

# FINAL INSPECTION REPORT Under the Retirement Homes Act, 2010

**Inspection Information** 

Date of Inspection: May 27, 2019 | Name of Inspector: Debbie Rydall

**Inspection Type:** Mandatory Reporting Inspection

Licensee: 2596217 Ontario Inc. / 515 Consumer's Road, North York, ON M2J 4Z2 (the "Licensee")

Retirement Home: Georgian Bay Seniors Lodge / 7 Harriet Street, Penetanguishene, ON L9M 1K8 (the

"home")

Licence Number: N0469

## **Purpose of Inspection**

The RHRA received a report under section 75(1) 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. 67; Policy to promote zero tolerance.

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

<u>67. (4)</u> Without in any way restricting the generality of the duties described in subsections (1) and (2), the licensee shall ensure that there is a written policy to promote zero tolerance of abuse and neglect of residents and shall ensure that the policy is complied with.

## **Inspection Finding**

The Home failed to comply with their zero abuse and neglect policy. Specifically, although the incident was documented, there was no evidence to support that the Home had completed the required investigation or analysis. Further they failed to report the suspected abuse to the police as required by both the Home's policy and the legislation.

#### **Outcome**

The Licensee submitted a plan to achieve compliance by June 13, 2019. 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.

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# 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;
- (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. (4) The program shall be supervised by a member of a College, as defined in the Regulated Health Professions Act, 1991, with specific training in dementia care and care of older adults.

# **Inspection Finding**

The Home was unable to provide evidence to support that they had developed a dementia care program as per the requirements of the legislation. At the time of the inspection; the RHP overseeing the dementia care program did not have the requisite specific training in dementia care as per the legislation. Further, a dementia care program had not been developed or implemented to meet the needs of a resident that was to receive that care service.

#### Outcome

The Licensee submitted a plan to achieve compliance by June 25, 2019. RHRA to confirm compliance by inspection.

3. 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

## **Inspection Finding**

The Home failed to fully implement their behavior management strategy for a resident exhibiting ongoing responsive behaviours that posed a risk to others as per the requirements of the legislation.

#### **Outcome**

The Licensee submitted a plan to achieve compliance by June 21, 2019. 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
Model	June 17, 2019

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