

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

Inspection Information	
<b>Date of Inspection:</b> July 21, 2014	<b>Name of Inspector:</b> Julie Hebert
<b>Inspection Type:</b> Routine Inspection	
<b>Licensee:</b> Pathways Inc. / 375 Trunk Road, Sault Ste. Marie, ON P6A 6T5 (the "Licensee")	
<b>Retirement Home:</b> Pathways Retirement Residence / 375 Trunk Road, Sault Ste. Marie, ON P6A 6T5 (the "home")	
<b>Licence Number:</b> N0148	

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

NON-COMPLIANCE
<p><b>1. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 54; Contents.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><b>54. (2)</b> The package of information shall include, at a minimum,</p> <ul style="list-style-type: none"> <li>(s) information as to whether the retirement home has automatic sprinklers in each resident's room;</li> <li>(t) information relating to staffing, including night time staffing levels and qualifications of staff of the retirement home;</li> </ul>
<p><b>Inspection Finding</b></p> <p>The home's information package for residents does not include the above noted sections.</p>
<p><b>Outcome</b></p> <p>Corrective action taken by the Licensee.</p>
<p><b>2. The Licensee failed to comply with O. Reg. 166/11, s. 43; Initial assessment of care needs. The Licensee failed to comply with O. Reg. 166/11, s. 44; Full assessment of care needs.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><b>43. (2)</b> The initial assessment mentioned in subsection (1) shall consider the following matters with respect to the resident:</p>

3. Risk of falling.
5. Dietary needs including known food restrictions.
6. Cognitive ability.
7. Risk of harm to self and to others.
8. Risk of wandering.
9. Needs related to drugs and other substances.

**44. (1)** Subject to section 46, no later than 14 days after a resident commences residency in a retirement home, the licensee shall ensure that a full assessment of the resident’s care needs and preferences is conducted.

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

1. Physical and mental health.
2. Functional capacity.
4. Behavioural issues.
3. Cognitive ability.
5. Need for care services.
6. Need for assistance with the activities of daily living.
7. The matters listed in subsection 43 (2).
8. Any other matter relevant to developing a plan of care for the resident.

**Inspection Finding**

The home initial assessments do not include the above noted sections. The home is not completing any type of full assessment.

**Outcome**

Corrective action scheduled to be completed by the Licensee by October 13, 2014.

**3. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 65; Training.  
The Licensee failed to comply with O. Reg. 166/11, s. 14; Staff training.**

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;

**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 has not completed training with staff members in the above noted areas.

**Outcome**

Corrective action scheduled to be completed by the Licensee by October 1, 2014.

**4. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 62; Plan of care.**

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

**62. (1)** When a resident commences his or her residency in a retirement home, the licensee shall, within the prescribed times, ensure that the resident is assessed and that a plan of care is developed based on the assessment and in accordance with this section and the regulations.

**Inspection Finding**

The home has not completed plans of care for any of the residents.

**Outcome**

Corrective action scheduled to be completed by the Licensee by October 13, 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 subsection(s):

**15. (3)** The policy to promote zero tolerance of abuse and neglect of residents described in subsection 67 (4) of the Act shall,

(d) provide that the licensee of the retirement home shall ensure that the resident's substitute decision-makers, if any, and any other person specified by the resident,

(i) are notified immediately upon the licensee becoming aware of an alleged, suspected or witnessed incident of abuse or neglect of a resident that has resulted in a physical injury or pain to a resident or that causes distress to a resident that could potentially be detrimental to a resident's health or well-being,

(ii) are notified within 12 hours upon the licensee becoming aware of any other alleged, suspected or witnessed incident of abuse or neglect of a resident;

(e) provide that the licensee of the retirement home shall ensure that the resident and the 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 the completion of the investigation;

<p><b>Inspection Finding</b></p> <p>The home's abuse and neglect policy did not include the above noted sections.</p>
<p><b>Outcome</b></p> <p>Corrective action taken by the Licensee.</p>
<p><b>6. The Licensee failed to comply with O. Reg. 166/11, s. 22; Risk of falls.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><b>22. (1)</b> 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.</p>
<p><b>Inspection Finding</b></p> <p>The home is not following its falls policy by doing the assessments, reports and follow-up that is mentioned in the policy.</p>
<p><b>Outcome</b></p> <p>Corrective action taken by the Licensee.</p>
<p><b>7. The Licensee failed to comply with O. Reg. 166/11, s. 23; Behaviour management.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><b>23. (1)</b> Every licensee of a retirement home shall develop and implement a written behaviour management strategy that includes,</p> <ul style="list-style-type: none"> <li>(a) techniques to prevent and address resident behaviours that pose a risk to the resident or others in the home;</li> <li>(b) strategies for interventions to prevent and address resident behaviours that pose a risk to the resident or others in the home;</li> <li>(c) strategies for monitoring residents that have demonstrated behaviours that pose a risk to the resident or others in the home;</li> <li>(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.</li> </ul>
<p><b>Inspection Finding</b></p> <p>The home has not implemented their behaviour management policy with residents who display at risk behaviours.</p>
<p><b>Outcome</b></p> <p>Corrective action taken by the Licensee.</p>
<p><b>8. The Licensee failed to comply with O. Reg. 166/11, s. 31; Medication management system.</b></p>

**The Licensee failed to comply with O. Reg. 166/11, s. 32; Records.**

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

**31. (1)** 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 establish a medication management system, which includes written policies and procedures, to ensure that all drugs and other substances to be administered to residents of the home are acquired, received in the home, stored, dispensed, administered, destroyed and disposed of correctly as required by law and in accordance with prevailing practices.

**32.** If the licensee or a member of the staff of a retirement home administers a drug or other substance to a resident, the licensee shall ensure that,

- (a) the person who administered the drug or other substance prepares a written record noting the name and amount of the drug or other substance, the route of its administration and the time and date on which it was administered;
- (b) if a drug is administered, there is written evidence that the drug was prescribed for the resident by a person who is authorized to prescribe a drug under section 27 of the Regulated Health Professions Act, 1991;

**Inspection Finding**

The staff members are not following the medication management policy of the home. There is no written record of administration of a drug nor is there a written record of prescription for all drugs administered by staff.

**Outcome**

Corrective action taken by the Licensee.

**9. 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):

**55. (1)** The licensee of a retirement home shall keep a record for each resident of the home that complies with the requirements of this section.

**Inspection Finding**

The home had no medical chart for three of the residents who were receiving at least two care services from the home.

**Outcome**

Corrective action taken by the Licensee.

**10. The Licensee failed to comply with O. Reg. 166/11, s. 57; Trust for resident's money.**

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

**57. (2)** For the purposes of section 72 of the Act, if money is entrusted to the care of a licensee of a retirement home on behalf of residents of the home, the licensee shall establish and maintain at least one non-interest bearing trust account at a financial institution in which the licensee shall deposit all money entrusted to the licensee's care on behalf of the residents.

**Inspection Finding**

The home does not have a trust account at a financial institution for money entrusted the their care on behalf of the residents.

**Outcome**

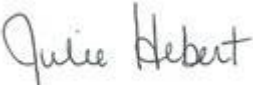
Corrective action taken by the Licensee.

**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 September 9, 2014
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