

FINAL INSPECTION REPORT Under the Retirement Homes Act, 2010

Inspection Information

Date of Inspection: May 14, 2015 **Name of Inspector:** Janet Hall

Inspection Type: Routine Inspection

Licensee: 2249000 Ontario Ltd. / 4 Partridge Lane, Scarborough, ON M1T 3C6 (the "Licensee")

Retirement Home: Bethseda Home / 4 Partridge Lane, Scarborough, ON M1T 3C6 (the "home")

Licence Number: T0290

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. 53; Agreement required.

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

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.

Inspection Finding

Resident agreements were not signed prior to occupancy for all applicable residents.

Outcome

Corrective action taken by the Licensee.

2. The Licensee failed to comply with O. Reg. 166/11, s. 26; Emergency plan, retirement home with 10 or fewer residents.

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

- <u>26.</u> The emergency plan for a retirement home that has 10 or fewer residents shall, in addition to the requirements in section 24, meet the following requirements:
 - 2. The plan shall identify and address hazards and risks that may give rise to an emergency affecting the home.

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3. The plan shall include steps in the evacuation of the 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 noted sections were missing from the Licensee's Emergency Plan.

Outcome

Corrective action scheduled to be taken by the Licensee by July 30, 2015.

3. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 60; Safety plans.

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):

- **60. (4)** Every licensee of a retirement home shall ensure that the following are in place for the home:
 - 2. An infection prevention and control program that meets the prescribed requirements.
- **27. (7)** The licensee of a retirement home shall ensure that waterless, alcohol-based hand sanitizer or another form of hand sanitation that provides equivalent protection against infectious disease transmission is available for use by residents and staff in communal resident areas and in staff work areas.

Inspection Finding

The Infection Prevention and Control program does not meet the requirements as the Licensee did not complete TB testing for the residents within 14 days of admission and staff upon hire. Hand sanitizer was also not available throughout the home.

Outcome

Corrective action scheduled to be taken by the Licensee by August 8, 2015.

4. 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. (2)** The initial assessment mentioned in subsection (1) shall consider the following matters with respect to the resident:
 - 1. Continence.
 - 2. Presence of infectious diseases.
 - 3. Risk of falling.
 - 4. Known allergies.
 - 5. Dietary needs including known food restrictions.

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- 6. Cognitive ability.
- 7. Risk of harm to self and to others.
- 8. Risk of wandering.
- 9. Needs related to drugs and other substances.
- **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).
 - 8. Any other matter relevant to developing a plan of care for the resident.

Inspection Finding

The Licensee did not do an initial assessment and the full assessment within 14 days of admission on all applicable residents.

Outcome

Corrective action taken by the Licensee.

5. 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):

- **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 training was done, as required, in the noted sections.

Outcome

Corrective action taken by the Licensee.

6. The Licensee failed to comply with O. Reg. 166/11, s. 30; Storage of drugs or other substances.

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

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- <u>30.</u> If drugs or other substances are stored in a retirement home on behalf of a resident, the licensee of the home shall ensure that,
 - (a) the drugs or other substances are stored in an area or a medication cart that,
 - (ii) is locked and secure,
 - (iii) protects the drugs or other substances from heat, light, humidity or other environmental conditions that may affect their efficacy,
 - (iv) complies with the manufacturer's instructions for the storage of the drugs or other substances;
 - (b) controlled substances as defined in the Controlled Drugs and Substances Act (Canada) are stored in a separate, double-locked stationary cupboard in the locked area or stored in a separate locked area within the locked medication cart;

Inspection Finding

The Licensee did not ensure proper storage of drugs as required.

Outcome

Corrective action taken by the Licensee.

7. 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):

- **55. (1)** The licensee of a retirement home shall keep a record for each resident of the home that complies with the requirements of this section.
- **55.** (2) The record for each resident shall include,
 - (a) documentation of all consents related to the collection, use, retention or disclosure of the resident's personal information, including personal health information;

Inspection Finding

The Licensee did not have signed consents to release medical information on all applicable residents as required.

Outcome

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
Guet Hall	August 28, 2015

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