RHRA Retirement Homes Regulatory Authority

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

| **Inspection Information** | |
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| **Date of Inspection:** May 31, 2017 | **Name of Inspector:** Debbie Rydall |
| **Inspection Type:** Routine Inspection | |
| **Licensee:** HCN-Revera Lessee (Constitution Place) LP / 55 Standish Court, Mississauga, ON L5R 4B2 (the "Licensee") | |
| **Retirement Home:** Constitution Place / 3051 Constitution Boulevard, Mississauga, ON L4Y 2Z1 (the "home") | |
| **Licence Number:** T0265 | |

| **Purpose of Inspection** |
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| The RHRA conducts routine inspections as set out in section 77(3) of the *Retirement Homes Act, 2010* (the "RHA"). |

| **NON-COMPLIANCE** |
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| **1. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 54; Contents.**<br><br>Specifically, the Licensee failed to comply with the following subsection(s):<br><br>**54. (2)** The package of information shall include, at a minimum,<br>(c) the licensee's policy mentioned in subsection 67 (4) to promote zero tolerance of abuse and neglect of residents;<br>(d) the licensee's procedure for complaints mentioned in subsection 73 (1); |
| **Inspection Finding**<br>The Routine Inspection revealed that the package of information provided to new residents was not completely aligned with the legislation in the areas listed. |
| **Outcome**<br>The Licensee submitted plan to achieve compliance by July 17, 2017. RHRA to confirm compliance by inspection. |
| **2. The Licensee failed to comply with O. Reg. 166/11, s. 11; Posted information.**<br><br>Specifically, the Licensee failed to comply with the following subsection(s): |

**11. (1)** For the purposes of paragraph 4 of subsection 55 (2) of the Act, the following information is prescribed as information that must be posted in a retirement home under that subsection:

3. An explanation of the procedures to be followed in the case of an evacuation.

**Inspection Finding**

An explanation of the procedures to be followed in the case of an evacuation were not posted as per the requirements of the legislation.

**Outcome**

The Licensee submitted plan to achieve compliance by July 17, 2017. RHRA to confirm compliance by inspection.

**3. The Licensee failed to comply with O. Reg. 166/11, s. 24; Emergency plan, general.**
**The Licensee failed to comply with O. Reg. 166/11, s. 25; Emergency plan, retirement home with more than 10 residents.**

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

**24. (5)** The licensee shall,

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

**25. (3)** The licensee shall ensure that the emergency plan provides for the following:

2. Evacuation of the retirement home, including a system in the home to account for the whereabouts of all residents in the event that it is necessary to evacuate and relocate residents and evacuate staff and others in case of an emergency.

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.

**Inspection Finding**

There was no documented evidence provided at the time of the Routine Inspection to support that the home had completed an evacuation as per the requirements of the legislation. Further; the home's emergency plan was not completely aligned with the legislation in the area listed and there was no evidence at the time of the inspection to support that the required resources, supplies and equipment vital for an emergency response were set aside and readily available as per the legislation.

**Outcome**

The Licensee submitted plan to achieve compliance by August 16, 2017. RHRA to confirm compliance by inspection.

**4. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 65; Training.**
**The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 65; Additional training for direct care staff.**
**The Licensee failed to comply with O. Reg. 166/11, s. 14; Staff training.**

**The Licensee failed to comply with O. Reg. 166/11, s. 27; Infection prevention and control program.**
**The Licensee failed to comply with O. Reg. 166/11, s. 55; Contents of records.**

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

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

(a) the Residents' Bill of Rights;

(b) the licensee's policy mentioned in subsection 67 (4) to promote zero tolerance of abuse and neglect of residents;

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

(d) the licensee's policy mentioned in subsection 68 (3) regarding the use of personal assistance services devices for residents;

(f) fire prevention and safety;

**65. (5)** The licensee shall ensure that all staff who provide care services to residents receive training in the following matters and at the times required by the regulations, as a condition of continuing to have contact with residents, in addition to the other training that they are required to receive under this section:

3. Behaviour management.

**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.

**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,

(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;

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

**55. (5)** A licensee of a retirement home shall keep records proving compliance with the Act and this Regulation in relation to,

(c) the skills, qualifications and training of the staff who work in the home;

**Inspection Finding**

The evidence provided for review at the time of the inspection did not support that all staff had received the required training in the areas listed.

**Outcome**

The Licensee submitted plan to achieve compliance by August 4, 2017. RHRA to confirm compliance by inspection.

**5. The Licensee failed to comply with O. Reg. 166/11, s. 20; Food preparation.**

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

**20. (4)** The licensee shall ensure that whenever food is prepared in the retirement home, at least one person involved in preparing the food holds a current certificate in food handling from the local public health unit or has recently successfully completed a food handling training program equivalent to that offered by public health units.

**Inspection Finding**

The Routine Inspection confirmed that only 2 of the 4 required staff as per the home's schedule held current certificates in food handling from the local Public Health Unit at the time of the inspection.

**Outcome**

The Licensee submitted plan to achieve compliance by July 17, 2017. RHRA to confirm compliance by inspection.

# NOTICE

The Final Inspection Report is being provided to the Licensee, the Registrar of the Retirement Homes Regulatory Authority (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 Public Register, available online at http://rhra.ca/en/register/

| Signature of Inspector | Date |
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|  | August 16, 2017 |