

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

**Inspection Information**

**Date of Inspection: September 13, 2023**

**Name of Inspector: Angela Butler**

**Inspection Type: Routine Inspection**

**Licensee: ACC-002765 - Village Care Holdings Inc. & Manorcare Holdings Inc.**

**Retirement Home: Queens Village for Seniors**

**License Number: S0173**

**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**

As part of the routine inspection, the inspector reviewed a resident's file who exhibited behaviours that posed a risk of harm to self or others. The inspector reviewed the resident's assessments, plan of care, and progress notes. The inspector found that the resident exhibits behaviours that pose a risk of harm to themselves or others in the home and the Licensee had not implemented behaviour monitoring including techniques, strategies or interventions in the resident's plan of care.

**Outcome**

The Licensee must take corrective action to achieve compliance.

## Focus Area #2: Emergency Plan

### RHRA Inspector Findings

As part of the routine inspection, the inspector reviewed the Licensee's records of testing for their emergency plans and found that the testing for situations involving missing residents, and epidemics/pandemics had not been completed annually and no documentation could be provided by the home. The inspector also reviewed the home's arrangements with community partners and found the home did not have signed memorandums of understanding with community partners for shelter and transportation. Furthermore, the inspector reviewed the emergency plan and found the plan did not include epidemics or pandemics. The Licensee failed to ensure that testing and documentation were completed in accordance with the legislation and that the emergency plan included epidemics and pandemics.

### Outcome

The Licensee provided information indicating that corrective action was being taken, however, further action must be taken to achieve compliance with all areas outlined in the finding. RHRA to confirm compliance by following up with the Licensee or by inspection.

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

### RHRA Inspector Findings

As part of the routine inspection, the inspector reviewed a sample of resident care files and found one resident did not have a plan of care developed at the time of the inspection. The Licensee failed to ensure that resident plans of care were in accordance with the legislation.

### Outcome

The Licensee must take corrective action to achieve compliance.

## Focus Area #4: Staff Training

### RHRA Inspector Findings

As part of the routine inspection, the inspector reviewed medication training for medication administration and found that 10 UCP's had not been trained in the last year. The Licensee failed to ensure that staff were trained in medication administration yearly.

### Outcome

The Licensee must take 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.*

## Not Applicable

## 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. 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;

**s. 23. (1), (c)**

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

**The Licensee failed to comply with the RHA s. 24. (4); Emergency plan, general**

**s. 24. (4); Emergency plan, general**

24. (4) The licensee shall keep current all arrangements with community agencies, partner facilities and resources that will be involved in responding to an emergency.

**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,

**s. 24. (5), (c)**

(c) keep a written record of the testing of the emergency plan and planned evacuations and of any changes made to improve the emergency plan.

**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. 62. (1); Plan of care**

**s. 62. (1); Plan of care**

62. (1) When a resident commences his or her residency in a retirement home, the licensee shall, within the prescribed times, ensure that the resident is assessed and that a plan of care is developed based on the assessment and in accordance with this section and 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.*

**Retirement Homes Act, 2010:**

**s. 62. (12); Reassessment and revision**

62. (12) The licensee shall ensure that the resident is reassessed and the plan of care reviewed and revised at least every six months and at any other time if, in the opinion of the licensee or the resident,

**s. 62. (4); Contents of plan**

62. (4) The licensee of a retirement home shall ensure that there is a written plan of care for each resident of the home that sets out,

**s. 62. (4), (b)**

(b) the planned care services for the resident that the licensee will provide, including,

**s. 62. (4), (b), 1.**

(i) the details of the services,

**s. 62. (4); Contents of plan**

62. (4) The licensee of a retirement home shall ensure that there is a written plan of care for each resident of the home that sets out,

**s. 62. (4), (b)**

(b) the planned care services for the resident that the licensee will provide, including,

**s. 62. (4), (b), 2.**

(ii) the goals that the services are intended to achieve,

**s. 62. (4); Contents of plan**

62. (4) The licensee of a retirement home shall ensure that there is a written plan of care for each resident of the home that sets out,

**s. 62. (4), (b)**

(b) the planned care services for the resident that the licensee will provide, including,

**s. 62. (4), (b), 3.**

(iii) clear directions to the licensee's staff who provide direct care to the resident;

**s. 62. (6); Assessment of resident**

62. (6) The licensee shall ensure that the plan of care is based on an assessment of the resident and the needs and preferences of the resident.

