

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

Inspection Information	
Date of Inspection: May 12, 2017	Name of Inspector: Rachelle Harber
Inspection Type: Routine Inspection	
Licensee: 1122121 Ontario Inc. / 1532 Pelham Street, Fonthill, ON L0S 1E3 (the "Licensee")	
Retirement Home: Shorthills Villa Retirement Community / 1532 Pelham Street, Fonthill, ON L0S 1E3 (the "home")	
Licence Number: S0011	

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>1. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 54; Contents.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p>54. (2) The package of information shall include, at a minimum,</p> <ul style="list-style-type: none"> (c) the licensee's policy mentioned in subsection 67 (4) to promote zero tolerance of abuse and neglect of residents; (k) an itemized list of the different types of accommodation and care services provided in the retirement home and their prices;
<p>Inspection Finding</p> <p>The licensee's package of information does not meet the requirements listed.</p>
<p>Outcome</p> <p>The Licensee must take corrective action to achieve compliance.</p>
<p>2. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 60; Safety plans.</p> <p>The Licensee failed to comply with O. Reg. 166/11, s. 24; Emergency plan, general.</p> <p>The Licensee failed to comply with O. Reg. 166/11, s. 25; Emergency plan, retirement home with more than 10 residents.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p>

60. (4) Every licensee of a retirement home shall ensure that the following are in place for the home:

1. An emergency plan that responds to emergencies in the home or in the community in which the home is located and that meets the prescribed requirements.

24. (4) The licensee shall keep current all arrangements with community agencies, partner facilities and resources that will be involved in responding to an emergency.

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.

25. (2) 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.

25. (3) The licensee shall ensure that the emergency plan provides for the following:

1. Dealing with,
 - i. fires,
2. Evacuation of the retirement home, including a system in the home to account for the whereabouts of all residents in the event that it is necessary to evacuate and relocate residents and evacuate staff and others in case of an emergency.
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.

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 home's emergency plan does not meet the requirements set out in this section.

Outcome

The Licensee must take corrective action to achieve compliance.

3. The Licensee failed to comply with O. Reg. 166/11, s. 21; Hazardous substances.

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

21. (2) Every licensee of a retirement home shall ensure that all hazardous substances used by staff of the home or under their control are labelled properly and are kept inaccessible to residents at all times.

Inspection Finding

The licensee did not ensure that all hazardous substances used by staff of the home or under their control are kept inaccessible to residents at all times.

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. 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:

- 3. Risk of falling.
- 7. Risk of harm to self and to others.
- 8. Risk of wandering.

44. (1) Subject to section 46, no later than 14 days after a resident commences residency in a retirement home, the licensee shall ensure that a full assessment of the resident’s care needs and preferences is conducted.

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

- 1. Physical and mental health.
- 2. Functional capacity.
- 3. Cognitive ability.
- 4. Behavioural issues.
- 5. Need for care services.
- 6. Need for assistance with the activities of daily living.
- 7. The matters listed in subsection 43 (2).
- 8. Any other matter relevant to developing a plan of care for the resident.

Inspection Finding

The licensee did not ensure that the initial assessment of resident care needs contains the requirements listed. Further, the licensee did not ensure that a full assessment of residents care needs was conducted on those residents whose files were reviewed.

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. 65; 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,

- (a) the Residents' Bill of Rights;
- (b) the licensee's policy mentioned in subsection 67 (4) to promote zero tolerance of abuse and neglect of residents;
- (c) the protection afforded for whistle-blowing described in section 115;
- (d) the licensee's policy mentioned in subsection 68 (3) regarding the use of personal assistance services devices for residents;

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.

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

The licensee did not ensure that staff received the required training prior to starting work in the home.

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 the RHA, S.O. 2010, c. 11, s. 68; Policy re devices.
The Licensee failed to comply with O. Reg. 166/11, s. 52; Personal assistance services devices.**

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

68. (3) Every licensee of a retirement home shall ensure that there is a written policy regarding the use of personal assistance services devices for residents of the home and that the policy complies with the prescribed requirements, if any.

52. (1) Every licensee of a retirement home shall ensure that the home's written policy under subsection 68 (3) of the Act deals with,

(a) the duties and responsibilities of staff, including,

(i) who has the authority to apply a personal assistance services device to a resident or to release a resident from a personal assistance services device,

(ii) ensuring that all appropriate staff are aware at all times of when the licensee has permitted the use of a personal assistance services device for a resident;

(b) the prohibition on restraining a resident in any way under subsection 68 (1) of the Act except when restraining under the common law duty described in subsection 71 (1) of the Act when immediate action is necessary to prevent serious bodily harm to the person or others;

(c) the types of personal assistance services devices permitted to be used;

(d) how consent to the use of personal assistance services devices as set out in section 69 of the Act is to be obtained and documented;

(e) alternatives to the use of personal assistance services devices, including how the alternatives are planned, developed and implemented, using an interdisciplinary approach;

(f) how the use of personal assistance services devices in the home will be evaluated to ensure that all necessary use of a personal assistance services device is done in accordance with the Act and this Regulation.

