

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

Inspection Information	
Date of Inspection: January 26, 2018	Name of Inspector: Susan Lines
Inspection Type: Mandatory Reporting Inspection	
Licensee: Country Haven Retirement Homes Inc. / 105 King Street, Kitchener, ON N2G 2K8 (the "Licensee")	
Retirement Home: Country Haven Retirement Home / 1387 Beachburg Road, Beachburg, ON K0J 1C0 (the "home")	
Licence Number: N0131	

Purpose of Inspection
The RHRA received a report under section 75(1) 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. 62; Contents of plan. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 62; Involvement of resident, etc.. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 62; Persons who approve plans of care. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 62; Reassessment and revision.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p>62. (4) The licensee of a retirement home shall ensure that there is a written plan of care for each resident of the home that sets out,</p> <p style="padding-left: 40px;">(a) the care services that are part of a package of care services that the resident is entitled to receive under the resident's agreement with the licensee, whether or not the resident receives the services;</p> <p style="padding-left: 40px;">(b) the planned care services for the resident that the licensee will provide, including,</p> <p>62. (5) The licensee shall ensure that the resident, the resident's substitute decision-maker, if any, and any other persons designated by the resident or substitute decision-maker are given an opportunity to participate in the development, implementation and reviews of the resident's plan of care.</p> <p>62. (9) The licensee shall ensure that the following persons have approved the plan of care, including any revisions to it, and that a copy is provided to them:</p> <p style="padding-left: 40px;">1. The resident or the resident's substitute decision-maker.</p> <p style="padding-left: 40px;">2. The prescribed person if there is a person prescribed for the purpose of this paragraph.</p> <p>62. (12) The licensee shall ensure that the resident is reassessed and the plan of care reviewed and revised at least every six months and at any other time if, in the opinion of the licensee or the resident,</p>

- (b) the resident’s care needs change or the care services set out in the plan are no longer necessary;
- (c) the care services set out in the plan have not been effective.

Inspection Finding

The resident had not been assessed as required and her plan of care had not been updated to provide adequately for the care services the resident was supposed to receive or her care needs. The plan of care did not include all the planned care services for the resident including, the details of the services, the goals that the services are intended to achieve, and clear directions to the licensee’s staff who provide direct care to the resident. There was no evidence that the SDM had been involved in the development of the plan of care. The plan was not approved as required.

Outcome

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

2. The Licensee failed to comply with O. Reg. 166/11, s. 41; Dementia care program.

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

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.

41. (2) The program shall include,

- (a) therapies, techniques and activities, including mental stimulation, to maximize the functioning and independence of the resident in the areas of physical, cognitive, sensory and social abilities;
- (b) monitoring the resident for safety and wellbeing;
- (c) therapies, techniques and activities to promote quality of life and wellbeing for the resident;
- (d) strategies for communicating with the resident if the resident has compromised communication and verbalization skills, a cognitive impairment or cannot communicate in the languages used in the retirement home;
- (e) strategies for identifying and addressing triggers for responsive behaviours if the resident exhibits responsive behaviours.

41. (3) The program shall be developed and implemented in accordance with evidence-based practices and, if there are none, in accordance with prevailing practices.

41. (5) The program shall be evaluated at least annually and the licensee shall keep a written record of each evaluation.

Inspection Finding

The home offered dementia care including a secure floor but management confirmed that the home had not developed a dementia care program for the resident as required.

Outcome

Licensee submitted a plan to achieve compliance by May 15, 2018. RHRA to confirm compliance by inspection.

3. The Licensee failed to comply with O. Reg. 166/11, s. 19; Maintenance.

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

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.

19. (2) The maintenance program shall include policies and procedures for routine, preventative and remedial maintenance of the following in the retirement home:

1. Plumbing fixtures, toilets and sinks located in common areas of the home.
2. Heating systems and hot water boilers.
3. If provided by the licensee, ventilation systems, air conditioning systems, hot water holding tanks and computerized systems monitoring the home's water temperature.
4. If provided by the licensee, equipment, devices, assistive aids, positioning aids and shower grab bars.

Inspection Finding

Management confirmed that the home had no maintenance policies and procedures in place including policies and procedures to ensure the efficacy of their equipment including the door alarms on the doors on the secure floor.

Outcome

Licensee submitted a plan to achieve compliance by May 15, 2018. RHRA to confirm compliance by inspection.

4. The Licensee failed to comply with O. Reg. 166/11, s. 22; Risk of falls.

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

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.

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,
(a) there is a timely and appropriate response to the fall;

Inspection Finding

Staff and management did not adequately include a resident's bruising, wincing, change in typical demeanour and inability to verbalize when they considered whether she was in pain after they found her lying on a stairwell. Consequently the home did not send the resident to hospital until three days after the resident had a suspected fall. The home did not adequately implement their falls strategy.

Outcome

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; 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.

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,

(i) all Acts, regulations, policies of the Authority and similar documents, including policies of the licensee, that are relevant to the person’s duties;

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:

2. Mental health issues, including caring for persons with dementia.

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.

14. (3) For the purposes of paragraph 5 of subsection 65 (5) of the Act, every licensee of a retirement home shall ensure that every staff member who provides a care service to a resident has received or receives training in,

(b) each care service offered in the home so that the staff member is able to understand the general nature of each of those services, the standards applicable under the Act to each of those services and the aspects of each of those services that may be relevant to the staff member’s own duties in the home.

Inspection Finding

Three staff was not trained in all the topics in which they required training.

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 March 19, 2018
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