

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

Inspection Information	
<b>Date of Inspection:</b> January 23, 2017	<b>Name of Inspector:</b> Douglas Crust
<b>Inspection Type:</b> Routine Inspection	
<b>Licensee:</b> Estherville Manor Ltd. / 10606 Mclaughlin Rd., Brampton, ON L7A 0C9 (the "Licensee")	
<b>Retirement Home:</b> Estherville Manor / 10606 Mclaughlin Rd. , Brampton, ON L7A 0C9 (the "home")	
<b>Licence Number:</b> T0468	

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 presented for inspection did not contain a complete description of the procedure for a person to complain to the licensee.</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>2. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 53; Agreement required.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><b>53. (1)</b> The licensee of a retirement home shall enter into a written agreement with every resident of the home before the resident commences residency in the home.</p>

**Inspection Finding**

At the time of the inspection there was insufficient evidence to confirm that all residents had entered into a written agreement before commencing residency in the home.

**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. 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**

At the time of the inspection, the Licensee did not post inside the home a copy of the most recent final inspection report, as prescribed.

**Outcome**

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

**4. 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. 26; Emergency plan, retirement home with 10 or fewer 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,

- (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.

**26.** The emergency plan for a retirement home that has 10 or fewer residents shall, in addition to the requirements in section 24, meet the following requirements:

2. The plan shall identify and address hazards and risks that may give rise to an emergency affecting the home.
4. The plan shall require that resources, supplies and equipment vital for the emergency response are set aside, readily available at the home and tested regularly to ensure that they are in working order.
5. The plan shall identify the relevant community agencies, partner facilities and resources that will be involved in responding to an emergency.

**Inspection Finding**

At the time of the inspection, the Licensee could not provide evidence of the mandatory annual testing of the Emergency Plan, and could not produce a written record of all required testing, as prescribed. Further, the plan did not identify the hazards and risks which may give rise to an emergency in the home, there were no supplies, equipment and resources vital to the emergency response set aside, and all of the community agencies, partner facilities and resources that would be responding to an emergency in the home were not identified, as prescribed.

**Outcome**

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

- 5. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 60; Safety plans.  
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):

**60. (4)** Every licensee of a retirement home shall ensure that the following are in place for the home:  
2. An infection prevention and control program that meets the prescribed requirements.

**27. (2)** The licensee shall consult on an ongoing basis and not less than once a year with the local medical officer of health or designate about identifying and addressing health care issues in the retirement home in order to reduce the incidence of infectious disease outbreaks in the home.

**27. (3)** The licensee shall keep a written record of the consultation required under subsection (2) that shall include a record of when the consultation took place, what was discussed and any recommendations that the local medical officer of health or designate made.

**27. (4)** The licensee of a retirement home shall ensure that a written surveillance protocol is established in consultation with the local medical officer of health or designate in order to identify, document and monitor residents who report symptoms of respiratory or gastrointestinal illness.

- 27. (5)** The licensee of a retirement home shall ensure that,
- (a) if an infectious disease outbreak occurs in the home, the outbreak is reported to the local medical officer of health or designate and the licensee defers to the officer or designate, as the case may be, for assistance and consultation as appropriate;
  - (b) if there is an increase in the number of symptomatic residents in the home, the increase is reported immediately to the local medical officer of health or designate and that the officer or designate, as the case may be, is consulted;
  - (c) processes for meeting the requirements in clauses (a) and (b) are established and the processes are recorded in writing.

**Inspection Finding**

At the time of inspection, the Licensee did not produce an infection control and prevention program that met the prescribed requirements.

**Outcome**

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

- 6. The Licensee failed to comply with O. Reg. 166/11, s. 43; Initial assessment of care needs.  
The Licensee failed to comply with O. Reg. 166/11, s. 44; Full 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.
- 5. Dietary needs including known food restrictions.
- 6. Cognitive ability.
- 7. Risk of harm to self and to others.
- 8. Risk of wandering.

**44. (2)** The full assessment mentioned in subsection (1) shall consider the following matters with respect to the resident:

- 2. Functional capacity.
- 3. Cognitive ability.
- 7. The matters listed in subsection 43 (2).

**Inspection Finding**

The initial and full assessments for residents which were inspected did not contain all of the required items.

**Outcome**

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

**7. 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. 29; Administration of drugs or other substances.**

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;

(f) fire prevention and safety;

**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.

**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**

At the time of the inspection, the staff training records presented did not demonstrate that all staff (new and ongoing), and those staff administering medications in the home, had received all the required training as prescribed.

**Outcome**

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

**8. The Licensee failed to comply with O. Reg. 166/11, s. 30; Storage of drugs or other substances.**

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

- 30.** If drugs or other substances are stored in a retirement home on behalf of a resident, the licensee of the home shall ensure that,
- (b) controlled substances as defined in the Controlled Drugs and Substances Act (Canada) are stored in a separate, double-locked stationary cupboard in the locked area or stored in a separate locked area within the locked medication cart;

**Inspection Finding**

The separate locking container containing the controlled substances was not stationary (i.e. fixed) within the locked medication storage cart/ cupboard, as prescribed.

**Outcome**

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

**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**

At the time of the inspection, the Licensee did not present a medication management policy for the home that included all the required items. Also, there also was no written evidence that each drug administered to a resident had been prescribed by a person authorized to do so.

**Outcome**

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

**10. 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):

- 55. (2)** The record for each resident shall include,
- (e) a copy of the written agreement between the resident and the licensee required under section 53 of the Act;

**Inspection Finding**

At the time of the inspection, the Licensee was not able to produce a record of the written tenancy agreement between all residents and the Licensee, as prescribed.

**Outcome**

The Licensee has advised it has taken corrective action to achieve compliance. 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 March 9, 2017
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