

# FINAL INSPECTION REPORT Under the Retirement Homes Act, 2010

Inspection Information

Date of Inspection: February 15, 2024

Inspection Type: Routine Inspection

Licensee: ACC-003122 - 2596217 Ontario Inc.

Retirement Home: Georgian Bay Seniors Lodge

**License Number: N0469** 

# **About Routine Inspections**

A routine inspection, performed by an RHRA inspector, is a physical inspection of a licensed retirement home. During a routine inspection, an RHRA inspector will walk through the home, speak to residents and staff, observe care services and conditions in the home, and ensure the licensee's management and staff follow mandatory policies and practices designed to protect the welfare of residents.

Following a routine inspection, the RHRA inspector prepares a draft inspection report which is sent to the licensee. The draft report may include instances where the licensee has failed to meet the standards of the *RHA*. If included, the licensee can respond to these instances and is strongly encouraged to inform RHRA of its plans to meet the standards of the *RHA*.

Following the draft report, the RHRA inspector prepares this final inspection report, incorporating any response from the licensee with their plans to meet the standards of the *RHA*. The most recent final inspection report must be posted in the home in a visible and easily accessible location. All final inspection reports from the previous two years must also be made available in an easily accessible location in the home. The licensee must provide a copy of this report to the home's Residents' Council, if one exists.

In addition to inspection reports, RHRA may provide information to a licensee to encourage improvements of their current practices.

If the licensee repeatedly does not meet the required standards, RHRA may take further action.

### **Focus Areas**

During a routine inspection, an inspector will focus primarily on a set number of areas which have been identified as related to the health, safety and wellbeing of resident, and may take various actions to determine whether the licensee is compliant with the RHA in relating to the areas. The areas listed in this section are ones which an inspector has identified as non-compliant.

Focus Area #1: Behaviour Management

## **RHRA Inspector Findings**

The inspector reviewed a sample of resident charts and found one resident displaying behaviours that were a risk of harm to another resident. The Licensee failed to develop and implement strategies and techniques to prevent and address the resident's behaviour.

#### Outcome

The Licensee has demonstrated it has taken corrective action to achieve compliance.

## Focus Area #2: Emergency Plan

#### **RHRA Inspector Findings**

The inspector reviewed the Licensee's records of testing for their emergency plans and found that the testing for situations involving a pandemic/epidemic had not been completed. The Licensee failed to ensure that testing was done annually as required

#### **Outcome**

The Licensee has demonstrated it has taken corrective action to achieve compliance.

#### Focus Area #3: Resident Record, Assessment, Plan of Care

# **RHRA Inspector Findings**

The inspector reviewed a sample of resident care files and found that 2 residents did not have their plans of care approved appropriately, as there was no evidence that the plans had been approved by the residents or their substitute decision makers or registered staff. The Licensee failed to ensure that all resident plans of care had been approved as required.

#### **Outcome**

The Licensee has demonstrated it has taken corrective action to achieve compliance.

#### Focus Area #4: Staff Training

#### **RHRA Inspector Findings**

The inspector reviewed a sample of staff training records and found the Licensee was unable to provide evidence that one staff administering medication had the required training; furthermore the Licensee was unable to provide evidence of staff annual training. The Licensee failed to provide evidence of staff training as required.

#### **Outcome**

The Licensee has demonstrated it has taken corrective action to achieve compliance.

#### **Additional Findings**

During a routine inspection, an inspector may observe areas of non-compliance that are not related to the standard focus areas. In these cases, an inspector may cite the home for these contraventions at the time of this inspection. In addition, an inspector may follow-up on findings of non-compliance from previous inspections. Where the licensee is unable to demonstrate they have come into compliance or maintained compliance, an inspector may cite the home for these repeat contraventions at the time of this inspection.

