RHRA Retirement Homes Regulatory Authority

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

Inspection Information	
Date of Inspection: March 26, 2014	**Name of Inspector:** Corina Gadde
Inspection Type: Routine Inspection	
Licensee: 2352756 Ontario Inc. / 4676 Dark's Side Road, Pakenham, ON K0A 2X0 (the "Licensee")	
Retirement Home: Country View Lodge / 4676 Dark's Side Road, Pakenham, ON K0A 2X0 (the "home")	
Licence Number: N0263	

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

NON-COMPLIANCE
1. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 55; Public information. Specifically, the Licensee failed to comply with the following subsection: **s. 55. (1)** Every licensee of a retirement home shall ensure that the following information is made available in the home, in an easily accessible location and in a manner that complies with the prescribed requirements, if any: 1. The package of information described in subsection 54 (2).
Inspection Finding On the day of inspection the information package for residents was not available for review.
Outcome Corrective action required.
2. The Licensee failed to comply with RHA, S.O. 2010, c. 11, s. 55; Posting information. Specifically, the Licensee failed to comply with the following subsection: **s. 55. (2)** Every licensee of a retirement home shall ensure that the following information is posted in the home in a conspicuous and easily accessible location and in a manner that complies with the prescribed requirements, if any: 2. The licensee's license for the home.

Inspection Finding

The Licensee's license for the home was not posted on the day of inspection and could not be located during the inspection.

Outcome

Corrective action required.

3. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 53; Agreement required.

Specifically, the Licensee failed to comply with the following subsection:

s. 53. (1) The licensee of a retirement home shall enter into a written agreement with every resident of the home before the resident commences residency in the home.

Inspection Finding

The Licensee did not provide evidence to demonstrate that there is a written agreement with every resident of the home before the resident commences residency in the home.

Outcome

Corrective action taken.

4. The Licensee failed to comply with O. Reg. 166/11, s. 24; Emergency plan, general.

Specifically, the Licensee failed to comply with the following subsection:

s. 24. (5) The licensee shall,

(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,

(i) the loss of essential services,

(ii) situations involving a missing resident,

(iii) medical emergencies, and

(iv) violent outbursts.

Inspection Finding

The Licensee did not demonstrate testing the required parts of the emergency plan listed in O. Reg. 166/11, s. 24 (5).

Outcome

Corrective action required.

5. The Licensee failed to comply with RHA, S.O. 2010, c. 11, s. 65; Obligations of licensee re staff.

Specifically, the Licensee failed to comply with the following subsections:

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;

(f) fire prevention and safety

(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.

Inspection Finding

The Licensee did not demonstrate that staff has received training in the Residents Bill of Rights, policy to promote zero tolerance of abuse and neglect, Whistle Blowing Protection, Fire Prevention and Safety and Behaviour Management.

Outcome

Corrective action required.

6. The Licensee failed to comply with O. Reg. 166/11, s. 22; Risk of falls.

Specifically, the Licensee failed to comply with the following subsection:

s. 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.

Inspection Finding

The Licensee has not developed and documented strategies to reduce or mitigate risk of falls in the common areas of the home.

Outcome

Corrective action required.

7. The Licensee failed to comply with O. Reg. 166/11, s. 29; Administration of drugs or other substances.

Specifically, the Licensee failed to comply with the following subsections:

s. 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,

(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;

(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,

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

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

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

Inspection Finding

The Licensee did not demonstrate that staff who administer medication have had the prescribed training.

Outcome

Corrective action required.

8. 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 Licensee did not demonstrate certificates in food handling.

Outcome

Corrective action taken.

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
	May 12, 2014