

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

Inspection Information		
Date of Inspection: November 9, 2017	Name of Inspector: Debbie Rydall	
Inspection Type: Routine Inspection		
Licensee: St. Jacobs Place Limited / 10 Water Street, St Jacobs, ON NOB 2N0 (the "Licensee")		
Retirement Home: St. Jacobs Place / 10 Water Street, St. Jacobs, ON NOB 2N0 (the "home")		
Licence Number: T0020		

# **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 the RHA, S.O. 2010, c. 11, s. 54; Contents.

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

# **54. (2)** The package of information shall include, at a minimum,

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

(I) a statement that a resident may purchase or apply for care services, other services, programs or goods from external care providers;

# Inspection Finding

The package of information reviewed at the time of the inspection was not completely aligned with the requirements of the legislation in the areas listed.

# Outcome

The Licensee submitted plan to achieve compliance by January 15, 2018. RHRA to confirm compliance by inspection.

 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.

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

**<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.

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,

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

1. Dealing with,

iii. violent outbursts,

v. medical emergencies,

# **Inspection Finding**

The Routine Inspection revealed that not all of the required testing of the emergency plan had been completed as prescribed by the legislation; further the emergency plan was not completely aligned with the legislation in the areas listed.

#### Outcome

The Licensee submitted plan to achieve compliance by January 15, 2018. RHRA to confirm compliance by inspection.

# 3. 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):

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

7. The matters listed in subsection 43 (2).

# **Inspection Finding**

There was no evidence provided at the time of the inspection to support that the full assessment of care needs considered risk of harm and risk of wandering as per the requirements of the legislation.

# 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 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,

(a) clearly set out what constitutes abuse and neglect;

(d) contain an explanation of the duty under section 75 to report to the Registrar the matters specified in that section;

**<u>15. (1)</u>** The program for preventing abuse and neglect described in clause 67 (5) (c) of the Act shall entail training and retraining requirements for all staff of the retirement home, including,

(a) training on the relationship between power imbalances between staff and residents and the potential for abuse and neglect by those in a position of trust, power and responsibility for resident care;

(b) situations that may lead to abuse and neglect and how to avoid such situations.

**<u>15. (3)</u>** The policy to promote zero tolerance of abuse and neglect of residents described in subsection 67 (4) of the Act shall,

(d) provide that the licensee of the retirement home shall ensure that the resident's substitute decision-makers, if any, and any other person specified by the resident,

(i) are notified immediately upon the licensee becoming aware of an alleged, suspected or witnessed incident of abuse or neglect of a resident that has resulted in a physical injury or pain to a resident or that causes distress to a resident that could potentially be detrimental to a resident's health or well-being,

(g) provide that the licensee of the retirement home shall ensure that,

(i) an analysis of every incident of abuse or neglect of a resident at the home is undertaken promptly after the licensee becomes aware of it,

(b) contain procedures and interventions to deal with persons who have abused or neglected or allegedly abused or neglected residents, as appropriate;

(e) provide that the licensee of the retirement home shall ensure that the resident and the resident's substitute decision-makers, if any, are notified of the results of an investigation described in clause 67 (5) (e) of the Act immediately upon the completion of the investigation;

# **Inspection Finding**

The home's zero abuse and neglect policy, reviewed at the time of the inspection was not completely aligned with the requirements of the legislation in the areas listed.

# 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 <u>http://rhra.ca/en/register/</u>

Signature of Inspector	Date
Abolal	January 2, 2018