

Home-related – Inspector Initiated

Home Name: _____ Inspection Number: _____ (hard copy use only)
Date: _____
Inspector ID: _____

Definition / Description	
Staff:	In relation to a long-term care home, staff refers to persons who work at the home: (a) as employees of the licensee, (b) pursuant to a contract or agreement with the licensee, or (c) pursuant to a contract or agreement between the licensee and an employment agency or other third party. s. 2 (1) LTCHA
Training and Orientation:	The licensee of a long-term care home must ensure that all staff at the home receives training and retraining as required in the Act and as provided for in the regulations. The licensee must also develop and provide an orientation for volunteers. s. 76 and s.77 r. 216 - 223 LTCHA
Volunteer:	A person who is part of the organized volunteer program of the long-term care home under section 16 and who does not receive a wage or salary for the services or work provided for that program. s. 2 (1) LTCHA

Use	
The home-related inspector initiated IP is used to review the home’s training and orientation program during the Resident Quality Inspection of the LTC home.	
The inspector may also use this IP to inspect concerns about Training and Orientation during any type of inspection.	
The inspection focuses on the licensee’s obligations to meet the requirements of the <i>Long-Term Care Homes Act, 2007 and Ontario Regulation 79/10</i> in the following areas:	
LTCHA s. 76	Training
LTCHA s. 77	Orientation for Volunteers
O. Reg. 79/10 s. 216	Training and orientation program
O. Reg. 79/10 s. 217	Designated lead
O. Reg. 79/10 s. 218	Orientation
O. Reg. 79/10 s. 219	Retraining
O. Reg. 79/10 s. 221	Additional training – direct care staff
O. Reg. 79/10 s. 222	Exemption, training
O. Reg. 79/10 s. 223	Orientation for volunteers
Note: ‘Training and Orientation’ has transitional regulations (r. 220, r. 221 (5) and r. 223 (3)).	

Procedure

Each section within this IP contains statements that provide guidance to the inspector in the collection of information during an inspection and may not be applicable in every situation. The information collected will be used to determine whether a home is in compliance with the LTCHA.

This IP contains two (2) parts:

Part A - Training and Orientation

Part B - Training and Orientation Program

During the Resident Quality Inspection:

1. All questions must be completed, unless not applicable.
2. The inspector must document evidence to support non-compliance in the 'Note' section when answering 'No'.

PART A: Training and Orientation

Record Review / Interview

Request the following information about the training and orientation program:

- Name of the contact person
- Relevant policies and procedures
- Records kept of training and orientation provided by the home
- Written records relating to evaluations.

Interview the contact person and review the information provided to determine:

- Whether the home has developed and implemented the training and orientation program
- Whether the training and orientation is provided to all staff and volunteers in accordance with the requirements under the LTCHA and its regulation.
- How the home assesses the training needs of staff members
- Whether the home, at least annually, evaluates the program and updates it in accordance with evidence-based practices and, if there are none, in accordance with prevailing practices.

Information Gathering

Notes

Resident / Substitute Decision-Maker Interview

Interview the selected resident / SDM where concern has been raised, to identify:

- Awareness of the Residents' Bill of Rights
- Whether care and services are provided consistent with needs and wishes
- Whether assistance from staff is provided in a timely manner
- Awareness of the Residents' Council and / or Family Council
- Their awareness to report concerns regarding care and services provided

- Whether staff and volunteers are trained and knowledgeable to carry out their duties.

Information Gathering

Notes

Staff / Volunteer Interviews and Observations

Interview staff from various disciplines and locations of the home, and on various shifts to determine if they are trained and knowledgeable about:

- The Residents' Bill of Rights
- The home's mission statement
- The home's policy to promote zero tolerance of abuse and neglect of residents
- The duty to make mandatory reports under section 24
- The whistle-blowing protections
- The home's policy to minimize the restraining of residents
- Fire Prevention and safety
- Emergency and evacuation procedures
- The home's written procedures for handling complaints and the role of staff in dealing with complaints
- Safe and correct use of equipment
- Infection prevention and control.

