

FINAL INSPECTION REPORT Under the Retirement Homes Act, 2010

Inspection Information

Date of Inspection: November 5, 2015 Name of Inspector: Susan Lines

Inspection Type: Mandatory Reporting Inspection

Licensee: Carveth Nursing Home Limited / 375 James Street, Gananoque, ON K7G 2Z1 (the "Licensee")

Retirement Home: Carveth Care Centre / 375 James Street, Gananoque, ON K7G 2Z1 (the "home")

Licence Number: N0017

Purpose of Inspection

The RHRA received a report under section 75(1) 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. 62; Contents of plan.

The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 62; Persons who approve plans of care.

The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 62; Documentation.

The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 62; Reassessment and revision.

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

- **62. (4)** The licensee of a retirement home shall ensure that there is a written plan of care for each resident of the home that sets out,
 - (b) the planned care services for the resident that the licensee will provide, including,
 - (ii) the goals that the services are intended to achieve,
 - (iii) clear directions to the licensee's staff who provide direct care to the resident;
- **62. (9)** The licensee shall ensure that the following persons have approved the plan of care, including any revisions to it, and that a copy is provided to them:
 - 1. The resident or the resident's substitute decision-maker.
- **62. (11)** The licensee shall ensure that the following are documented in accordance with the regulations, if any:
 - 1. The provision of the care services set out in the plan of care.
 - 2. The outcomes of the care services set out in the plan of care.
 - 3. The effectiveness of the plan of care.

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<u>62. (12)</u> The licensee shall ensure that the resident is reassessed and the plan of care reviewed and revised at least every six months and at any other time if, in the opinion of the licensee or the resident, (c) the care services set out in the plan have not been effective.

Inspection Finding

The plans of care for two residents did not outline goals and clear directions to staff with regard to the residents' feeding needs as required. A resident's plan of care showed that the resident required monitoring during mealtimes. There was no evidence that the home's staff documented the provision of care services as required. A resident's plan of care had not been approved by their substitute decision-maker since January 2015 despite being updated since then. A resident's plan of care did not include clear direction to the staff with regard to drainage of the resident's catheter when staff was providing this assistance. The home's records showed that a resident had persistent discomfort with the catheter and persistent skin care needs related to his catheterization. The home's records did not show that the home had reassessed the resident and updated his plan of care accordingly.

Outcome

Correction action scheduled to be taken by the Licensee by January 15, 2016.

2. The Licensee failed to comply with O. Reg. 166/11, s. 14; Staff training.

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

- **14. (3)** For the purposes of paragraph 5 of subsection 65 (5) of the Act, every licensee of a retirement home shall ensure that every staff member who provides a care service to a resident has received or receives training in,
 - (b) each care service offered in the home so that the staff member is able to understand the general nature of each of those services, the standards applicable under the Act to each of those services and the aspects of each of those services that may be relevant to the staff member's own duties in the home.

Inspection Finding

Management confirmed that the staff had not received training in assistance with feeding or continence care. The home's records showed that two residents required assistance with feeding and that staff was feeding the residents. Three residents' plans of care showed that residents required assistance with feeding and continence care. Staff was not trained on these care services when they should have been.

Outcome

Corrective action scheduled to be taken by the Licensee by January 15, 2016.

3. The Licensee failed to comply with O. Reg. 166/11, s. 36; Continence care.

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

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- **36. (1)** If one of the care services that the licensee or the staff of a retirement home provide to a resident of the home is continence care, the licensee shall establish a continence care program that includes,
 - (a) measures to promote continence;
 - (b) measures to prevent constipation, including nutrition and hydration protocols;
 - (c) toileting programs;
 - (d) strategies to maximize the resident's independence, comfort and dignity, including the use of equipment, supplies, devices and assistive aids.

Inspection Finding

The plans of care for three residents showed that they were on the home's toileting or continence care program. The home's records and staff interviews showed that staff assisted the residents with continence care. The home's manager confirmed that the home did not have a continence care program and had not implemented one when one was required.

Outcome

Corrective action scheduled to be taken by the Licensee by January 15, 2016.

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

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

- <u>32.</u> 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;

Inspection Finding

The persons who administered prescription creams to a resident between May and November 2015 had not documented that the creams had been administered as required.

Outcome

Corrective action scheduled to be taken by the Licensee by December 31, 2015.

5. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 54; Contents.

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

- **54.** (2) The package of information shall include, at a minimum,
 - (k) an itemized list of the different types of accommodation and care services provided in the retirement home and their prices;

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Inspection Finding

The home's information package did not include all the care services that the home offered to residents.

Outcome

Corrective action scheduled to be taken by the Licensee by January 15, 2016.

6. The Licensee failed to comply with O. Reg. 166/11, s. 11; Posted information.

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

- **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:
 - 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.

Inspection Finding

The home did not have the most recent final inspection report posted in the home.

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
Foor Ls	December 10, 2015

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