

FINAL INSPECTION REPORT

Under the *Retirement Homes Act, 2010*

Inspection Information	
Date of Inspection: April 10, 2014	Name of Inspector: Gerald T. Lawrence
Inspection Type: Routine Inspection	
Licensee: Wells Gordon Limited / 700 & 720 Mount Pleasant Road, Toronto, ON M4S 2N4 (the "Licensee")	
Retirement Home: The Briton House / 700 & 720 Mount Pleasant Road, Toronto, ON M4S 2N4 (the "home")	
Licence Number: T0034	

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. 54; Information for residents. Specifically, the Licensee failed to comply with the following subsection: s. 54. (2) The package of information shall include, at a minimum, (c) the licensee's policy mentioned in subsection 67 (4) to promote zero tolerance of abuse and neglect of residents; (l) a statement that a resident may purchase or apply for care services, other services, programs or goods from external care providers.
Inspection Finding The information package included a section from the abuse policy, however it is not in keeping with the Act. A statement regarding the use of external care providers is not included in the package of information.
Outcome Corrective action taken.
2. The Licensee failed to comply with O. Reg. 166/11, s. 24; Emergency plan, general. Specifically, the Licensee failed to comply with the following subsections: s. 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.

- (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,
 - (iv) violent outbursts,
 - (b) at least once every two years, conduct a planned evacuation of the retirement home; and
 - (c) keep a written record of the testing of the emergency plan and planned evacuations and of any changes made to improve the emergency plan.

Inspection Finding

The home's emergency plan does not include arrangements with partners; the annual testing does not include loss of essential services and violent outbursts. The emergency plan does not include a planned evacuation every two years and written record of testing and changes made to the plan.

Outcome

Corrective action taken.

3. The Licensee failed to comply with O. Reg. 1666/11, s. 25; Emergency plan, retirement home with more than 10 residents.

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

- s. 25. (2)** The licensee shall ensure that the development of the emergency plan includes,
- (a) consultation with the relevant community agencies, partner facilities and resources that will be involved in responding to an emergency;
 - (b) identification of hazards and risks that may give rise to an emergency affecting the home, whether the hazards and risks arise within the home or in the surrounding vicinity or community, and strategies to address those hazards and risks.
- (3) The licensee shall ensure that the emergency plan provides for the following:
- 1. Dealing with,
 - (ii) community disasters,
 - (iii) violent outbursts,
 - (iv) bomb threats,
 - (vi) chemical spills,
 - (viii) loss of one or more vital services.
 - 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.
 - 4. Identification of community agencies, partner facilities and resources that will be involved in responding to an emergency.
- (4) The licensee shall ensure that the emergency plan addresses the following components:
- 1. Plan activation.
 - 2. Lines of authority.

3. Communications plan. 4. Specific staff roles and responsibilities. (5) The licensee shall ensure that the emergency plan for the retirement home is evaluated and updated at least annually and that the updating includes contact information for the relevant community agencies, partner facilities and resources that will be involved in responding to an emergency.
Inspection Finding The home's emergency plan does not include the contents of section 25 of O. Reg. 166/11.
Outcome Corrective action taken.
4. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 65; Obligations of licensee re staff. The Licensee failed to comply with O. Reg. 166/11, s. 14; Staff training. 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, (d) the licensee's policy mentioned in subsection 68 (3) regarding the use of personal assistance services devices for residents. (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. s. 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.
Inspection Finding The home's annual training does not include: - policy on the use of PASDs - behavioural management - procedures for a person to complain to the licensee
Outcome Corrective action scheduled to be completed by July 5, 2014.
5. The Licensee failed to comply with O. Reg. 166/11, s. 15; Policy of zero tolerance of abuse and neglect.

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

- s. 15. (1)** The program for preventing abuse and neglect described in clause 67 (5) (c) of the Act shall entail training and retraining requirements for all staff of the retirement home, including,
- (a) training on the relationship between power imbalances between staff and residents and the potential for abuse and neglect by those in a position of trust, power and responsibility for resident care; and
 - (b) situations that may lead to abuse and neglect and how to avoid such situations.
- (3) The policy to promote zero tolerance of abuse and neglect of residents described in Subsection 67 (4) of the Act shall,
- (e) provide that the licensee of the retirement home shall ensure that the resident and resident's substitute decision-makers, if any, are notified of the results of an investigation described in clause 67 (5) (e) of the Act immediately upon completion of the investigation;
 - (g) provide that the licensee of the retirement home shall ensure that,
 - (i) an analysis of every incident of abuse or neglect of a resident at the home is undertaken promptly after the licensee becomes aware of it,
 - (ii) at least once in every calendar year, an evaluation is made to determine the effectiveness of the policy and what changes and improvements are required to prevent further occurrences of abuse and neglect of residents,
 - (iii) the results of the analysis undertaken under subclause (i) are considered in the evaluation mentioned in subclause (ii),
 - (iv) the changes and improvements mentioned in subclause (ii) are promptly implemented, and
 - (v) a written record of everything provided for in subclause (ii) and (iv) and the date of the evaluation, the names of the persons who participated in the evaluation and the date that the changes and improvements were implemented is promptly prepared.

Inspection Finding

The Licensee's abuse policy does not include all of the content required in the Regulation.

Outcome

Corrective action taken.

6. The Licensee failed to comply with O. Reg. 166/11, s. 23; Behaviour management.

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

- s. 23. (1)** Every licensee of a retirement home shall develop and implement a written behaviour management strategy that includes,
- (a) techniques to prevent and address resident behaviours that pose a risk to the resident or others in the home;
 - (b) strategies for interventions to prevent and address resident behaviours that pose a risk to the resident or others in the home;
 - (c) strategies for monitoring residents that have demonstrated behaviours that pose a risk to the resident or others in the home; and

(d) protocols for how staff and volunteers shall report and be informed of resident behaviours that pose a risk to the resident or others in the home.

Inspection Finding

The home's staff use behavioural charting and seven day observation record however, there is no written behaviour management strategy.

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 21, 2014
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