

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

Inspection Information

Date of Inspection: June 11, 2019 | Name of Inspector: Debbie Rydall

Inspection Type: Routine Inspection

Licensee: Bethsaida Retirement Home Ltd / 29 Riverside Drive, Orangeville, ON L9V 1A6 (the "Licensee")

Retirement Home: Bethsaida Retirement Home Ltd / 3 Hillside Drive, Orangeville, ON L9W 1P5 (the

"home")

Licence Number: T0245

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. 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):

- <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.
- **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:
 - 1. Contact information for the Authority.
 - 4. Information about reporting to the Registrar matters relating to the care and safety of the residents of the home that is on a sign that the Registrar provides or that is in a form that the Registrar approves.

Inspection Finding

The inspection revealed that the home had not posted all of the required information as per the legislation.

Outcome

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

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2. 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.
- 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,
 - (iii) medical emergencies,
 - (iv) violent outbursts;
 - (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. (2) The licensee shall ensure that the development of the emergency plan includes,
 - (a) consultation with the relevant 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:
 - Dealing with,
 - vi. chemical spills,
 - 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.
- **25. (5)** The licensee shall ensure that the emergency plan for the retirement home is evaluated and updated at least annually and that the updating includes contact information for the relevant community agencies, partner facilities and resources that will be involved in responding to an emergency.

Inspection Finding

The home's emergency plan reviewed at the time of the inspection was not aligned with the legislation in the areas listed. Further the home failed to complete the required annual testing of their emergency plan and there was no evidence to support that current arrangements were in place with community partners as per the requirements of the legislation.

Outcome

The Licensee submitted a plan to achieve compliance by July 26, 2019. RHRA to confirm compliance by inspection.

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3. 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):

- 59. (2) The licensee shall ensure that a written record is kept in the retirement home that includes,
 - (b) the date that the complaint was received;
 - (e) every date on which any response was provided to the complainant and a description of the response;

Inspection Finding

The Home's record of complaints was not aligned with the requirements of the legislation in the areas listed.

Outcome

The Licensee submitted a plan to achieve compliance by July 4, 2019. RHRA to confirm compliance by inspection.

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

The Licensee failed to comply with O. Reg. 166/11, s. 30; Storage of drugs or other substances.

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.

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

- <u>29.</u> 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,
 - (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,
 - (ii) the safe disposal of syringes and other sharps,
- <u>30.</u> If drugs or other substances are stored in a retirement home on behalf of a resident, the licensee of the home shall ensure that,
 - (a) the drugs or other substances are stored in an area or a medication cart that,
 - (i) is used exclusively for drugs or other substances and for supplies related to drugs or other substances,
 - (b) controlled substances as defined in the Controlled Drugs and Substances Act (Canada) are stored in a separate, double-locked stationary cupboard in the locked area or stored in a separate locked area within the locked medication cart;
- **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

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prevailing practices.

<u>32.</u> 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,

(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;

Inspection Finding

There was no evidence provided at the time of the inspection to support that staff administering medication had received training in the area listed. The inspection revealed that the medication cart was not used exclusively to store drugs or supplies specific to medication administration. Further, controlled substances were not stored as per the requirements of the legislation. There was no evidence to support that physician orders were in place for all of the over the counter medications observed in the medication cart. The home's medication management policy did not include procedures for dispensing as per the requirements of the legislation.

Outcome

The Licensee submitted a plan to achieve compliance by July 26, 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 http://rhra.ca/en/register/

Signature of Inspector	Date
Affolal	July 3, 2019

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