## Additional Finding#1: Falls Prevention

# **RHRA Inspector Findings**

The inspector reviewed a sample of resident's charts and found a resident had a fall which resulted in an injury and the Licensee failed to document the fall. The Licensee failed to document the response to a fall as required and any corrective action taken.

#### Outcome

The Licensee has demonstrated it has taken corrective action to achieve compliance.

## **Current Inspection – Citations**

Citations relating to the above Focus Areas or Additional Findings made during the current inspection are listed below.

## The Licensee failed to comply with the RHA s. 14. (5); Staff training

## s. 14. (5); Staff training

14. (5) The licensee shall ensure that the persons who are required to receive the training described in subsection 65 (5) of the Act receive that training on an ongoing basis, namely at least annually after receiving the training described in subsection (4).

## The Licensee failed to comply with the RHA s. 22. (1); Risk of falls

## s. 22. (1); Risk of falls

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.

# The Licensee failed to comply with the RHA s. 23. (1); Behaviour management

## s. 23. (1); Behaviour management

23. (1) Every licensee of a retirement home shall develop and implement a written behaviour management strategy that includes,

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

#### s. 23. (1), (a)

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

#### s. 23. (1), (b)

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

## The Licensee failed to comply with the RHA s. 24. (5); Emergency plan, general

# s. 24. (5); Emergency plan, general

24. (5) The licensee shall,

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

## s. 24. (5), (a)

(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,

# s. 24. (5), (a), 3.1

(iii.1) epidemics and pandemics,

## The Licensee failed to comply with the RHA s. 29.; Administration of drugs or other substances

# s. 29.; Administration of drugs or other substances

29. 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,

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

#### s. 29. (c)

(c) neither the licensee nor a staff member administers a drug to a resident in the home unless the licensee or the staff member has received training in the procedures applicable to the administration of the drug;

## s. 29. (e)

(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,

#### s. 29. (e), 1.

(i) ways of reducing the incidence of infectious disease, including maintaining proper hand hygiene,

## s. 29. (e)

(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,

#### s. 29. (e), 2.

(ii) the safe disposal of syringes and other sharps,

#### s. 29. (e)

(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,

#### s. 29. (e), 3.

(iii) recognizing an adverse drug reaction and taking appropriate action;

#### The Licensee failed to comply with the RHA s. 48. (1); Approval of the plan of care

## s. 48. (1); Approval of the plan of care

48. (1) For the purposes of paragraph 2 of subsection 62 (9) of the Act and subject to subsection (2), the licensee shall ensure that a resident's plan of care is approved by,

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

## s. 48. (1), (a)

(a) a member of the College of Physicians and Surgeons of Ontario or the College of Nurses of Ontario;

## s. 48. (1), (b)

(b) a person acting under the supervision of a member of the College of Physicians and Surgeons of Ontario or the College of Nurses of Ontario.

# The Licensee failed to comply with the RHA s. 62. (9); Persons who approve plans of care

## s. 62. (9); Persons who approve plans of care

62. (9) The licensee shall ensure that the following persons have approved the plan of care, including any revisions to it, and that a copy is provided to them:

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

# s. 62. (9), para. 1

1. The resident or the resident's substitute decision-maker.

The Licensee failed to comply with the RHA s. 65. (4); On-going training

## s. 65. (4); On-going training

65. (4) The licensee shall ensure that the persons who are required to receive the training described in subsection (2) receive on-going training as described in that subsection at the times required by the regulations.

## **Closed Citations**

During an inspection, an inspector may follow-up with areas of non-compliance cited during a previous inspection, or verify compliance with areas initially cited during the current inspection. The inspector has verified that at the time of this report, the licensee was able to demonstrate that the following areas have come into compliance.

**Not Applicable** 

## **NOTICE**

The Final Inspection Report is being provided to the Licensee, the Registrar of 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 <a href="http://www.rhra.ca/en/retirement-home-database">http://www.rhra.ca/en/retirement-home-database</a>.

Signature of Inspector	Date
Mithelahe	April 22, 2024