

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

Inspection Information	
<b>Date of Inspection:</b> September 29, 2016	<b>Name of Inspector:</b> Julie Hebert
<b>Inspection Type:</b> Routine Inspection	
<b>Licensee:</b> 1528402 Ontario Limited / 7835 Confederation Line, Watford, ON N0M 2S0 (the "Licensee")	
<b>Retirement Home:</b> Brookside Retirement Living / 7835 Confederation Line, Watford, ON N0M 2S0 (the "home")	
<b>Licence Number:</b> S0017	

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><b>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.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><b>24. (4)</b> The licensee shall keep current all arrangements with community agencies, partner facilities and resources that will be involved in responding to an emergency.</p> <p><b>25. (2)</b> 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><b>Inspection Finding</b></p> <p>The home did not identify all risks and hazards that may give rise to an emergency affecting the home. The home did not have current arrangements for all community agencies that would be involved in responding to an emergency at the home.</p>
<p><b>Outcome</b></p> <p>The Licensee has advised it has taken corrective action to achieve compliance. RHRA to confirm compliance by inspection.</p>

**2. The Licensee failed to comply with O. Reg. 166/11, s. 43; Initial 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:

2. Presence of infectious diseases.
3. Risk of falling.
8. Risk of wandering.

**Inspection Finding**

The home's initial assessments did not include all of the above areas.

**Outcome**

The Licensee has advised it has taken corrective action to achieve compliance. RHRA to confirm compliance by inspection.

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

- (d) provide that the licensee of the retirement home shall ensure that the resident's substitute decision-makers, if any, and any other person specified by the resident,
  - (i) are notified immediately upon the licensee becoming aware of an alleged, suspected or witnessed incident of abuse or neglect of a resident that has resulted in a physical injury or pain to a resident or that causes distress to a resident that could potentially be detrimental to a resident's health or well-being,
- (g) provide that the licensee of the retirement home shall ensure that,
  - (i) an analysis of every incident of abuse or neglect of a resident at the home is undertaken promptly after the licensee becomes aware of it,
  - (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.

<p><b>Inspection Finding</b></p> <p>The home's abuse policy was not in compliance in the above noted areas.</p>
<p><b>Outcome</b></p> <p>The Licensee submitted a plan to achieve compliance by October 29, 2016. RHRA to confirm by inspection</p>
<p><b>4. The Licensee failed to comply with O. Reg. 166/11, s. 59; Procedure for complaints to licensee.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><b>59. (2)</b> The licensee shall ensure that a written record is kept in the retirement home that includes, (e) every date on which any response was provided to the complainant and a description of the response;</p>
<p><b>Inspection Finding</b></p> <p>The home's complaint records did not include the above mentioned area.</p>
<p><b>Outcome</b></p> <p>The Licensee has advised it has taken corrective action to achieve compliance. RHRA to confirm compliance by inspection.</p>
<p><b>5. The Licensee failed to comply with O. Reg. 166/11, s. 22; Risk of falls.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><b>22. (1)</b> 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><b>Inspection Finding</b></p> <p>The home's fall policy for residents did not include strategies to reduce or mitigate falls.</p>
<p><b>Outcome</b></p> <p>The Licensee submitted a plan to achieve compliance by October 29, 2016. RHRA to confirm by inspection.</p>
<p><b>6. The Licensee failed to comply with O. Reg. 166/11, s. 23; Behaviour management.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><b>23. (1)</b> 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;</p>

<p>(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.</p>
<p><b>Inspection Finding</b> The home's behaviour management policy was not in alignment with the above noted sections.</p>
<p><b>Outcome</b> The Licensee submitted a plan to achieve compliance by October 29, 2016. RHRA to confirm by inspection</p>
<p><b>7. 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>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>(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> <ul style="list-style-type: none"> <li>(i) ways of reducing the incidence of infectious disease, including maintaining proper hand hygiene,</li> <li>(ii) the safe disposal of syringes and other sharps,</li> <li>(iii) recognizing an adverse drug reaction and taking appropriate action;</li> </ul>
<p><b>Inspection Finding</b> The home was not training all relevant staff in all required areas of medication administration.</p>
<p><b>Outcome</b> The Licensee submitted a plan to achieve compliance by October 29, 2016. RHRA to confirm by inspection</p>
<p><b>8. The Licensee failed to comply with O. Reg. 166/11, s. 30; Storage of drugs or other substances.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><b>30.</b> 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> <p>(a) the drugs or other substances are stored in an area or a medication cart that,</p> <ul style="list-style-type: none"> <li>(ii) is locked and secure,</li> </ul>
<p><b>Inspection Finding</b> The home was not ensuring that medication were kept an area that was locked and secure at all times.</p>
<p><b>Outcome</b> The Licensee submitted a plan to achieve compliance by October 29, 2016. RHRA to confirm by inspection</p>

- 9. The Licensee failed to comply with O. Reg. 166/11, s. 31; Medication management system.  
The Licensee failed to comply with O. Reg. 166/11, s. 32; Records.**

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.

**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,  
(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 administration policy did not include procedures for acquiring, receiving, destroying or disposing of medications. Not all medications administered contained a record of prescription.

**Outcome**


The Licensee submitted a plan to achieve compliance by October 29, 2016. RHRA to confirm by inspection

**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 October 18, 2016
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