

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

**Inspection Information**

**Date of Inspection: February 6, 2024**

**Name of Inspector: Melissa Meikle**

**Inspection Type: Routine Inspection**

**Licensee: ACC-002783 - Symphony Senior Living Ottawa LP**

**Retirement Home: Forest Valley Terrace By Symphony**

**License Number: N0273**

**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**

The inspector reviewed the Licensee's complaints log and noted that there were 3 recent complaints pertaining to the same concern but there was no quarterly analysis completed therefore the trend was not identified. The Licensee failed to ensure that complaints are analyzed quarterly as prescribed.

**Outcome**

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

**Focus Area #2: Emergency Plan****RHRA Inspector Findings**

The inspector reviewed the Licensee's records of testing for their emergency plans and found that the testing for situations involving the epidemic and pandemic procedures had not been completed. 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: Resident Record, Assessment, Plan of Care****RHRA Inspector Findings**

The inspector reviewed a sample of resident care files and found that 2 residents did not have interdisciplinary care conferences as prescribed for residents who have identified care needs that include dementia care, skin and wound care and/or the use of a personal assistance services device. Additionally, the 2 plans of care were not 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 the development of the plans of care were completed appropriately and the Licensee failed to ensure that all resident plans of care had been approved as required.

**Outcome**

The Licensee must take 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.*

**Additional Finding#1: Falls Prevention****RHRA Inspector Findings**

The inspector reviewed the Licensee's falls log and noted that falls are not analyzed. The Licensee failed to evaluate the risk of falls as prescribed.

**Outcome**

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

### **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. 47. (5); Development of plan of care**

##### **s. 47. (5); Development of plan of care**

47. (5) If an assessment of a resident indicates that the resident's care needs may include dementia care, skin and wound care or the use of a personal assistance services device, the licensee shall ensure that an interdisciplinary care conference is held as part of the development of the resident's plan of care and that the resident's plan of care takes into account the results of the care conference.

#### **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. 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), (b)**

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

#### **Ontario Regulation 166/11:**

##### **s. 22. (1); Risk of falls**

22. (1) Every licensee of a retirement home shall develop, document and implement strategies to reduce or mitigate the risk of falls in common areas of the home.

##### **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. 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. 44. (2); Full assessment of care needs**

44. (2) The full assessment mentioned in subsection (1) shall consider the following matters with respect to the resident:

**s. 44. (2), para. 5**

5. Need for care services.

**s. 44. (2); Full assessment of care needs**

44. (2) The full assessment mentioned in subsection (1) shall consider the following matters with respect to the resident:

**s. 44. (2), para. 6**

6. Need for assistance with the activities of daily living.

**s. 47. (7); Development of plan of care**

47. (7) If one of the care services that the licensee provides to a resident is the provision of a meal, the resident's plan of care is only complete if it includes a description of the food restrictions, food allergies and food sensitivities of the resident that are known.

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

59. (3) The licensee shall ensure that,

**s. 59. (3), (a)**

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

## 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 February 22, 2024
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