

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

Inspection Information	
Date of Inspection: July 12, 2017	Name of Inspector: Julie Hebert
Inspection Type: Routine Inspection	
Licensee: Schlegel Villages Inc. / 325 Max Becker Drive, Kitchener, ON N2E 4H5 (the "Licensee")	
Retirement Home: The Village of Riverside Glen / 60 Woodlawn Road, Guelph, ON N1H 8M8 (the "home")	
Licence Number: T0130	

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 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.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><u>24. (4)</u> 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><u>24. (5)</u> The licensee shall,</p> <ul style="list-style-type: none"> (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, <ul style="list-style-type: none"> (i) the loss of essential services, (iv) violent outbursts; (b) at least once every two years, conduct a planned evacuation of the retirement home; (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. <p><u>25. (2)</u> The licensee shall ensure that the development of the emergency plan includes,</p> <ul style="list-style-type: none"> (a) consultation with the relevant community agencies, partner facilities and resources that will be involved in responding to an emergency; (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:

- 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.
- 4. Identification of the community agencies, partner facilities and resources that will be involved in responding to an emergency.

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 did not have an emergency plan that was in alignment with the above noted sections. Furthermore, they had not completed all required testing of the plan and had not entered into agreements with all of their community partners.

Outcome

The Licensee must take corrective action to achieve compliance.

- 2. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 65; Training.**
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):

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;
- (f) fire prevention and safety;

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;

<p>(b) the need for and process of reporting, providing surveillance of and documenting incidents of infectious illness.</p>
<p>Inspection Finding The home had not trained all staff on the above noted mandatory areas prior to commencing work in the home.</p>
<p>Outcome The Licensee must take corrective action to achieve compliance.</p>
<p>3. 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>Inspection Finding The home was not able to demonstrate that they had fully implemented their falls prevention strategy.</p>
<p>Outcome The Licensee must take corrective action to achieve compliance.</p>
<p>4. The Licensee failed to comply with O. Reg. 166/11, s. 41; Dementia care program.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p>41. (1) If the licensee of a retirement home provides a dementia care program to a resident of the home, the licensee shall ensure that the program complies with this section.</p>
<p>Inspection Finding The home's registered health professional that supervises the Dementia Care program did not have specific training in dementia care and the care of older adults in alignment with the regulations.</p>
<p>Outcome The Licensee must take corrective action to achieve compliance.</p>
<p>5. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 62; Plan of care. The Licensee failed to comply with O. Reg. 166/11, s. 44; Full assessment of care needs.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p>

62. (1) When a resident commences his or her residency in a retirement home, the licensee shall, within the prescribed times, ensure that the resident is assessed and that a plan of care is developed based on the assessment and in accordance with this section and the regulations.

44. (3) If a licensee or a staff member of a retirement home has reason to believe that a resident’s care needs may include dementia care, skin and wound care, or the use of a personal assistance services device, the licensee shall ensure that the full assessment is,

Inspection Finding

Two of the resident files reviewed on the date of inspection did not have completed plans of care. Furthermore, they did not contain a clinically appropriate assessment specifically designed for the assessment of the their dementia care needs.

Outcome

The Licensee must take corrective action to achieve compliance.

6. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 67; Policy to promote zero tolerance.

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

67. (4) Without in any way restricting the generality of the duties described in subsections (1) and (2), the licensee shall ensure that there is a written policy to promote zero tolerance of abuse and neglect of residents and shall ensure that the policy is complied with.

Inspection Finding

An investigation reviewed on the date of inspection showed that the home had not fully implemented their zero tolerance of abuse policy for an incident of staff to resident verbal abuse.

Outcome


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 27, 2017
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