

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

Inspection Information		
Date of Inspection: January 24, 2024	Name of Inspector: Angela Newman	
Inspection Type: Routine Inspection		
Licensee: ACC-002961 - 2458701 Ontario Inc.		
Retirement Home: Hamiltons Hometown Retirement Living		
License Number: S0380		

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: Complaints

RHRA Inspector Findings

As part of the routine inspection, the inspector reviewed the Licensee's complaint records and observed that the home had not conducted a quarterly review and analysis of the complaints received by the

home. The Licensee failed to ensure it was in compliance with the legislation.

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.

Focus Area #2: Emergency Plan

RHRA Inspector Findings

As part of the routine inspection, the inspector reviewed the Licensee's records of testing for their emergency plans and found that the testing of the pandemic/epidemic plan had not been completed in 2023. The Licensee failed to ensure that testing was done annually as required.

Outcome

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

Focus Area #3: Infection Prevention and Control

RHRA Inspector Findings

As part of the routine inspection, the inspector determined that all the alcohol-based hand sanitizer located in communal resident areas and staff work areas was expired. The Licensee failed to ensure that alcohol-based hand sanitizer that provides protection against infectious disease transmission is available for use by residents and staff.

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.

Focus Area #4: Resident Record, Assessment, Plan of Care

RHRA Inspector Findings

As part of the routine inspection, the inspector reviewed a sample of resident assessments and care plans. The inspector found the assessments lacked information pertaining to the presence of infectious diseases and care plans lacked the contact information for substitute decision makers if available as well as the care services that are a part of the package of care services the resident is entitled to receive under the resident's agreement with the Licensee. Additionally, the inspector found that the care plans were not approved by a member of the College of Nurses of Ontario. Further, the inspector determined that one resident's care plan was not based on an assessment of the resident for falls and responsive behaviours, five care plans did not include the details of the medication administration care service, including goals that care service is intended to achieve and directions to staff who administer medications, and one care plan did not include the details of the assistance with bathing care service to that resident. The Licensee failed to ensure resident assessments and care plans included all the required components under legislation.

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.

Focus Area #5: Staff Training

RHRA Inspector Findings

As part of the routine inspection, the inspector reviewed a sample of training records in the areas of zero tolerance of abuse, resident bill of rights, infection control, whistle blower protection, personal

assistive service devices, fire prevention and safety, emergency plans, complaints, behaviour management, and medication administration. For the annual training files reviewed, two staff had not completed all required training in 2023 in the reviewed training areas. The home was not able to determine that annual training was being completed in alignment with the legislation.

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 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. 14. (5); Staff training

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).

The Licensee failed to comply with the RHA s. 27. (7); Infection prevention and control program

s. 27. (7); Infection prevention and control program

27. (7) The licensee of a retirement home shall ensure that waterless, alcohol-based hand sanitizer or another form of hand sanitation that provides equivalent protection against infectious disease transmission is available for use by residents and staff in communal resident areas and in staff work areas.

The Licensee failed to comply with the RHA s. 43. (2); Initial assessment of care needs

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:

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

s. 43. (2), para. 2

2. Presence of infectious diseases.

The Licensee failed to comply with the RHA s. 47. (4); Development of plan of care

s. 47. (4): Development of plan of care

47. (4) Subject to subsections (5) and (6), a plan of care for a resident is complete if the plan,

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

<u>s. 47. (4), (b)</u>

(b) sets out,

s. 47. (4), (b), 2.

(ii) the names and contact information of the resident's substitute decision-makers, if any,

The Licensee failed to comply with the RHA s. 59. (3); Procedure for complaints to licensee

s. 59. (3); Procedure for complaints to licensee

59. (3) The licensee shall ensure that,

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

<u>s. 59. (3), (a)</u>

(a) the written record is reviewed and analyzed for trends at least quarterly;

<u>s. 59. (3), (b)</u>

(b) the results of the review and analysis are taken into account in determining what improvements are required in the retirement home;

<u>s. 59. (3), (c)</u>

(c) a written record is kept of each review and of the improvements made in response.

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):

<u>s. 62. (4), (a)</u>

(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. 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.

Ontario Regulation 166/11:

s. 17. (1); Cleanliness

17. (1) Every licensee of a retirement home shall ensure that the common areas of the home, including the floors and any furnishings, equipment and linens in those areas, are clean and sanitary.

s. 17. (2); Cleanliness

17. (2) Every licensee of a retirement home shall ensure that bathrooms in common areas of the home that are used by residents are adequately stocked with supplies including toilet paper.

s. 24. (5); Emergency plan, general

24. (5) The licensee shall,

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. 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:

s. 25. (3), para. 3

3. Resources, supplies and equipment vital for the emergency response being set aside and readily available at the retirement home and regular testing of all such resources, supplies and equipment to ensure that they are in working order.

s. 40.; Provision of a meal

40. 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 provision of a meal, the licensee shall ensure that,

s. 40. (g)

(g) the resident is informed of his or her daily and weekly menu options;

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
Angela Newman	February 8, 2024