

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

| Inspection Information | |
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| Date of Inspection: August 25, 2015 | Name of Inspector: Julie Hebert |
| Inspection Type: Routine Inspection | |
| Licensee: 1612714 Ontario Inc. / 307 King Street, Hamilton, ON L8N 1C1 (the "Licensee") | |
| Retirement Home: Cathmar Manor / 236 Catherine Street, Hamilton, ON L8L 4S6 (the "home") | |
| Licence Number: S0159 | |

| Purpose of Inspection |
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| The RHRA conducts routine inspections as set out in section 77(3) of the <i>Retirement Homes Act, 2010</i> (the "RHA"). |

| NON-COMPLIANCE |
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| <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, (s) information as to whether the retirement home has automatic sprinklers in each resident's room;</p> |
| <p>Inspection Finding</p> <p>The information package for residents is not in compliance in the above noted area.</p> |
| <p>Outcome</p> <p>Corrective action taken by the Licensee.</p> |
| <p>2. 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, (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,</p> |

(i) the loss of essential services,
(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.

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

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 home's emergency plan was not in compliance with the above noted sections.

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

3. 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.

Inspection Finding
The home had not completed assessments on all residents within the required time parameters.

Outcome
Corrective action taken by the Licensee.

4. The Licensee failed to comply with O. Reg. 166/11, s. 59; Procedure for complaints to licensee.

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

59. (2) The licensee shall ensure that a written record is kept in the retirement home that includes,
(a) the nature of each verbal or written complaint;
(b) the date that the complaint was received;

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| <p>(e) every date on which any response was provided to the complainant and a description of the response;</p> |
| <p>Inspection Finding The home's complaints procedures were not in compliance with the above noted areas.</p> |
| <p>Outcome Corrective action scheduled to be completed by the Licensee by September 30, 2015.</p> |
| <p>5. 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 has not implemented strategies to mitigate risk of falls.</p> |
| <p>Outcome Corrective action scheduled to be completed by the Licensee by September 30, 2015.</p> |
| <p>6. 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>(c) strategies for monitoring residents that have demonstrated behaviours that pose a risk to the resident or others in the home;</p> |
| <p>Inspection Finding The home's behaviour management policy is not in compliance in the above noted section.</p> |
| <p>Outcome Corrective action taken by the Licensee.</p> |
| <p>7. The Licensee failed to comply with O. Reg. 166/11, s. 30; Storage of drugs or other substances.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p>30. If drugs or other substances are stored in a retirement home on behalf of a resident, the licensee of the home shall ensure that,</p> |

(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 home's medication storage procedures were not in compliance with the above noted section.

Outcome

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

8. The Licensee failed to comply with O. Reg. 166/11, s. 32; Records.

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

- 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,
- (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;
 - (b) if a drug is administered, there is written evidence that the drug was prescribed for the resident by a person who is authorized to prescribe a drug under section 27 of the Regulated Health Professions Act, 1991;

Inspection Finding

The home's medication management procedures were not in compliance with the above noted sections.

Outcome

Corrective action scheduled to be completed by the Licensee by September 30, 2105.

- 9. 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. 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,
- (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;

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.

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,

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

Inspection Finding

The home had not completed training of all staff in the above noted areas.

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/>

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| Signature of Inspector  | Date September 28, 2015 |
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