

## **FINAL INSPECTION REPORT**

### Under the Retirement Homes Act, 2010

Inspection Information		
Date of Inspection: 12/18/2023	Name of Inspector: Michele Davidson	
Inspection Type: Routine Inspection		
Licensee: ACC-003106 - FG KW Retirement Living Inc.		
Retirement Home: Kingsway Place By Fieldgate Retirement Living		
License Number: T0445		

#### **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 home's emergency response plan was reviewed. During the review, the inspector found that tests of the home's response to the loss of an essential service, a medical emergency and a missing resident had been attempted, but did not meet all requirements for those tests. Further, a full home evacuation had not been conducted in the last two years and the test on the handling of epidemic and pandemic situations had not been completed. Finally, the home's emergency partner agreement for shelter did not meet requirements.

#### Outcome

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

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

#### **RHRA Inspector Findings**

The inspector reviewed a sample of resident medical records. Three of the charts reviewed did not contain evidence of a full re-assessment and revision to the plan of care within the prescribed timelines. Further, one plan of care did not contain directions to staff to meet the resident's current needs.

#### Outcome

The Licensee provided information indicating that corrective action was being taken, however, further action must be taken to achieve compliance with all areas outlined in the finding. RHRA to confirm compliance by following up with the Licensee or by inspection.

#### Focus Area #3: Staff Training

#### **RHRA Inspector Findings**

At the time of the inspection, staff training records which were reviewed by the inspector, did not contain evidence of re-training for all unregulated care providers in the area of medication administration. The Licensee failed to ensure that all persons involved in drug administration had been trained as required.

#### Outcome

The Licensee has demonstrated it has 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):

## <u>s. 24. (5), (a)</u>

(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,

## <u>s. 24. (5), (a)</u>

(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), 2.

(ii) situations involving a missing resident,

## <u>s. 24. (5), (a)</u>

(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,

## <u>s. 24. (5), (a)</u>

(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. 29.; Administration of drugs or other substances

### 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,

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

### <u>s. 29. (c)</u>

(c) neither the licensee nor a staff member administers a drug to a resident in the home unless the licensee or the staff member has received training in the procedures applicable to the administration of the drug;

## <u>s. 29. (e)</u>

(e) if the licensee or a staff member is involved in the administration of the drug or other substance at the home, that the licensee or staff member is trained in,

## s. 29. (e), 1.

(i) ways of reducing the incidence of infectious disease, including maintaining proper hand hygiene,

## <u>s. 29. (e)</u>

(e) if the licensee or a staff member is involved in the administration of the drug or other substance at the home, that the licensee or staff member is trained in,

### s. 29. (e), 2.

(ii) the safe disposal of syringes and other sharps,

### <u>s. 29. (e)</u>

(e) if the licensee or a staff member is involved in the administration of the drug or other substance at the home, that the licensee or staff member is trained in,

### s. 29. (e), 3.

(iii) recognizing an adverse drug reaction and taking appropriate action;

### 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,

## <u>s. 62. (12), (a)</u>

(a) a goal in the plan is met;

### <u>s. 62. (12), (b)</u>

(b) the resident's care needs change or the care services set out in the plan are no longer necessary;

### <u>s. 62. (12), (c)</u>

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

### 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.

### **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 <u>http://www.rhra.ca/en/retirement-home-database</u>.

Signature of Inspector	Date
M. Davidson	January 23, 2024