

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

Inspection Information	
Date of Inspection: June 28, 2019	Name of Inspector: Tania Buko
Inspection Type: Mandatory Reporting Inspection	
Licensee: Paris Nursing Home Limited / 185 Grand River Street, Paris, ON N3L 2N2 (the "Licensee")	
Retirement Home: Penmarvian Retirement Home / 185 Grand River Street , Paris, ON N3L 2N2 (the "home")	
Licence Number: S0222	

Purpose of Inspection
The RHRA received a report under section 75(1) 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. 67; Protection against abuse and neglect.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p>67. (1) Every licensee of a retirement home shall protect residents of the home from abuse by anyone.</p>
<p>Inspection Finding</p> <p>The evidence showed the Licensee and management of the home received several separate reports of witnessed and alleged resident to resident sexual abuse involving the same residents. The Licensee failed to investigate the incidents which occurred over a two month period. Further, the evidence showed the Licensee, who is regularly present in the home, was not aware of the requirements contained in the home's zero tolerance of abuse and neglect policy. The Licensee's lack of intervention in these incidents of alleged sexual abuse and lack of training resulted in a failure by the Licensee to protect a resident from ongoing sexual abuse.</p>
<p>Outcome</p> <p>The Licensee submitted a plan to achieve compliance by August 8, 2019. RHRA to confirm compliance by inspection.</p>
<p>2. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 74; Licensee's duty to respond to incidents of wrongdoing.</p> <p>The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 75; Reporting certain matters to Registrar.</p>

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

74. Every licensee of a retirement home shall ensure that,

(a) every alleged, suspected or witnessed incident of the following of which the licensee knows or that is reported to the licensee is immediately investigated:

(i) abuse of a resident of the home by anyone,

75. (1) A person who has reasonable grounds to suspect that any of the following has occurred or may occur shall immediately report the suspicion and the information upon which it is based to the Registrar:

2. Abuse of a resident by anyone or neglect of a resident by the licensee or the staff of the retirement home of the resident if it results in harm or a risk of harm to the resident.

Inspection Finding

The Licensee failed to investigate and failed to immediately report to the Registrar several known incidents of alleged and witnessed resident to resident sexual abuse and an incident of reported alleged financial abuse.

Outcome

The Licensee submitted a plan to achieve compliance by August 8, 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 that includes,

(a) techniques to prevent and address resident behaviours that pose a risk to the resident or others in the home;

(b) strategies for interventions to prevent and address resident behaviours that pose a risk to the resident or others in the home;

(c) strategies for monitoring residents that have demonstrated behaviours that pose a risk to the resident or others in the home;

Inspection Finding

The Licensee failed to implement the home's Behaviour Management Strategies for residents who have behaviours which pose a risk to other residents in the home. Specifically, strategies and interventions were not identified or developed to prevent and address the sexual behaviours and there was no evidence to support the home monitored the residents.

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. 67; Contents.
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):

67. (5) At a minimum, the policy to promote zero tolerance of abuse and neglect of residents shall,
(a) clearly set out what constitutes abuse and neglect;

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.

Inspection Finding

The home's zero tolerance of abuse and neglect policy is not fully compliant. Specifically, the definition of neglect is not aligned as per legislative requirements, and the home's program for preventing abuse and neglect in the noted areas are either missing or not aligned with legislation.

Outcome

The Licensee submitted a plan to achieve compliance by August 8, 2019. RHRA to confirm compliance by inspection.

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

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

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

Inspection Finding

The Licensee's current complaints management policy is not aligned with the legislation. Specifically, the policy does not indicate that if a complaint alleges harm or risk of harm to one or more residents, the investigation shall be commenced immediately O, Reg, 59 (1)(1); the policy does not fully include information in relation to how the home will manage complaints that cannot be investigated and resolved within 10 business days O. Reg 59. (1) (3); and information in relation to the response to the complainant, O. Reg. 59 (1) (4) (i)(ii).

Outcome

The Licensee submitted a plan to achieve compliance by August 8, 2019. RHRA to confirm compliance by inspection.

**6. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 65; Training.
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;

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

Evidence showed that the Licensee and new staff failed to complete training in the home's zero tolerance of abuse and neglect policy and complaints procedures.

Outcome

The Licensee submitted a plan to achieve compliance by August 8, 2019. RHRA to confirm compliance by inspection.

7. The Licensee failed to comply with O. Reg. 166/11, s. 22; Risk of falls.

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

22. (1) Every licensee of a retirement home shall develop, document and implement strategies to reduce or mitigate the risk of falls in common areas of the home.

Inspection Finding

The home failed to fully implement the directives of their falls policy as there was no evidence to support an assessment/reassessment was completed for a resident after each of the resident's three recent falls in the home. In addition, there was no evidence to support the home implemented strategies to reduce or mitigate the risk of falls in common areas of the home for that resident.

Outcome

The Licensee submitted a plan to achieve compliance by August 8, 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 24, 2019
---	-----------------------