

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

Inspection Information	
<b>Date of Inspection:</b> August 23, 2016	<b>Name of Inspector:</b> Julie Hebert
<b>Inspection Type:</b> Compliance Inspection	
<b>Licensee:</b> 1752216 Ontario Inc. / 352 Seacliff Drive, Leamington, ON N8H 4E1 (the "Licensee")	
<b>Retirement Home:</b> New Beginnings Rest Home / 106 Talbot Street , Leamington, ON N8H 1M9 (the "home")	
<b>Licence Number:</b> S0099	

Purpose of Inspection
The RHRA conducts compliance inspections as set out in section 77(1) of the <i>Retirement Homes Act, 2010</i> (the "RHA").

NON-COMPLIANCE
<p><b>1. 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. 29; Administration of drugs or other substances.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><b>14. (2)</b> 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.</p> <p><b>29.</b> If one of the care services that the licensee or the staff of a retirement home provide to a resident of the home is the administration of a drug or other substance, the licensee shall ensure that,</p> <p>(c) neither the licensee nor a staff member administers a drug to a resident in the home unless the licensee or the staff member has received training in the procedures applicable to the administration of the drug;</p> <p>(e) if the licensee or a staff member is involved in the administration of the drug or other substance at the home, that the licensee or staff member is trained in,</p> <p>(i) ways of reducing the incidence of infectious disease, including maintaining proper hand hygiene,</p> <p>(ii) the safe disposal of syringes and other sharps,</p> <p>(iii) recognizing an adverse drug reaction and taking appropriate action;</p>
<p><b>Inspection Finding</b></p> <p>The home was not completing annual training with all staff on the home's complaint procedure. The home not completed orientation training with all relevant staff on medication administration.</p>

**Outcome**

The Licensee submitted a plan to achieve compliance by September 16, 2016. RHRA to confirm compliance by inspection.

**2. 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. (1)** The program for preventing abuse and neglect described in clause 67 (5) (c) of the Act shall entail training and retraining requirements for all staff of the retirement home, including,

(b) situations that may lead to abuse and neglect and how to avoid such situations.

**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;

(g) provide that the licensee of the retirement home shall ensure that,

(ii) at least once in every calendar year, an evaluation is made to determine the effectiveness of the policy and what changes and improvements are required to prevent further occurrences of abuse and neglect of residents,

(iii) the results of the analysis undertaken under subclause (i) are considered in the evaluation mentioned in subclause (ii),

(iv) the changes and improvements mentioned in subclause (ii) are promptly implemented,

(v) a written record of everything provided for in subclauses (ii) and (iv) and the date of the evaluation, the names of the persons who participated in the evaluation and the date that the changes and improvements were implemented is promptly prepared.

**Inspection Finding**

The home's abuse policy is not in alignment with the legislation in these sections.

**Outcome**

The Licensee took corrective action to achieve compliance.

**3. The Licensee failed to comply with O. Reg. 166/11, s. 31; Medication management system.**

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

**31. (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 the administration of a drug or other substance, the licensee shall establish a medication management system, which includes written policies and procedures, to ensure that all drugs and other substances to be administered to residents of the home are acquired, received in the home, stored, dispensed, administered, destroyed and disposed of correctly as required by law and in accordance with prevailing practices.

**Inspection Finding**

On the date of inspection, the home's medication administration policy did not include provisions for how the home will destroy and dispose of medication.

**Outcome**


The Licensee took corrective action to achieve compliance.

**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 September 29, 2016
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