

# FINAL INSPECTION REPORT Under the Retirement Homes Act, 2010

**Inspection Information** 

**Date of Inspection:** September 30, 2016 | **Name of Inspector:** Mark Dennis

**Inspection Type:** Routine Inspection

Licensee: Georgian Bay Nursing Home Ltd / 1889 Fairgrounds Road, Stayner, ON LOM 1S0 (the "Licensee")

Retirement Home: Pine Villa Retirement / 120 Pine Street, Collingwood, ON L9Y 2N9 (the "home")

Licence Number: N0139

## **Purpose of Inspection**

The RHRA conducts routine inspections as set out in section 77(3) of the *Retirement Homes Act, 2010* (the "RHA").

#### **NON-COMPLIANCE**

1. 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 Licensee did not have the most recent RHRA Final Inspection Report posted.

#### Outcome

The Licensee must take corrective action to achieve compliance.

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.

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

- 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,

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- (i) the loss of essential services,
- (ii) situations involving a missing resident,
- (iii) medical emergencies,
- (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. (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.

## **Inspection Finding**

The Licensee did not 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 loss of essential services, missing resident, medical emergencies and violent outbursts. Further, the Licensee did not keep a written record of the testing and changes made to improve the system. Furthermore, the Licensee has not annually evaluated and updated the emergency plan.

#### **Outcome**

The Licensee must take corrective action to achieve compliance.

3. 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. 14; Staff training.

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):

- <u>65. (5)</u> 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.
- **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.
- **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,
  - (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.

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# **Inspection Finding**

The Licensee failed to show that staff working in the home have been trained in the procedure for a person to complain to the Licensee. Further, the Licensee failed to show that staff working in the home have been trained in preventing cross contamination and reporting and documenting incidents of infectious illnesses. Furthermore, the Licensee failed to show that those staff members that provide direct care service have been provided with additional training related to Behaviour Management.

#### **Outcome**

The Licensee must take corrective action to achieve compliance.

4. The Licensee failed to comply with O. Reg. 166/11, s. 29; Administration of drugs or other substances.

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

- <u>29.</u> 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,
  - (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,
    - (i) ways of reducing the incidence of infectious disease, including maintaining proper hand hygiene,
    - (ii) the safe disposal of syringes and other sharps,
    - (iii) recognizing an adverse drug reaction and taking appropriate action;

## **Inspection Finding**

The Licensee failed to show that staff working in the home that are involved in the administration of a drug have been trained in ways of reducing infectious diseases, safe disposal of syringes and other sharps and recognizing an adverse drug reaction and taking appropriate action.

## **Outcome**

The Licensee must take corrective action to achieve compliance.

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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
male	November 15, 2016

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