Interview Volunteers (who began to volunteer at the home for the first time as of July 1, 2010) where appropriate and available to determine whether orientation was provided, including:

- Residents' Bill of Rights
- The home's mission statement
- The home's policy to promote zero tolerance of abuse and neglect of residents
- The duty to make mandatory reports under section 24
- Fire safety and universal infection control practices
- The whistle-blowing protections
- Residents' safety
- Emergency and evacuation procedures
- Mealtime assistance, if the volunteer is to provide such assistance
- Techniques and approaches to respond to the needs of residents with responsive behaviours.

Observe care and service delivery, and interaction between staff and / or volunteers with residents to determine whether practices and processes reflect the home's training.

Information Gathering

Notes

Orientation for staff

No.	Yes	No	N/A	Question	Act/Reg.
1.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Has the licensee ensured that all staff have received training in the following areas before performing their responsibilities?</p> <ol style="list-style-type: none"> 1. The Residents' Bill of Rights 2. The home's mission statement 3. The home's policy to promote zero tolerance of abuse and neglect of residents 4. The duty to make mandatory reports under section 24 5. The whistle-blower protections under section 26 6. The home's policy to minimize the restraining of residents 7. Fire prevention and safety 8. Emergency and evacuation procedures 9. Infection prevention and control 10. All Acts, regulations, policies of the Ministry and similar documents, including policies of the licensee that are relevant to the person's responsibilities 11. Any other areas provided for in the regulations <p>Notes:</p> <ul style="list-style-type: none"> • These requirements do not apply in the case of emergencies or exceptional and unforeseen circumstances, in which case the training set out in subsection (2) must be provided within one week of when the person begins performing their responsibilities (s. 76 (3)). However, subsection 76 (3) of the Act does not apply during a pandemic, and instead, the training required under section 76 of the Act must be provided, <ol style="list-style-type: none"> (a) within one week of when the person begins performing their responsibilities, with respect to the matters set out in paragraphs 1, 3, 4, 7, 8 and 9 of subsection 76 (2) of the Act; and (b) within three months of when the person begins performing their responsibilities, with respect to the remaining matters set out in subsection 76 (2) of the Act. • Persons who work at the home pursuant to a contract or agreement with the licensee or pursuant to a contract or agreement between the licensee and an employment agency or other third party who will only provide occasional maintenance or repair services to the home and will not provide direct care to residents are exempt from some of the requirements 	s. 76 (2) 1-11

				see r. 222 (1) and (2)	
Notes					

No.	Yes	No	N/A	Question	Act/Reg.
2.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Has the licensee ensured that all staff have received training in the following additional areas before performing their responsibilities:</p> <ol style="list-style-type: none"> 1. The licensee’s written procedures for handling complaints and the role of staff in dealing with complaints 2. Safe and correct use of equipment, including therapeutic equipment, mechanical lifts, assistive aids and positioning aids, that is relevant to the staff member’s responsibilities 3. Cleaning and sanitizing of equipment relevant to the staff member’s responsibilities? <p>see s. 76 (2) 11</p>	r. 218. (1) 1, 2 and 3
Notes					

No.	Yes	No	N/A	Question	Act/Reg.
3.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Has the licensee ensured that the training and retraining for staff in infection prevention and control includes:</p> <ul style="list-style-type: none"> • Hand hygiene • Modes of infection transmission • Cleaning and disinfection practices; and • Use of personal protective equipment? <p>see s. 76 (2) 9</p>	r. 219 (4)
Notes					

