

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

Inspection Information

Date of Inspection: April 13, 2015 Name of Inspector: Corina Gadde

Inspection Type: Routine Inspection

Licensee: Country Haven Retirement Homes Inc. / 55 King Street, Kitchener, ON N2G 4W1 (the "Licensee")

Retirement Home: Country Haven Retirement Home / 1387 Beachburg Road, Beachburg, ON KOJ 1CO (the

"home")

Licence Number: N0131

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,
 - (c) the licensee's policy mentioned in subsection 67 (4) to promote zero tolerance of abuse and neglect of residents;
 - (d) the licensee's procedure for complaints mentioned in subsection 73 (1);
 - (I) a statement that a resident may purchase or apply for care services, other services, programs or goods from external care providers;
 - (s) information as to whether the retirement home has automatic sprinklers in each resident's room;

Inspection Finding

The Licensee's package of information for residents does not contain all required information.

Outcome

Corrective action taken by the Licensee.

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 subsection(s):

Final Inspection Report Page 1 of 5



24. (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,
 - (ii) situations involving a missing resident,
 - (iii) medical emergencies,
 - (iv) violent outbursts;
- (b) at least once every two years, conduct a planned evacuation of the retirement home;

Inspection Finding

The Licensee has not completed the required annual testing of the emergency plan or planned evacuation.

Outcome

Corrective action is scheduled to be taken by the Licensee by May 31, 2015 for annual testing of the plan, and September 30, 2015 for the planned evacuation.

3. 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. (3) The licensee shall ensure that the emergency plan provides for the following:
 - 1. Dealing with,
 - iii. violent outbursts,
 - viii. loss of one or more essential 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.

Inspection Finding

The emergency plan does not provide for loss of one or more essential services, violent outbursts and evacuation of the retirement home, including a system to account for the whereabouts of all residents in the event that it is necessary to evacuate.

Outcome

Corrective action is scheduled to be taken by the Licensee by May 31, 2015.

4. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 65; Additional training for direct care staff.

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):

Final Inspection Report Page 2 of 5



- <u>65. (5)</u> 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.
- **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

Staff has not received training in the procedure for a person to complain to the Licensee. All direct care staff has not received training in behaviour management.

Outcome

Corrective action is scheduled to be taken by the Licensee by May 31, 2015.

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,
 - (e) contain procedures for investigating and responding to alleged, suspected or witnessed abuse and neglect of residents;
 - (f) set out the consequences for those who abuse or neglect 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. (2)** The procedures for investigating and responding to alleged, suspected or witnessed abuse and neglect of residents described in clause 67 (5) (e) of the Act shall include details outlining who will undertake the investigation and who will be informed of the investigation.
- **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;

Final Inspection Report Page 3 of 5



(b) contain procedures and interventions to deal with persons who have abused or neglected or allegedly abused or neglected residents, as appropriate;

Inspection Finding

The Licensee's policy to promote zero tolerance of abuse and neglect of residents does not contain all of the required information.

Outcome

Corrective action taken by the Licensee.

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

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

- **23. (1)** Every licensee of a retirement home shall develop and implement a written behaviour management strategy that includes,
 - (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

Protocols for how staff should report and be informed of residents behaviours that pose a risk were not included in each of the behaviour management strategies.

Outcome

Corrective action is scheduled to be taken by the Licensee by May 31, 2015.

Final Inspection Report Page 4 of 5



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
Cam Gadde	May 4, 2015

Final Inspection Report Page 5 of 5