

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

Inspection Information	
<b>Date of Inspection:</b> December 20, 2016	<b>Name of Inspector:</b> Debbie Rydall
<b>Inspection Type:</b> Routine Inspection	
<b>Licensee:</b> Tiverton Park Manor Inc. / 24 King Street, Tiverton, ON N0G 2T0 (the "Licensee")	
<b>Retirement Home:</b> Tiverton Park Manor / 24 King Street, Tiverton, ON N0G 2T0 (the "home")	
<b>Licence Number:</b> S0116	

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 the RHA, S.O. 2010, c. 11, s. 54; Contents.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><b>54. (2)</b> The package of information shall include, at a minimum, (d) the licensee's procedure for complaints mentioned in subsection 73 (1);</p>
<p><b>Inspection Finding</b></p> <p>The package of information provided to new residents of the home was not aligned with the requirements of the legislation in the prescribed area.</p>
<p><b>Outcome</b></p> <p>The Licensee submitted plan to achieve compliance by January 20, 2017. RHRA to confirm compliance by inspection.</p>
<p><b>2. 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. (3)</b> The licensee shall ensure that the emergency plan provides for the following:</p>

1. Dealing with,
  - ii. community disasters,
  - iii. violent outbursts,
  - iv. bomb threats,
  - v. medical emergencies,
3. Resources, supplies and equipment vital for the emergency response being set aside and readily available at the retirement home and regular testing of all such resources, supplies and equipment to ensure that they are in working order.

**Inspection Finding**

The Licensee's emergency plan was not completely compliant with the legislation in the prescribed areas as listed.

**Outcome**

The Licensee submitted plan to achieve compliance by February 1, 2017. RHRA to confirm compliance by inspection.

- 3. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 65; Training.**  
**The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 65; On-going training.**  
**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.**  
**The Licensee failed to comply with O. Reg. 166/11, s. 55; Contents of records.**

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

**65. (2)** Every licensee of a retirement home shall ensure that no staff work in the home unless they have received training in,

(b) the licensee's policy mentioned in subsection 67 (4) to promote zero tolerance of abuse and neglect of residents;

(d) the licensee's policy mentioned in subsection 68 (3) regarding the use of personal assistance services devices for residents;

**65. (4)** The licensee shall ensure that the persons who are required to receive the training described in subsection (2) receive on-going training as described in that subsection at the times required by the regulations.

**65. (5)** 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.

**14. (2)** 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.

**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.

**55. (5)** A licensee of a retirement home shall keep records proving compliance with the Act and this Regulation in relation to,

(c) the skills, qualifications and training of the staff who work in the home;

**Inspection Finding**

There was no documented evidence provided at the time of the inspection to support that staff had received the required training as per the requirements of the legislation in the areas listed.

**Outcome**

The Licensee submitted plan to achieve compliance by February 1, 2017. RHRA to confirm compliance by inspection.

**4. 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. (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;

<p><b>Inspection Finding</b></p> <p>The home's zero abuse and neglect policy was not completely aligned with the requirements of the legislation.</p>
<p><b>Outcome</b></p> <p>The Licensee submitted plan to achieve compliance by February 1, 2017. RHRA to confirm compliance by inspection.</p>
<p><b>5. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 73; Procedure for complaints to licensee.</b></p> <p><b>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>73. (1)</b> Every licensee of a retirement home shall ensure that there is a written procedure for a person to complain to the licensee about the operation of the home and for the way in which the licensee is required to deal with complaints.</p> <p><b>59. (1)</b> Every licensee of a retirement home shall ensure that every written or verbal complaint made to the licensee or a staff member concerning the care of a resident or operation of the home is dealt with as follows:</p> <ol style="list-style-type: none"> <li>1. The complaint shall be investigated. If the complaint alleges harm or risk of harm to one or more residents, the investigation shall be commenced immediately.</li> </ol> <p><b>59. (2)</b> The licensee shall ensure that a written record is kept in the retirement home that includes,</p> <ol style="list-style-type: none"> <li>(e) every date on which any response was provided to the complainant and a description of the response;</li> </ol>
<p><b>Inspection Finding</b></p> <p>The home's complaint procedure was not completely aligned with the legislation in the prescribed areas as listed.</p>
<p><b>Outcome</b></p> <p>The Licensee submitted plan to achieve compliance by February 15, 2017. RHRA to confirm compliance 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,</p> <ol style="list-style-type: none"> <li>(c) strategies for monitoring residents that have demonstrated behaviours that pose a risk to the resident or others in the home;</li> </ol>

(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 behaviour management strategy was not completely aligned with the legislation in the prescribed areas.

**Outcome**

The Licensee submitted plan to achieve compliance by February 15, 2017. RHRA to confirm compliance by inspection.

**7. 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):

**29.** 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**

There was no documented evidence provided at the time of the inspection to support that staff involved in the administration of a drug or other substance had received the required training; specifically in ways of reducing the incidence of infectious disease; the safe disposal of syringes and other sharps or in recognizing and responding to an adverse drug reaction.

**Outcome**


The Licensee submitted plan to achieve compliance by February 15, 2017. RHRA to confirm compliance 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 January 23, 2017
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