

COMPLIANCE ORDER TO BE MADE AVAILABLE IN HOME

Pursuant to the Retirement Homes Act, 2010 S.O. 2010, Chapter 11, section 90.

2259973 Ontario Inc. o/a John Joseph Place 854 2nd Avenue W. Owen Sound, ON N4K 4M5

COMPLIANCE ORDER NO. 2022-S0108-90-01 JOHN JOSEPH PLACE

Under section 90 of the *Retirement Homes Act, 2010* (the "Act"), the Deputy Registrar of the Retirement Homes Regulatory Authority (the "Deputy Registrar" and the "RHRA", respectively) may serve an order on a licensee ordering it to refrain from doing something, or to do something, for the purpose of ending the contravention and achieving compliance, ensuring that the contravention is not repeated, and that compliance is maintained. The Deputy Registrar issues this Compliance Order (the "Order") to ensure that 2259973 Ontario Inc. (the "Licensee") operating as John Joseph Place (the "Home") comes into compliance with the Act and Ontario Regulation 166/11 under the Act (the "Regulation").

CONTRAVENTION

The Deputy Registrar has reasonable grounds to believe that the Licensee contravened the following sections of the Act and Regulation:

- Section 62(4)(6)(9)(10) and (12) of the Act
- Section 67(2) of the Act
- Section 29(b) of the Regulation
- Section 35 of the Regulation
- Section 37 of the Regulation
- Section 38 of the Regulation
- Section 41(2) of the Regulation
- Section 42(7) of the Regulation
- Section 47(5) of the Regulation
- Section 56(3) of the Regulation
- Section 59(1) and (2) of the Regulation

BRIEF SUMMARY OF FACTS

Inspections at the Home on October 19, 2021, March 22, 2022 and September 7, 2022 resulted in findings of noncompliance, including in the areas of resident plans of care, medication administration, neglect, complaints, and the provision of care services to residents.

Due to the ongoing noncompliance observed during RHRA inspectors, the Deputy Registrar decided to issue a Compliance Order requiring specific action as set out below.

REQUIRED ACTION

Pursuant to section 90 of the Act, the Deputy Registrar orders the Licensee to comply with the following:

- 1. Every two months for one year, deliver to RHRA Compliance Monitor:
 - i. Results of audits of resident Medication Administration Records, including review of physician medication orders.
 - ii. Produce any newly developed or revised de-identified plans of care demonstrating they contain all prescribed information.
 - iii. Produce de-identified copies from the Home's physician fax binder to demonstrate it has been implemented to track all resident physician orders in accordance with Licensee's advice since April 2022.
 - iv. Produce records demonstrating that hourly rounds are being conducted by staff to monitor resident safety and wellbeing on the dementia care floor.
 - v. Produce records demonstrating the Home's use of the Dementia Observation System (DOS) for residents.
 - vi. Produce records of staff duty sheet and management audits in accordance with Licensee's advice.
- 2. Within 60 days, produce confirmation that all staff have been re-trained on the Home's complaint policy and with respect to resident plans of care and produce the training material.
- 3. Within 60 days, advise the RHRA Compliance Monitor how it will improve its practices to ensure there are adequate directions to staff contained in resident plans of care so that care service delivery is completed appropriately.
- 4. Within 60 days, detail the Home's process to ensure that physician requests are implemented in a timely way by the Home and confirmation that the Home's staff will be trained on the process.
- 5. Within 60 days, advise RHRA Compliance Monitor of the Home's processes and procedures with respect to skin and wound care and altered skin integrity to be implemented once the Home ceases to provide skin and wound care as a care

- service, confirmation that staff will be trained on that process and procedure, and produce those training records.
- 6. Within 90 days, conduct a compliance audit addressing the areas of non-compliance identified in this Order, including verifying that all prescribed requirements are being implement appropriately, that care services are being delivered appropriately and in accordance with resident plans of care, and that staff are charting the delivery of care services accurately, properly, and in a timely way. The home must provide a copy of the audit to RHRA Compliance Monitor.

Issued on December 15, 2022.