

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

Inspection Information	
Date of Inspection: October 1, 2015	Name of Inspector: Janet Evans
Inspection Type: Routine Inspection	
Licensee: Bertram Place Retirement Living Centre Inc. / 21 Hatt Street, Dundas, ON L9H 2E9 (the "Licensee")	
Retirement Home: Bertram Place Retirement Living Centre / 21 Hatt Street, Dundas, ON L9H 2E9 (the "home")	
Licence Number: S0025	

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. 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, (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> <p>25. (2) The licensee shall ensure that the development of the emergency plan includes, (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.</p> <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</p> <p>The Licensee had not completed an identification of potential hazards and risks for the home and mitigating strategies related to this. In addition to this the Licensee did not maintain written evidence of the testing of the plan and changes made to improve the system nor did they have evidence of completing an annual evaluation and update of their emergency plan.</p>

<p>Outcome Corrective action taken by the Licensee</p>
<p>2. 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 Licensee did not have evidence of a written strategy to mitigate the risk of falls in the common areas of the home.</p>
<p>Outcome Corrective action taken by the Licensee.</p>
<p>3. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 65; Training. 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"> (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; <p>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.</p> <p>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,</p> <ul style="list-style-type: none"> (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 Licensee was unable to show evidence that new staff had completed the mandatory training listed prior to working with the residents.

Outcome

Corrective action taken by the Licensee.

4. 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 Licensee had a written behaviour management strategy but it did not include strategies for monitoring residents or protocols for how volunteers would be informed of behaviours that posed a risk.

Outcome

Corrective action taken by the Licensee.

5. 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,
(e) contain procedures for investigating and responding to alleged, suspected or witnessed abuse and neglect of residents;

15. (2) 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.

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

(a) contain procedures and interventions to assist and support residents who have been abused or neglected or allegedly abused or neglected;

(c) identify measures and strategies to prevent abuse and neglect;

Inspection Finding

The Licensee's policy of zero tolerance of abuse and neglect did not include the required elements listed.

Outcome

Corrective action taken by 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 November 9, 2015
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