

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

Inspection Information	
<b>Date of Inspection:</b> November 26, 2014	<b>Name of Inspector:</b> Susan Lines
<b>Inspection Type:</b> Mandatory Reporting Inspection	
<b>Licensee:</b> 3673928 Ontario Inc / 261 McGill Street, Hawkesbury, ON K6A 1P9 (the "Licensee")	
<b>Retirement Home:</b> Manoir McGill / 261 McGill Street, Hawkesbury, ON K6A 1P9 (the "home")	
<b>Licence Number:</b> N0169	

Purpose of Inspection
The RHRA received a report under section 75(1) of the <i>Retirement Homes Act, 2010</i> (the "RHA").

NON-COMPLIANCE
<p><b>1. 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>23. (2)</b> The licensee shall ensure that all staff who provide care services to residents are advised at the beginning of every shift of each resident whose behaviours require heightened monitoring because those behaviours pose a risk to the resident or others in the home.</p>
<p><b>Inspection Finding</b></p> <p>The home did not have a behaviour management strategy.</p>
<p><b>Outcome</b></p> <p>Corrective action scheduled to be completed by the Licensee by January 30, 2015.</p>
<p><b>2. The Licensee failed to comply with O. Reg. 166/11, s. 47; Development of plan of care.</b></p>

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

**47. (1)** Subject to subsection (4), as soon as possible and not later than two days after a resident commences residency in a retirement home, the licensee of a retirement home shall develop an initial plan of care for the resident based on the initial assessment of the resident's immediate care needs conducted under section 43 that includes all of the information listed in subsection 62 (4) of the Act that is relevant to the resident's immediate care needs.

**47. (2)** No later than 21 days after a resident commences residency in a retirement home, the licensee of the home shall develop a complete plan of care for the resident based on the full assessment of the resident's care needs and preferences conducted under section 44 that takes into account all of the matters that must be considered in a full assessment.

**47. (3)** A licensee of a retirement home is exempt from the requirement in subsection (1) to develop an initial plan of care for a resident not later than two days after the resident commences residency if the licensee develops a complete plan of care for the resident based on a full assessment of the resident's care needs and preferences not later than two days after the resident commences residency.

**47. (4)** Subject to subsections (5) and (6), a plan of care for a resident is complete if the plan,

- (a) satisfies the requirements in subsections 62 (4) of the Act;
- (b) sets out,
  - (i) any information that is necessary to allow the licensee's staff to understand the resident's needs and preferences, including cultural, spiritual and religious preferences and customary routines,
  - (ii) the names and contact information of the resident's substitute decision-makers, if any,
  - (iii) the names of the persons who participated in the development of the plan and whether the resident and his or her substitute decision-makers, if any, participated in the development of the plan;
- (c) has been approved in accordance with subsection 62 (9) of the Act.

**47. (5)** If an assessment of a resident indicates that the resident's care needs may include dementia care, skin and wound care or the use of a personal assistance services device, the licensee shall ensure that an interdisciplinary care conference is held as part of the development of the resident's plan of care and that the resident's plan of care takes into account the results of the care conference.

**47. (6)** The licensee shall ensure that the resident, the resident's substitute decision-maker, if any, and any other person designated by the resident or the substitute decision-maker are given an opportunity to participate in the interdisciplinary care conference mentioned in subsection (5).

**47. (7)** If one of the care services that the licensee provides to a resident is the provision of a meal, the resident's plan of care is only complete if it includes a description of the food restrictions, food allergies and food sensitivities of the resident that are known.

**Inspection Finding**

The home did not have a plan of care for the resident.

**Outcome**

Corrective action scheduled to be taken by the Licensee by January 20, 2015.

**3. The Licensee failed to comply with O. Reg. 166/11, s. 59; Procedure for complaints to licensee.**

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

**59. (1)** Every licensee of a retirement home shall ensure that every written or verbal complaint made to the licensee or a staff member concerning the care of a resident or operation of the home is dealt with as follows:

1. The complaint shall be investigated. If the complaint alleges harm or risk of harm to one or more residents, the investigation shall be commenced immediately.
2. The complaint shall be resolved if possible, and a response that complies with paragraph 4 provided within 10 business days of the receipt of the complaint.
3. For those complaints that cannot be investigated and resolved within 10 business days, an acknowledgement of receipt of the complaint shall be provided within 10 business days of receipt of the complaint, including the date by which the complainant can reasonably expect a resolution, and a follow-up response that complies with paragraph 4 shall be provided as soon as possible in the circumstances.
4. A response shall be made to the person who made the complaint, indicating,
  - i. what the licensee has done to resolve the complaint,
  - ii. that the licensee believes the complaint to be unfounded and the reasons for the belief.

**59. (2)** The licensee shall ensure that a written record is kept in the retirement home that includes,

- (a) the nature of each verbal or written complaint;
- (b) the date that the complaint was received;
- (c) the type of action taken to resolve the complaint, including the date of the action, time frames for actions to be taken and any follow-up action required;
- (d) the final resolution, if any, of the complaint;
- (e) every date on which any response was provided to the complainant and a description of the response;
- (f) any response made in turn by the complainant.

**59. (3)** The licensee shall ensure that,

- (a) the written record is reviewed and analyzed for trends at least quarterly;
- (b) the results of the review and analysis are taken into account in determining what improvements are required in the retirement home;
- (c) a written record is kept of each review and of the improvements made in response.

**Inspection Finding**

Staff confirmed that a resident consistently demonstrated inappropriate behaviours towards other residents in the home and that residents complained about these behaviours. There was no evidence that

the home had documented and investigated all of these complaints as the home's complaints procedure and legislation required.

**Outcome**


Corrective action scheduled to be taken by the Licensee by January 30, 2015.

**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 January 9, 2015
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