Retraining for staff

No.	Yes	No	N/A	Question	Act/Reg.
4.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Has the licensee ensured that all staff have received retraining annually relating to the following:</p> <ul style="list-style-type: none"> • The Residents’ Bill of Rights • The long-term care home’s mission statement • The home’s policy to promote zero tolerance of abuse and neglect of residents • The duty to make mandatory reports under section 24 • The whistle-blowing protections • The home’s policy to minimize the restraining of residents • Fire prevention and safety 	s. 76 (4)

				<ul style="list-style-type: none"> • Emergency and evacuation procedures • Infection prevention and control • All Acts, regulations, policies of the Ministry and similar documents, including policies of the licensee that are relevant to the staff member’s responsibilities? <p>Note: retraining is not required for a person related to the long-term care home’s mission statement or All Acts, regulations, policies of the Ministry and similar documents, including policies of the licensee that are relevant to the staff member’s responsibilities, if, since the last training or retraining, there has been no change in the area that is relevant to the person’s responsibilities see r. 219 (2)</p>	
Notes					

Further training needs

No.	Yes	No	N/A	Question	Act/Reg.
5.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Has the licensee ensured that all staff training needs are assessed at least annually? see r. 219 (3) (a)	s. 76 (6) 1
Notes					

No.	Yes	No	N/A	Question	Act/Reg.
6.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Has the licensee ensured that all further staff training needs identified by the assessments are addressed in the manner the home considers appropriate? see r. 219 (3) (b)	s. 76 (6) 2
Notes					

Additional Training – direct care staff

No.	Yes	No	N/A	Question	Act/Reg.
7.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Has the licensee ensured that all staff who provide direct care to residents, as a condition of continuing to have contact with residents, receive training in the following areas: <ol style="list-style-type: none"> 1. Abuse recognition and prevention 2. Mental health issues, including caring for persons with dementia 3. Behaviour management 4. How to minimize the restraining of residents and, where restraining is necessary, how to do so in accordance with this Act and the regulations 	s. 76 (7) 1-6

				<p>5. Palliative care</p> <p>6. Any other areas provided for in the regulations?</p> <p>Note: The Medical Director and physicians or RNECs retained by the resident/SDM or appointed by the licensee are exempt from the requirements set out in s. 76 (7).</p>	
Notes					

No.	Yes	No	N/A	Question	Act/Reg.
8.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Has the licensee ensured that all staff who provide direct care to residents receive additional training in the following areas:</p> <ol style="list-style-type: none"> 1. Falls prevention and management. 2. Skin and wound care. 3. Contenance care and bowel management 4. Pain management, including pain recognition of specific and non-specific signs of pain. 5. For staff who apply physical devices <u>or</u> monitor residents restrained by physical devices, receive training in the application, use and potential dangers of these physical devices. 6. For staff who apply PASDs <u>or</u> monitor residents with PASDs, receive training in the application, use and potential dangers of the PASDs? <p>Note: The Medical Director and physicians or RNECs retained by the resident/SDM or appointed by the licensee are exempt from the requirements set out in s. 76 (7).</p>	r. 221 (1) 1-6
Notes					

No.	Yes	No	N/A	Question	Act/Reg.
9.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Has the licensee ensured that all staff who provide direct care to residents, receive training relating to abuse recognition and prevention:</p> <ul style="list-style-type: none"> • annually, or • as determined by the licensee, based on the assessed training needs of the individual staff member? <p>see s. 76 (7)</p>	r. 221 (2) 1
Notes					

No.	Yes	No	N/A	Question	Act/Reg.
10.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Has the licensee ensured that the training related to mental health issues, including care for persons with dementia, includes training in techniques and approaches related to responsive behaviours? see s. 76 (7)	r. 221 (3)
Notes					

No.	Yes	No	N/A	Question	Act/Reg.
11.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Has the licensee ensured that the training required on how to minimize the restraining of residents includes training in the application, use and potential dangers of physical devices used to restrain residents and personal assistance services devices? see s. 76 (7)	r. 221 (4)
Notes					

