

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

Inspection Information	
<b>Date of Inspection:</b> June 6, 2014	<b>Name of Inspector:</b> Sue McKechnie
<b>Inspection Type:</b> Routine Inspection	
<b>Licensee:</b> Georgian Bay Nursing Home Ltd. / 1889 Fairgrounds Road, Stayner, ON L0M 1S0	
<b>Retirement Home:</b> Pine Villa Retirement / 120 Pine Street, Collingwood, ON L9Y 2N9	
<b>Licence Number:</b> N0139	

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
<p><b>1. The Licensee failed to comply with O. Reg. 166/11, s. 25; Emergency Plan, retirement home with more than 10 resident.</b></p> <p>Specifically, the Licensee failed to comply with the following subsections:</p> <p><b>25. (2)</b> The licensee shall ensure that the development of the emergency plan includes,</p> <p>(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.</p> <p>(3) The licensee shall ensure that the emergency plan provides for the following:</p> <ol style="list-style-type: none"> <li>1. Dealing with,               <ol style="list-style-type: none"> <li>iii. violent outbursts,</li> <li>iv. bomb threats,</li> <li>v. medical emergencies,</li> <li>vi. chemical spills,</li> <li>vii. situations involving a missing resident,</li> </ol> </li> <li>4. Identification of the community agencies, partner facilities and resources that will be involved in responding to an emergency.</li> </ol> <p>(4) The licensee shall ensure that the emergency plan addresses the following components:</p> <ol style="list-style-type: none"> <li>3. Communications plan.</li> </ol>
<p><b>Inspection Finding</b></p> <p>The home's emergency plan failed to address the identification of risks that may give rise to an emergency, and processes for how the home will address dealing with violent outbursts, bomb threats, medical</p>

emergencies, chemical spills and situations involving a missing resident. In addition the emergency plan is to address a communications plan.

**Outcome**

Corrective action taken by the Licensee.

**2. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 60; Standards.  
The Licensee failed to comply with O. Reg. 166/11, s. 27; Infection prevention and control program.**

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

**60. (4)** Every licensee of a retirement home shall ensure that the following are in place for the home:  
2. An infection prevention and control program that meets the prescribed requirements.

**27. (4)** The licensee of a retirement home shall ensure that a written surveillance protocol is established in consultation with the local medical officer of health or designate in order to identify, document and monitor residents who report symptoms of respiratory or gastrointestinal illness.

(5) The licensee of a retirement home shall ensure that,

(c) processes for meeting the requirements in clauses (a) and (b) are established and the processes are recorded in writing.

(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; and

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

**Inspection Finding**

The home has failed to develop an infection control program, in accordance with the prescribed requirements. The program is to include a surveillance protocol established in consultation with the local medical officer of health to identify, document and monitor residents with respiratory or gastrointestinal illness, and is to have processes in place for reporting and consulting with public health in the case of an outbreak. Staff members have not received required training in ways to reduce the incidence of infectious disease transmission, including hand hygiene, preventing cross contamination, handling soiled linen, protection of uniforms, separation of clean and dirty items, and the need for and process of reporting and documenting infectious illnesses.

**Outcome**

Corrective action taken by the Licensee.

**3. The Licensee failed to comply with O. Reg. 166/11, s. 14; Staff training.  
The Licensee failed to comply with RHA 2010, c. 11 s. 65; Obligations of licensees re staff.**

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

**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.

**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;

(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 home failed to provide staff training in the following required areas: Resident Bill of Rights, zero tolerance of abuse and neglect, whistle blowing protection, personal assistance services devices and Behaviour management.

**Outcome**


Corrective action taken by the Licensee.

**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 August 1, 2014
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