

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

Inspection Information	
Date of Inspection: June 10, 2015	Name of Inspector: Rachelle Harber
Inspection Type: Routine Inspection	
Licensee: Pranajen Group Ltd. / 220 Dundas Street, Whitby, ON L1N 8M7 (the "Licensee")	
Retirement Home: Nimigon Retirement Home / 7715 Beaverdams Road, Niagara Falls, ON L2H 2J4 (the "home")	
Licence Number: S0089	

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 O. Reg. 166/11, s. 24; Emergency plan, general.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><u>24. (5)</u> 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, (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>Inspection Finding</p> <p>The Licensee did not complete the required testing of the emergency plan and did not keep a written record of the testing.</p>
<p>Outcome</p> <p>Corrective action taken by the Licensee.</p>

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;

(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.

25. (3) The licensee shall ensure that the emergency plan provides for the following:

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.

Inspection Finding

The Licensee did not consult with community agencies. The Licensee did not identify risks and hazards that may give rise to an emergency affecting the home. The homes emergency evacuation plan does not include a system for account of residents. Further, the Licensee does not have resources, supplies and equipment vital for emergency response set aside and readily available and regularly tested.

Outcome

Corrective action scheduled to be completed by the Licensee by July 17, 2015.

3. The Licensee failed to comply with O. Reg. 166/11, s. 43; Initial assessment of care needs.

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

43. (2) The initial assessment mentioned in subsection (1) shall consider the following matters with respect to the resident:

2. Presence of infectious diseases.

3. Risk of falling.

5. Dietary needs including known food restrictions.

6. Cognitive ability.

7. Risk of harm to self and to others.

Inspection Finding

The Licensee did not ensure that the initial assessment of the resident's immediate care needs considers all of the requirements as listed.

<p>Outcome Corrective action taken by the Licensee.</p>
<p>4. The Licensee failed to comply with O. Reg. 166/11, s. 44; Full assessment of care needs.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p>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.</p>
<p>Inspection Finding Full assessments are being completed, however, there is no evidence to show that the assessments are being completed within the required time frame as there is no date on the assessment to note when the assessment was completed.</p>
<p>Outcome Corrective action taken by the Licensee.</p>
<p>5. 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; On-going 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.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p>65. (2) Every licensee of a retirement home shall ensure that no staff work in the home unless they have received training in,</p> <ul style="list-style-type: none"> (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; <p>65. (4) The licensee shall ensure that the persons who are required to receive the training described in subsection (2) receive on-going training as described in that subsection at the times required by the regulations.</p>

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.

14. (2) For the purposes of subsection 65 (4) of the Act, the licensee shall ensure that the persons who are required to receive training under subsection 65 (2) of the Act receive the training at least annually.

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

Not all staff has completed the required training as listed.

Outcome

Corrective action scheduled to be completed by the Licensee by August 1, 2015.

6. 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):

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

- (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;

Inspection Finding

The homes policy to promote zero tolerance of abuse does not contain the requirement listed.

Outcome

Corrective action taken by the Licensee.

7. The Licensee failed to comply with O. Reg. 166/11, s. 20; Food preparation.

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

20. (4) The licensee shall ensure that whenever food is prepared in the retirement home, at least one person involved in preparing the food holds a current certificate in food handling from the local public health unit or has recently successfully completed a food handling training program equivalent to that offered by public health units.

Inspection Finding

The Licensee failed to ensure that whenever food is prepared in the retirement home, at least one person involved in preparing the food holds a current certificate in food handling.

Outcome

Corrective action scheduled to be completed by the Licensee by September 1, 2015.

8. The Licensee failed to comply with O. Reg. 166/11, s. 41; Dementia care program.

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

41. (4) The program shall be supervised by a member of a College, as defined in the Regulated Health Professions Act, 1991, with specific training in dementia care and care of older adults.

Inspection Finding

The homes dementia care program is not supervised by a member of a College with training in dementia care.

Outcome


Corrective action scheduled to be completed by the Licensee by September 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 August 5, 2015
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