No.	Yes	No	N/A	Question	Act/Reg.
12.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Does the licensee ensure that staff who are at the home pursuant to a contract or agreement with the licensee or a contract or agreement between the licensee and an employment agency or other third party, who will only provide occasional maintenance or repair services to the home and will not provide direct care to residents receive the following information before providing their services: <ul style="list-style-type: none"> • The Residents' Bill of Rights • The home's policy to promote zero tolerance of abuse and neglect of residents • The duty to make mandatory reports • The whistle-blowing protections under section 26 • Fire prevention and safety • Emergency and evacuation procedures • Infection prevention and control: <ul style="list-style-type: none"> - hand hygiene - modes of infection transmission - cleaning and disinfection practices; and - use of personal protective equipment? 	r. 222 (2)
Notes					

Orientation for Volunteers

No.	Yes	No	N/A	Question	Act/Reg.
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13.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Has the licensee ensured that an orientation program for volunteers is developed and implemented that includes information on the following: <ul style="list-style-type: none"> (a) The Residents' Bill of Rights; (b) The home's mission statement; (c) The home's policy to promote zero tolerance of abuse and neglect of residents; (d) The duty to make mandatory reports under section 24; (e) Fire safety and universal infection control practices; (f) Any other areas provided for in the regulations; and (g) The Whistle-blowing protections under section 26 	s. 77
Notes					

No.	Yes	No	N/A	Question	Act/Reg.
14.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Has the licensee ensured that every volunteer who began volunteering at the home after July 1, 2010 received the orientation provided for in section 77 of the Act?	r. 223 (1)
Notes					

No.	Yes	No	N/A	Question	Act/Reg.
15.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Has the licensee ensured that the orientation for volunteers who began volunteering after July 1, 2010 also includes information on the following: <ul style="list-style-type: none"> 1. Resident safety, including information on reporting incidents, accidents and missing residents, and information on wheelchair safety. 2. Emergency and evacuation procedures. 3. Escorting residents. 4. Mealtime assistance, if the volunteer is to provide such assistance. 5. Communication techniques to meet the needs of the residents. 6. Techniques and approaches to respond to the needs of residents with responsive behaviours? see s. 77 (f)	r. 223 (2) 1-6
Notes					

PART B: Training and Orientation Program

No.	Yes	No	N/A	Question	Act/Reg.
16.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Does the licensee ensure that a training and orientation program for the home is developed and implemented to provide the required training	r. 216 (1)

				and orientation?	
Notes					

No.	Yes	No	N/A	Question	Act/Reg.
17.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Does the licensee ensure that training and orientation program is evaluated and updated at least annually in accordance with evidence based practices and, if there are none, in accordance with prevailing practices?	r. 216 (2)
Notes					

No.	Yes	No	N/A	Question	Act/Reg.
18.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Does the home keep a written record relating to each program evaluation that includes: <ul style="list-style-type: none"> • the date of the evaluation • the names of the persons who participated in the evaluation • a summary of the changes made, and • the date that the changes were implemented? 	r. 216 (3)
Notes					

No.	Yes	No	N/A	Question	Act/Reg.
19.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Has the licensee ensured that there is a designated lead for the training and orientation program?	r. 217
Notes					

Based on information collected during the inspection process, the inspector may determine the need to select and further inspect other related care / services areas. When this occurs, the inspector will document reason(s) for further inspection in ad hoc notes, select and complete other relevant IPs related to training and orientation, for example:

- Accommodation services – Housekeeping
- Accommodation services – Laundry
- Accommodation services – Maintenance
- Continence Care and Bowel Management
- Dignity, Choice and Privacy
- Infection Prevention and Control
- Medication Management
- Minimizing of Restraining
- Pain

- Personal Support Services
- Prevention of Abuse, Neglect and Retaliation
- Quality Improvement
- Reporting and Complaints
- Responsive Behaviours
- Safe and Secure Home
- Skin and Wound Care
- Sufficient Staffing