52. (2) Every licensee of a retirement home shall ensure that a personal assistance services device used under section 69 of the Act is,

(a) well maintained;

(b) applied by staff of the home in accordance with the manufacturer's instructions, if any;

(c) used in accordance with evidence-based practices and, if there are none, in accordance with prevailing practices;

(d) not altered except for routine adjustments in accordance with the manufacturer's instructions, if any;

- (e) removed as soon as it is no longer required to assist a resident with a routine activity of living, unless the resident requests that it be retained;
- (f) removed as soon as a resident has altered skin integrity or is at risk of altered skin integrity related to the use of the device.

Inspection Finding

The licensee did not ensure that the written policy regarding the use of personal assistance services devices for residents of the home complies with the prescribed requirements.

Outcome

The Licensee must take corrective action to achieve compliance.

- 7. 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,
 - (f) set out the consequences for those who abuse or neglect 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;
 - (b) contain procedures and interventions to deal with persons who have abused or neglected or allegedly abused or neglected residents, as appropriate;

Inspection Finding

The home's zero tolerance of abuse policy does not meet the requirements set out in this section.

Outcome

The Licensee must take corrective action to achieve compliance.

- 8. The Licensee failed to comply with O. Reg. 166/11, s. 59; Procedure for complaints to licensee.**

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

- 59. (2)** The licensee shall ensure that a written record is kept in the retirement home that includes,
 - (a) the nature of each verbal or written complaint;
 - (b) the date that the complaint was received;
 - (c) the type of action taken to resolve the complaint, including the date of the action, time frames for actions to be taken and any follow-up action required;

- (d) the final resolution, if any, of the complaint;
- (e) every date on which any response was provided to the complainant and a description of the response;

Inspection Finding

The licensee did not ensure that a written record is kept in the retirement home that meets the requirements set out in this section.

Outcome

The Licensee must take corrective action to achieve compliance.

9. 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,
- (a) the drugs or other substances are stored in an area or a medication cart that,
 - (ii) is locked and secure,
 - (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 licensee did not ensure that the drugs or other substances are stored in a medication cart that is kept locked and secure.

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. 40; Provision of a meal.

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

- 40.** 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 provision of a meal, the licensee shall ensure that,
- (d) the menu cycle changes at least every 21 days;
 - (g) the resident is informed of his or her daily and weekly menu options;

Inspection Finding

The licensee did not ensure that the menu cycle changes at least once every 21 days and that the resident is informed of his or her daily and weekly menu options.

<p>Outcome</p> <p>The Licensee must take corrective action to achieve compliance.</p>
<p>11. The Licensee failed to comply with O. Reg. 166/11, s. 22; Risk of falls.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p>22. (1) 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>22. (2) If a resident of a retirement home falls in a common area of the home or while being assisted by the licensee or staff, the licensee shall ensure that,</p> <p style="padding-left: 40px;">(b) corrective action is taken as necessary to prevent future harm to residents;</p> <p>22. (3) If a resident of a retirement home falls in the home in circumstances other than those described in subsection (2) and the licensee or a staff member becomes aware of the fall, the licensee shall ensure that the licensee or a staff member documents the fall, the response to the fall and the corrective actions taken, if any.</p>
<p>Inspection Finding</p> <p>The licensee did not ensure that strategies to mitigate risk of falls are developed, documented and implemented.</p>
<p>Outcome</p> <p>The Licensee must take corrective action to achieve compliance.</p>
<p>12. The Licensee failed to comply with O. Reg. 166/11, s. 19; Maintenance.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p>19. (1) Every licensee of a retirement home shall ensure that a maintenance program is in place to ensure that the building forming the retirement home, including both interior and exterior areas and its operational systems, are maintained in good repair.</p> <p>19. (2) The maintenance program shall include policies and procedures for routine, preventative and remedial maintenance of the following in the retirement home:</p> <p style="padding-left: 40px;">4. If provided by the licensee, equipment, devices, assistive aids, positioning aids and shower grab bars.</p>
<p>Inspection Finding</p> <p>The licensee did not ensure that the maintenance program that is in place ensures that the building and its operational systems are in good repair.</p>
<p>Outcome</p>


The Licensee must take 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 12, 2017
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