

# FINAL INSPECTION REPORT Under the Retirement Homes Act, 2010

**Inspection Information** 

**Date of Inspection:** February 11, 2019 **Name of Inspector:** Michele Davidson

**Inspection Type:** Routine Inspection

Licensee: 1902347 Ontario Ltd / 1 Chippenham Lane, Markham, ON L6B 1L6 (the "Licensee")

Retirement Home: Birdsilver Gardens Senior Support Centre / 16 Birdsilver Gardens, Scarborough, ON M1C

4M5 (the "home")

**Licence Number:** T0389

# **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. 55; Posting information.

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

- <u>55. (2)</u> 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.

## **Inspection Finding**

At the time of the inspection, the home had posted the Resident Bill of Rights, however, it was not the current version.

#### **Outcome**

The 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. 27; Infection prevention and control program.

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

**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.

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**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.

## **Inspection Finding**

The Licensee did not provide evidence of a recent consultation with Public Health.

#### Outcome

The Licensee submitted plan to achieve compliance by March 31, 2019.. 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; 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.

The Licensee failed to comply with O. Reg. 166/11, s. 27; Infection prevention and control program.

The Licensee failed to comply with O. Reg. 166/11, s. 55; Contents of records.

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. (4)</u> 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.
- <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:
  - Behaviour management.

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- 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.
- **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.
- **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.
- **55. (5)** A licensee of a retirement home shall keep records proving compliance with the Act and this Regulation in relation to,
  - (c) the skills, qualifications and training of the staff who work in the home;

# **Inspection Finding**

At the time of the inspection, the Licensee was unable to provide evidence of training for all staff.

## **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. 73; Procedure for complaints to licensee.

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):

- <u>73. (1)</u> Every licensee of a retirement home shall ensure that there is a written procedure for a person to complain to the licensee about the operation of the home and for the way in which the licensee is required to deal with complaints.
- 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.

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- 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's complaints procedures lacked the items listed.

#### **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 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**

At the time of the inspection, the Licensee presented a policy on resident behaviour management which lacked information on how staff and volunteers should report behaviour incidents.

# Outcome

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

6. The Licensee failed to comply with O. Reg. 166/11, s. 29; Administration of drugs or other substances.

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

- **29.** 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 ensure that,
  - (c) neither the licensee nor a staff member administers a drug to a resident in the home unless the licensee or the staff member has received training in the procedures applicable to the administration of the drug;
  - (e) if the licensee or a staff member is involved in the administration of the drug or other substance at the home, that the licensee or staff member is trained in,
    - (i) ways of reducing the incidence of infectious disease, including maintaining proper hand hygiene,
    - (ii) the safe disposal of syringes and other sharps,
    - (iii) recognizing an adverse drug reaction and taking appropriate action;

# **Inspection Finding**

The Licensee did not provide evidence of training in medication administration.

## **Outcome**

The Licensee submitted plan to achieve compliance by March 31, 2019.. RHRA to confirm compliance by inspection.

7. The Licensee failed to comply with O. Reg. 166/11, s. 31; Medication management system.

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

**31. (1)** 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.

## **Inspection Finding**

The policy on medication management did not include procedures for storing medication.

### **Outcome**

The Licensee has advised it has taken corrective action to achieve compliance. 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
AT. Dande	March 6, 2019

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