

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

Inspection Information	
Date of Inspection: April 23, 2015	Name of Inspector: Julie Hebert
Inspection Type: Routine Inspection	
Licensee: 1582611 Ontario Ltd. / 99 Walford Road, Sudbury, ON P3E 6K3 (the "Licensee")	
Retirement Home: The Walford On The Park (Copper Cliff) / 38 Godfrey Drive, Copper Cliff, ON P0M 1N0 (the "home")	
Licence Number: N0172	

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>1. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 54; Contents.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p>54. (2) The package of information shall include, at a minimum, (t) information relating to staffing, including night time staffing levels and qualifications of staff of the retirement home;</p>
<p>Inspection Finding</p> <p>The home's information package to residents is not in compliance with the above noted section.</p>
<p>Outcome</p> <p>Corrective action taken by the Licensee.</p>
<p>2. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 53; Agreement required.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p>53. (1) The licensee of a retirement home shall enter into a written agreement with every resident of the home before the resident commences residency in the home.</p>
<p>Inspection Finding</p> <p>The home is not entering into agreements with residents prior to them commencing their tenancy.</p>

<p>Outcome Corrective action taken by the Licensee.</p>
<p>3. The Licensee failed to comply with O. Reg. 166/11, s. 11; Posted information.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p>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> <ul style="list-style-type: none"> 3. An explanation of the procedures to be followed in the case of an evacuation. 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>Inspection Finding The home has not posted the above noted information in the home.</p>
<p>Outcome Corrective action taken by the Licensee.</p>
<p>4. 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"> (i) the loss of essential services, (ii) situations involving a missing resident, (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. (2) The licensee shall ensure that the development of the emergency plan includes,</p> <ul style="list-style-type: none"> (a) consultation with the relevant community agencies, partner facilities and resources that will be involved in responding to an emergency;
<p>Inspection Finding The home's emergency plan was not in compliance with the above noted areas.</p>

Outcome

Corrective action scheduled to be completed by the Licensee by June 30, 2015.

- 5. 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.**

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

43. (1) Subject to section 45, no later than two days after a resident commences residency in a retirement home, the licensee of the home shall ensure that an initial assessment of the resident’s immediate care needs is conducted.

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:

- 7. The matters listed in subsection 43 (2).

Inspection Finding

The initial and full assessments for the most recent residents were either not completed or were not in compliance with the above noted sections.

Outcome

Corrective action taken by the Licensee.

- 6. 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.**

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;

(b) the need for and process of reporting, providing surveillance of and documenting incidents of infectious illness.

Inspection Finding

The home has not completed training with all staff in the above noted areas.

Outcome

Corrective action scheduled to be completed by the Licensee by June 15, 2015.

7. 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,
(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. (3) The policy to promote zero tolerance of abuse and neglect of residents described in subsection 67 (4) of the Act shall,

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

<p>Inspection Finding The home's abuse and neglect policy is not in compliance with the above noted areas.</p>
<p>Outcome Corrective action taken by the Licensee.</p>
<p>8. The Licensee failed to comply with O. Reg. 166/11, s. 22; Risk of falls.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p>22. (1) 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>Inspection Finding The home's falls procedures were not in compliance with the above noted sections.</p>
<p>Outcome Corrective action taken by the Licensee.</p>
<p>9. The Licensee failed to comply with O. Reg. 166/11, s. 23; Behaviour management.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p>23. (1) Every licensee of a retirement home shall develop and implement a written behaviour management strategy that includes,</p> <p>(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.</p>
<p>Inspection Finding The home's behaviour management is not in compliance with the above noted areas.</p>
<p>Outcome Corrective action taken by the Licensee.</p>
<p>10. The Licensee failed to comply with O. Reg. 166/11, s. 32; Records.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p>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,</p>

(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;

Inspection Finding

The home's medication administration procedure was not in compliance with the above noted section.

Outcome

Corrective action taken by the Licensee.

11. The Licensee failed to comply with O. Reg. 166/11, s. 51; Prohibited devices.

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

51. For the purposes of subsection 60 (3) of the Act, every licensee of a retirement home shall ensure that none of the following devices are used in the home:

1. A roller bar on wheelchairs, commodes or toilets.
3. Vest or jacket restraints.

Inspection Finding

The home's restraint policy includes the provision for use of devices which are prohibited under the legislation. Furthermore, the policy speaks to use of "least restraint" not zero restraint except under Common Law.

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 May 26, 2015
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