

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

| Inspection Information | |
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| Date of Inspection: February 23, 2021 | Name of Inspector: Angela Newman |
| Inspection Type: Compliance 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 |
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| The RHRA conducts compliance inspections as set out in section 77(1) of the <i>Retirement Homes Act, 2010</i> (the "RHA"). |

| NON-COMPLIANCE |
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| <p>1. The Licensee failed to comply with O. Reg. 166/11, s. 27; Infection prevention and control program.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p>27. (5) The licensee of a retirement home shall ensure that,</p> <p>(0.b) all reasonable steps are taken in the retirement home to follow,</p> <p>(i) any directive respecting coronavirus (COVID-19) issued to long-term care homes by the Chief Medical Officer of Health under section 77.7 of the Health Protection and Promotion Act,</p> <p>(ii) any guidance, advice or recommendations respecting coronavirus (COVID-19) that are given to long-term care homes by the Chief Medical Officer of Health and made available on the Government of Ontario's website respecting coronavirus (COVID-19);</p> <p>(0.a) any guidance, advice or recommendations given to retirement homes by the Chief Medical Officer of Health are followed in the retirement home;</p> |
| <p>Inspection Finding</p> <p>The Licensee was not able to demonstrate they were following the guidance, advice and recommendations given by the Chief Medical Office of Health (CMOH), nor were they following the directives from the CMOH respecting the Coronavirus in the following areas:</p> <ol style="list-style-type: none"> 1. The home failed to demonstrate cleaning and disinfecting of high touch surface areas at least twice daily. 2. The home failed to demonstrate staff are trained how to don and doff PPE. 3. The home failed to follow the visitor policy with respect to offering residents an option for Essential Care Providers. 4. The home failed to demonstrate a written staff contingency plan in the event of an outbreak. 5. The home failed to provide documentation of a minimum 14-day supply of PPE including N95 masks, surgical masks, face shields, gloves, and gowns based on a reliable daily and outbreak burn rate calculation. |

6. The home failed to provide safe PPE storage for staff eye protection and clean isolation caddy outside of resident room.

7. The home failed to provide activity sheets that are easily cleanable between resident uses.

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. 19; Maintenance.

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

19. (1) Every licensee of a retirement home shall ensure that a maintenance program is in place to ensure that the building forming the retirement home, including both interior and exterior areas and its operational systems, are maintained in good repair.

Inspection Finding

The License failed to ensure the common areas of the home are maintained in good repair specifically the laundry room area and cold water tap at hand sink in employee washroom in Maple Heights wing.

Outcome

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

3. The Licensee failed to comply with O. Reg. 166/11, s. 17; Cleanliness.

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

17. (3) The licensee shall document the routines and methods used to comply with subsections (1) and (2).

Inspection Finding

The Licensee was not able to demonstrate they are keeping accurate records of the routines and methods used with their cleaning methods for resident rooms.

Outcome

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

4. 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.

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):

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;
- (e) injury prevention;

- (f) fire prevention and safety;
- (g) the licensee’s emergency evacuation plan for the home mentioned in subsection 60 (3);
- (h) the emergency plan and the infection prevention and control program of the licensee for the home mentioned in subsection 60 (4);
- (i) all Acts, regulations, policies of the Authority and similar documents, including policies of the licensee, that are relevant to the person’s duties;
- (j) all other prescribed matters.

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.

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.

Inspection Finding

Licensee failed to ensure that all staff were trained on orientation for the above noted items.

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 the RHA, S.O. 2010, c. 11, s. 90; Compliance order.

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

90. (1) If the Registrar believes on reasonable grounds that a licensee has contravened a requirement under this Act, the Registrar may serve an order on the licensee ordering the licensee to refrain from doing something, or to do something, for the purpose of ending the contravention and achieving compliance and for the purpose of ensuring that the contravention is not repeated and that compliance is maintained.

Inspection Finding

An inspection revealed that the Licensee is in contravention of compliance order # 2021-T0245-90-01.

Outcome

The Licensee has advised it has taken corrective action to achieve compliance. 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 Retirement Home Database, available online at <http://www.rhra.ca/en/retirement-home-database>.

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| Signature of Inspector  | Date March 12, 2021 |
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