s. 23. (1), (b)**

(b) strategies for interventions to prevent and address resident behaviours that pose a risk to the resident or others in the home;

**s. 27. (5); Infection prevention and control program**

27. (5) The licensee of a retirement home shall ensure that,

**s. 27. (5), (0.a)**

(0.a) any guidance, advice or recommendations given to retirement homes by the Chief Medical Officer of Health are followed in the retirement home;

**s. 27. (5); Infection prevention and control program**

27. (5) The licensee of a retirement home shall ensure that,

**s. 27. (5), (0.b)**

(0.b) all reasonable steps are taken in the retirement home to follow,

**s. 27. (5), (0.b), 2.**

(ii) any guidance, advice or recommendations respecting coronavirus (COVID-19) that are given to long-term care homes by the Chief Medical Officer of Health and made available on the Government of Ontario's website respecting coronavirus (COVID-19);

**s. 27. (9); Infection prevention and control program**

27. (9) The licensee shall ensure that each staff member who works in the retirement home receives training on how to reduce the incidence of infectious disease transmission, including,

**s. 27. (9), (a)**

(a) the need for and method of maintaining proper hand hygiene and method of preventing cross contamination, including proper handling of soiled linens, the protection of uniforms, and the separation of clean and dirty items;

**s. 27. (9); Infection prevention and control program**

27. (9) The licensee shall ensure that each staff member who works in the retirement home receives training on how to reduce the incidence of infectious disease transmission, including,

**s. 27. (9), (b)**

(b) the need for and process of reporting, providing surveillance of and documenting incidents of infectious illness.

## 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 <i>Angela Newman</i>	Date Dec 28, 2023
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