

# FINAL INSPECTION REPORT Under the Retirement Homes Act, 2010

**Inspection Information** 

**Date of Inspection:** August 15, 2017 **Name of Inspector:** Corina Gadde

**Inspection Type:** Routine Inspection

Licensee: Thorncliffe Place Retirement Home Ltd. / 1 Thorncliffe Place, Ottawa, ON K2H 9N9 (the

"Licensee")

Retirement Home: Thorncliffe Place Retirement Home / 1 Thorncliffe Place, Ottawa, ON K2H 9N9 (the

"home")

Licence Number: N0008

## **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. 24; Emergency plan, general.

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

- 24. (5) The licensee shall,
  - (b) at least once every two years, conduct a planned evacuation of the retirement home;

#### **Inspection Finding**

The Licensee did not conduct a planned evacuation of the home within the required time frame.

#### Outcome

The Licensee submitted plan to achieve compliance by September 20, 2017. RHRA to confirm compliance by inspection.

2. 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):

- **44. (2)** The full assessment mentioned in subsection (1) shall consider the following matters with respect to the resident:
  - 4. Behavioural issues.
  - 7. The matters listed in subsection 43 (2).

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## **Inspection Finding**

The full assessment of resident care needs did not consider all required information.

#### Outcome

The Licensee submitted plan to achieve compliance by September 18, 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; 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):

- **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;
- <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.
- <u>14. (1)</u> 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.

## **Inspection Finding**

Several new staff working in the home did not recieve the required training.

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#### **Outcome**

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

4. 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 written record of complaints was incomplete.

#### Outcome

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

5. The Licensee failed to comply with O. Reg. 166/11, s. 23; Behaviour management.

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

- **23. (1)** Every licensee of a retirement home shall develop and implement a written behaviour management strategy that includes,
  - (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**

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 was specific to one department and did not include protocols for other departments.

#### **Outcome**

The Licensee submitted plan to achieve compliance by September 18, 2017. RHRA to confirm compliance by inspection.

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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 <a href="http://rhra.ca/en/register/">http://rhra.ca/en/register/</a>

Signature of Inspector	Date
Cam Gadde	October 19, 2017

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