

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

**Inspection Information**

**Date of Inspection: January 4, 2024**

**Name of Inspector: Samantha Smith**

**Inspection Type: Routine Inspection**

**Licensee: ACC-003018 - Fairfield Residence Corp.**

**Retirement Home: Fairfield Residence**

**License Number: T0281**

**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 Licensee has not developed or tested a plan for situations involving pandemics and epidemics. The Licensee failed to develop a plan and complete testing annually as required. Additionally, the Licensee reviewed the community partnership agreements and found that the shelter agreements were not updated. The Licensee failed to ensure that community partnership agreements in the event of an

emergency are updated annually as required.

**Outcome**

The Licensee submitted a plan to achieve compliance by Thursday, February 15, 2024. RHRA to confirm compliance by following up with the Licensee or by inspection.

**Focus Area #2: Medications**

**RHRA Inspector Findings**

The inspector reviewed a sample of resident health records and observed medication administration on the day of the inspection. The inspector found evidence that a medication had been administered to the resident without an appropriate prescription on record and that the person who administered the medication did not prepare a written record noting the name and amount of the medication, the route of its administration and the time and date on which it was administered. The Licensee failed to ensure that no drug is administered by staff in the home unless the drug has been prescribed for the resident by a person who is authorized to prescribe a drug and that the staff maintain written records of medication administration as required.

**Outcome**

The Licensee submitted a plan to achieve compliance by Wednesday, January 31, 2024. RHRA to confirm compliance by following up with the Licensee or by inspection.

**Focus Area #3: Resident Record, Assessment, Plan of Care**

**RHRA Inspector Findings**

The inspector reviewed a sample of resident care files and found that four residents did not have the care service of provision of a meal, or the residents' dietary requirements reflected in their plans of care. Additionally, the inspector found that three plans of care were not based on a full assessment of the resident as required. Furthermore, the inspector found that three residents did not have their plans of care approved appropriately, as there was no evidence that the plans had been approved by the residents or their substitute decision makers. The Licensee failed to ensure that all care services (such as meals and dietary requirements) are included on the plans of care, that plans of care are based on a full assessment of the resident, and that all resident plans of care are approved as required.

**Outcome**

The Licensee submitted a plan to achieve compliance by Wednesday, January 31, 2024. RHRA to confirm compliance by following up with the Licensee or by inspection.

**Focus Area #4: Staff Training**

**RHRA Inspector Findings**

The inspector reviewed a sample of staff training records and the home was unable to demonstrate that 3 staff members had completed the required training in 2023. Furthermore, medication administration training records were reviewed, and the inspector was unable to confirm that staff received updated training in 2023 as required. The Licensee failed to ensure that staff were trained 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.

**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. (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), 3.1**

(iii.1) epidemics and pandemics,

#### **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. 32.; Records**

##### **s. 32.; Records**

32. If the licensee or a member of the staff of a retirement home administers a drug or other substance to a resident, the licensee shall ensure that,

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

##### **s. 32. (a)**

(a) the person who administered the drug or other substance prepares a written record noting the name and amount of the drug or other substance, the route of its administration and the time and date on which it was administered;

##### **s. 32. (b)**

(b) if a drug is administered, there is written evidence that the drug was prescribed for the resident by a person who is authorized to prescribe a drug under section 27 of the Regulated Health Professions Act, 1991;

**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. (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):**

**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.

**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. 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), 2.**

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

**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. (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.

**Ontario Regulation 166/11:**

**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.

**s. 14. (5); Staff training**

14. (5) The licensee shall ensure that the persons who are required to receive the training described in subsection 65 (5) of the Act receive that training on an ongoing basis, namely at least annually after receiving the training described in subsection (4).

**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. 7**

7. Risk of harm to self and to others.

## 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
<i>Samantha Smith</i>	January 16, 2024