

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

Inspection Information	
Date of Inspection: June 20, 2019	Name of Inspector: Sabrina Gill
Inspection Type: Routine Inspection	
Licensee: Tri-County Mennonite Homes / 200 Boullee Street, New Hamburg, ON N3A 2K4 (the "Licensee")	
Retirement Home: Nithview Community / 200 Boullee Street, New Hamburg, ON N3A 2K4 (the "home")	
Licence Number: T0115	

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>1. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 55; Posting information.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p>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:</p> <p>1. The Residents' Bill of Rights.</p>
<p>Inspection Finding</p> <p>During the inspection, the Licensee did not have the current Residents' Bill of Rights posted in the home.</p>
<p>Outcome</p> <p>The Licensee has advised it has taken corrective action to achieve compliance. RHRA to confirm compliance by inspection.</p>
<p>2. The Licensee failed to comply with O. Reg. 166/11, s. 24; Emergency plan, general.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p>24. (5) The licensee shall,</p> <p>(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,</p>

- (ii) situations involving a missing resident,
- (iii) medical emergencies,

Inspection Finding

During the inspection, a review of the Licensee's Emergency Plan revealed that the Licensee did not conduct annual testing specifically related to missing resident and medical emergencies.

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. 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.

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,

- (b) the licensee's policy mentioned in subsection 67 (4) to promote zero tolerance of abuse and neglect of residents;

- (d) the licensee's policy mentioned in subsection 68 (3) regarding the use of personal assistance services devices for residents;

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.

Inspection Finding

During the inspection, a review of the licensee's training records revealed that staff did not receive mandatory training on policies and procedures specific to the retirement home.

Outcome

The Licensee submitted plan to achieve compliance by September 2019. RHRA to confirm compliance by inspection.

- 4. 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):

- 55. (2)** The record for each resident shall include,
(d) a copy of the resident's most recent plan of care;

Inspection Finding

During the inspection, a review of the resident records revealed that the resident chart did not include the most recent plan of care.

Outcome


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

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 July 9, 2019
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