

FINAL INSPECTION REPORT Under the Retirement Homes Act, 2010

Inspection Information

Date of Inspection: February 9, 2015 | **Name of Inspector:** Michael Hickey

Inspection Type: Routine Inspection

Licensee: Shanti Enterprises Limited / 600 Whites Road, Palmerston, ON NOG 2P0 (the "Licensee")

Retirement Home: Royal Terrace / 600 Whites Road, Palmerston, ON NOG 2P0 (the "home")

Licence Number: T0186

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; Contents.

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

- 54. (2) The package of information shall include, at a minimum,
 - (s) information as to whether the retirement home has automatic sprinklers in each resident's room;

Inspection Finding

Routine inspection revealed the Licensee's prescribed information package provided to residents did not contain information about whether the retirement home has automatic sprinklers in each resident's room.

Outcome

Corrective action taken by the Licensee.

2. The Licensee failed to comply with O. Reg. 166/11, s. 25; Emergency plan, retirement home with more than 10 residents.

Specifically, the Licensee failed to comply with the following subsection(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;

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(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.

Inspection Finding

Routine inspection revealed the Licensee's prescribed emergency plan and records associated with the plan, did not demonstrate consultation with relevant community agencies, partner facilities and resources that would be involved in responding to an emergency. Additionally, no records were presented to demonstrate that hazards and risks in the surrounding vicinity or community had been identified that may give rise to an emergency affecting the home.

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 O. Reg. 166/11, s. 55; Contents of records.

Specifically, the Licensee failed to comply with the following subsection(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.
- **55. (5)** A licensee of a retirement home shall keep records proving compliance with the Act and this Regulation in relation to,
 - (c) the skills, qualifications and training of the staff who work in the home;

Inspection Finding

Routine inspection revealed the Licensee did not keep or maintain records demonstrating that staff who work in the home had received required training in the Licensee's complaint procedure for persons to complain to the Licensee.

Outcome

Corrective action taken by the Licensee.

4. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 67; Contents.
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):

67. (5) At a minimum, the policy to promote zero tolerance of abuse and neglect of residents shall, (c) provide for a program for preventing abuse and neglect;

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- (d) contain an explanation of the duty under section 75 to report to the Registrar the matters specified in that section;
- (e) contain procedures for investigating and responding to alleged, suspected or witnessed abuse and neglect of residents;
- **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;
 - (b) situations that may lead to abuse and neglect and how to avoid such situations.
- **15. (3)** The policy to promote zero tolerance of abuse and neglect of residents described in subsection 67 (4) of the Act shall,
 - (a) contain procedures and interventions to assist and support residents who have been abused or neglected or allegedly abused or neglected;
 - (b) contain procedures and interventions to deal with persons who have abused or neglected or allegedly abused or neglected residents, as appropriate;
 - (c) identify measures and strategies to prevent abuse and neglect;
 - (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;
 - (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,

Inspection Finding

Routine inspection revealed the Licensee's prescribed policy to promote zero tolerance of abuse and neglect of residents was not aligned with the prescribed content of the Act and Ontario Regulation 166/11.

Outcome

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| Corrective action taken by the Licensee. | |
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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 | |
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| | JAD) | March 13, 2015 | |

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