

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

Inspection Information	
Date of Inspection: April 9, 2015	Name of Inspector: Susan Lines
Inspection Type: Compliance Inspection	
Licensee: Jardins Belle Rive Inc. / 2950 Laurier Street, Rockland, ON K4K 1T3 (the "Licensee")	
Retirement Home: Jardins Belle Rive / 2950 Laurier Street, Rockland, ON K4K 1T3 (the "home")	
Licence Number: N0099	

Purpose of Inspection
The RHRA conducts compliance inspections as set out in section 77(1) of the <i>Retirement Homes Act, 2010</i> (the "RHA").

NON-COMPLIANCE
<p>1. 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.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><u>67. (5)</u> At a minimum, the policy to promote zero tolerance of abuse and neglect of residents shall,</p> <ul style="list-style-type: none"> (a) clearly set out what constitutes abuse and neglect; (c) provide for a program for preventing abuse and neglect; (d) contain an explanation of the duty under section 75 to report to the Registrar the matters specified in that section; (f) set out the consequences for those who abuse or neglect residents; <p><u>15. (1)</u> 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,</p> <ul style="list-style-type: none"> (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. <p><u>15. (2)</u> 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.</p> <p><u>15. (3)</u> The policy to promote zero tolerance of abuse and neglect of residents described in subsection 67 (4) of the Act shall,</p>

- (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;
- (f) provide that the licensee of the retirement home shall ensure that the appropriate police force is immediately notified of any alleged, suspected or witnessed incident of abuse or neglect of a resident that the licensee suspects may constitute a criminal offence;
- (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,
 - (v) a written record of everything provided for in subclauses (ii) and (iv) and the date of the evaluation, the names of the persons who participated in the evaluation and the date that the changes and improvements were implemented is promptly prepared.

Inspection Finding

The home’s abuse policy did not meet the requirements.

Outcome

Corrective action taken by the Licensee.

2. The Licensee failed to comply with O. Reg. 166/11, s. 11; Posted information.

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

11. (1) For the purposes of paragraph 4 of subsection 55 (2) of the Act, the following information is prescribed as information that must be posted in a retirement home under that subsection:

<p>6. A copy of the most recent final inspection report prepared by an inspector under section 77 of the Act, subject to section 114 of the Act.</p>
<p>Inspection Finding The home’s most recent inspection report was not posted in the home.</p>
<p>Outcome Corrective action taken by the Licensee.</p>
<p>3. The Licensee failed to comply with O. Reg. 166/11, s. 24; Emergency plan, general. The Licensee failed to comply with O. Reg. 166/11, s. 25; Emergency plan, retirement home with more than 10 residents.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p>24. (5) The licensee shall,</p> <ul style="list-style-type: none"> (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, <ul style="list-style-type: none"> (ii) situations involving a missing resident, (iii) medical emergencies, (iv) violent outbursts; (c) keep a written record of the testing of the emergency plan and planned evacuations and of any changes made to improve the emergency plan. <p>25. (3) The licensee shall ensure that the emergency plan provides for the following:</p> <ul style="list-style-type: none"> 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. 3. Resources, supplies and equipment vital for the emergency response being set aside and readily available at the retirement home and regular testing of all such resources, supplies and equipment to ensure that they are in working order. <p>25. (5) The licensee shall ensure that the emergency plan for the retirement home is evaluated and updated at least annually and that the updating includes contact information for the relevant community agencies, partner facilities and resources that will be involved in responding to an emergency.</p>
<p>Inspection Finding The home’s emergency plan did not meet the requirements.</p>
<p>Outcome Corrective action scheduled to be completed by the Licensee by May 31, 2015.</p>

- 4. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 65; Training.**
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.
The Licensee failed to comply with O. Reg. 166/11, s. 27; Infection prevention and control program.
The Licensee failed to comply with O. Reg. 166/11, s. 29; Administration of drugs or other substances.

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;

65. (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.

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.

27. (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.

29. 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 ensure that,

- (e) if the licensee or a staff member is involved in the administration of the drug or other substance at the home, that the licensee or staff member is trained in,
 - (ii) the safe disposal of syringes and other sharps,
 - (iii) recognizing an adverse drug reaction and taking appropriate action;

Inspection Finding

The home's records showed that the staff was not all trained in the topics on which they each required training. There was no evidence that four staff members had been trained in the home's complaints procedure, infection control, the Bill of Rights, the home's abuse policy, whistleblowing, the home's policy on PASDs, fire and safety or the home's behavior management strategy in 2013. There was no evidence that another staff member had been trained in infection control, the home's policies on PASDs or behavior management strategy.

There was no evidence that four staff members were trained on the home's policies on behavior management and PASDs. There was no evidence that another staff member was trained on fire and safety or the home's policies on abuse and behavior management. There was no evidence that a staff member was trained on the home's PASD policy. There was no evidence that six out of the home's seven unregulated care providers were trained on the safe disposal of syringes and other sharps and recognizing an adverse drug reaction and taking appropriate action.

Outcome

Corrective action taken by the Licensee.

5. 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,

(c) strategies for monitoring residents that have demonstrated behaviours that pose a risk to the resident or others in the home;

(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

The home's behaviour management strategy did not meet the requirements.

Outcome


Corrective action scheduled to be completed by the Licensee by May 31, 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 May 6, 2015
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