

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

Inspection Information	
<b>Date of Inspection:</b> January 11, 2019	<b>Name of Inspector:</b> Rachelle Harber
<b>Inspection Type:</b> Routine Inspection	
<b>Licensee:</b> Dayspring Residence Inc / 332787 Plank Line, Tillsonburg, ON N4G 4H1 (the "Licensee")	
<b>Retirement Home:</b> Dayspring Residence / 332787 Plank Line, Tillsonburg, ON N4G 4H1 (the "home")	
<b>Licence Number:</b> S0141	

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><b>1. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 54; Contents.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><b>54. (2)</b> The package of information shall include, at a minimum,</p> <ul style="list-style-type: none"> <li>(k) an itemized list of the different types of accommodation and care services provided in the retirement home and their prices;</li> <li>(l) a statement that a resident may purchase or apply for care services, other services, programs or goods from external care providers;</li> <li>(t) information relating to staffing, including night time staffing levels and qualifications of staff of the retirement home;</li> </ul>
<p><b>Inspection Finding</b></p> <p>The Licensee did not ensure that the homes package of information includes the requirements as listed.</p>
<p><b>Outcome</b></p> <p>The Licensee must take corrective action to achieve compliance.</p>
<p><b>2. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 53; Agreement required.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><b>53. (1)</b> The licensee of a retirement home shall enter into a written agreement with every resident of the home before the resident commences residency in the home.</p>

**Inspection Finding**

The Licensee did not enter into an agreement with every resident of the home before the resident commences residency in the home.

**Outcome**

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

**3. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 55; Posting information.  
The Licensee failed to comply with O. Reg. 166/11, s. 11; Posted information.**

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

**55. (2)** Every licensee of a retirement home shall ensure that the following information is posted in the home in a conspicuous and easily accessible location and in a manner that complies with the prescribed requirements, if any:

1. The Residents' Bill of Rights.

**11. (1)** For the purposes of paragraph 4 of subsection 55 (2) of the Act, the following information is prescribed as information that must be posted in a retirement home under that subsection:

3. An explanation of the procedures to be followed in the case of an evacuation.

**Inspection Finding**

The Licensee did not ensure that the required information was posted as listed.

**Outcome**

The Licensee has demonstrated 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. 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):

**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.

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

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.

**Inspection Finding**

The homes emergency plan does not meet the requirements set out in this section.

**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. 60; Safety plans.  
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):

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

2. An infection prevention and control program that meets the prescribed requirements.

**27. (2)** The licensee shall consult on an ongoing basis and not less than once a year with the local medical officer of health or designate about identifying and addressing health care issues in the retirement home in order to reduce the incidence of infectious disease outbreaks in the home.

**27. (3)** The licensee shall keep a written record of the consultation required under subsection (2) that shall include a record of when the consultation took place, what was discussed and any recommendations that the local medical officer of health or designate made.

**27. (4)** The licensee of a retirement home shall ensure that a written surveillance protocol is established in consultation with the local medical officer of health or designate in order to identify, document and monitor residents who report symptoms of respiratory or gastrointestinal illness.

**27. (5)** The licensee of a retirement home shall ensure that,

(a) if an infectious disease outbreak occurs in the home, the outbreak is reported to the local medical officer of health or designate and the licensee defers to the officer or designate, as the case may be, for assistance and consultation as appropriate;

(b) if there is an increase in the number of symptomatic residents in the home, the increase is reported immediately to the local medical officer of health or designate and that the officer or designate, as the case may be, is consulted;

(c) processes for meeting the requirements in clauses (a) and (b) are established and the processes are recorded in writing.

**Inspection Finding**

The Licensee did not ensure that the homes infection prevention and control program meets the prescribed requirements.

**Outcome**

The Licensee submitted plan to achieve compliance by February 11, 2019. RHRA to confirm compliance by inspection.

**6. 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. (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.

**Inspection Finding**

The Licensee did not ensure that the full assessment of resident care needs was completed within the required time frame.

**Outcome**

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

**7. 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;

**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.

**Inspection Finding**

The Licensee did not ensure that all staff has 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.

**8. 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):

**15. (1)** 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.

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

- (f) provide that the licensee of the retirement home shall ensure that the appropriate police force is immediately notified of any alleged, suspected or witnessed incident of abuse or neglect of a resident that the licensee suspects may constitute a criminal offence;

**Inspection Finding**

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

**Outcome**

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

**9. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 73; Requirements for procedure. 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):

**73. (2)** The procedure shall comply with the regulations.

**59. (1)** Every licensee of a retirement home shall ensure that every written or verbal complaint made to the licensee or a staff member concerning the care of a resident or operation of the home is dealt with as follows:

- 4. A response shall be made to the person who made the complaint, indicating,
  - i. what the licensee has done to resolve the complaint,
  - ii. that the licensee believes the complaint to be unfounded and the reasons for the belief.
- 1. The complaint shall be investigated. If the complaint alleges harm or risk of harm to one or more residents, the investigation shall be commenced immediately.
- 2. The complaint shall be resolved if possible, and a response that complies with paragraph 4 provided within 10 business days of the receipt of the complaint.
- 3. For those complaints that cannot be investigated and resolved within 10 business days, an acknowledgement of receipt of the complaint shall be provided within 10 business days of receipt of the complaint, including the date by which the complainant can reasonably expect a resolution, and a follow-up response that complies with paragraph 4 shall be provided as soon as possible in the circumstances.

**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;
- (f) any response made in turn by the complainant.

**Inspection Finding**

The Licensee did not ensure that the homes complaints procedure complies with the regulations.

**Outcome**

The Licensee must take corrective action to achieve compliance.

**10. 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.


<p><b>Inspection Finding</b> The homes behavior management strategy does not meet the requirements set out in this section.</p>
<p><b>Outcome</b> The Licensee has advised it has taken corrective action to achieve compliance. RHRA to confirm compliance by inspection.</p>
<p><b>11. The Licensee failed to comply with O. Reg. 166/11, s. 31; Medication management system. The Licensee failed to comply with O. Reg. 166/11, s. 32; Records.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><b>31. (1)</b> 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 administration of a drug or other substance, the licensee shall establish a medication management system, which includes written policies and procedures, to ensure that all drugs and other substances to be administered to residents of the home are acquired, received in the home, stored, dispensed, administered, destroyed and disposed of correctly as required by law and in accordance with prevailing practices.</p> <p><b>32.</b> If the licensee or a member of the staff of a retirement home administers a drug or other substance to a resident, the licensee shall ensure that,</p> <p style="padding-left: 40px;">(b) if a drug is administered, there is written evidence that the drug was prescribed for the resident by a person who is authorized to prescribe a drug under section 27 of the Regulated Health Professions Act, 1991;</p>
<p><b>Inspection Finding</b> The homes medication management system does not meet the requirements set out in this section.</p>
<p><b>Outcome</b> The Licensee submitted plan to achieve compliance by February 5, 2019. RHRA to confirm compliance by inspection.</p>

**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 February 1, 2019
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