**s. 67. (4); Policy to promote zero tolerance**

67. (4) Without in any way restricting the generality of the duties described in subsections (1) and (2), the licensee shall ensure that there is a written policy to promote zero tolerance of abuse and neglect of residents and shall ensure that the policy is complied with.

**Ontario Regulation 166/11:**

**s. 15. (1); Policy of zero tolerance of 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,

**s. 15. (1), (a)**

(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;

**s. 15. (1); Policy of zero tolerance of 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,

**s. 15. (1), (b)**

(b) situations that may lead to abuse and neglect and how to avoid such situations.

**s. 15. (3); Policy of zero tolerance of abuse and neglect**

15. (3) The policy to promote zero tolerance of abuse and neglect of residents described in subsection 67 (4) of the Act shall,

**s. 15. (3), (d)**

(d) subject to subsection (4), provide that the licensee of the retirement home shall ensure that the resident's substitute decision-makers, if any, and any other person specified by the resident,

**s. 15. (3), (d), 2.**

(ii) are notified within 12 hours upon the licensee becoming aware of any other alleged, suspected or witnessed incident of abuse or neglect of a resident;

**s. 15. (3); Policy of zero tolerance of abuse and neglect**

15. (3) The policy to promote zero tolerance of abuse and neglect of residents described in subsection 67 (4) of the Act shall,

**s. 15. (3), (e)**

(e) subject to subsection (4), provide that the licensee of the retirement home shall ensure that the resident and the resident's substitute decision-makers, if any, are notified of the results of an investigation described in clause 67 (5) (e) of the Act immediately upon the completion of the investigation;

**s. 15. (3); Policy of zero tolerance of abuse and neglect**

15. (3) The policy to promote zero tolerance of abuse and neglect of residents described in subsection 67 (4) of the Act shall,

**s. 15. (3), (g)**

(g) provide that the licensee of the retirement home shall ensure that,

**s. 15. (3), (g), 1.**

(i) an analysis of every incident of abuse or neglect of a resident at the home is undertaken promptly after the licensee becomes aware of it,

**s. 15. (3); Policy of zero tolerance of abuse and neglect**

15. (3) The policy to promote zero tolerance of abuse and neglect of residents described in subsection 67 (4) of the Act shall,

**s. 15. (3), (g)**

(g) provide that the licensee of the retirement home shall ensure that,

**s. 15. (3), (g), 2.**

(ii) at least once in every calendar year, an evaluation is made to determine the effectiveness of the policy and what changes and improvements are required to prevent further occurrences of abuse and neglect of residents,

**s. 15. (3); Policy of zero tolerance of abuse and neglect**

15. (3) The policy to promote zero tolerance of abuse and neglect of residents described in subsection 67 (4) of the Act shall,

**s. 15. (3), (g)**

(g) provide that the licensee of the retirement home shall ensure that,

**s. 15. (3), (g), 3.**

(iii) the results of the analysis undertaken under subclause (i) are considered in the evaluation mentioned in subclause (ii),

**s. 15. (3); Policy of zero tolerance of abuse and neglect**

15. (3) The policy to promote zero tolerance of abuse and neglect of residents described in subsection 67 (4) of the Act shall,

**s. 15. (3), (g)**

(g) provide that the licensee of the retirement home shall ensure that,

**s. 15. (3), (g), 4.**

(iv) the changes and improvements mentioned in subclause (ii) are promptly implemented,

**s. 15. (3); Policy of zero tolerance of abuse and neglect**

15. (3) The policy to promote zero tolerance of abuse and neglect of residents described in subsection 67 (4) of the Act shall,

**s. 15. (3), (g)**

(g) provide that the licensee of the retirement home shall ensure that,

**s. 15. (3), (g), 5.**

(v) a written record of everything provided for in subclauses (ii) and (iv) and the date of the evaluation, the names of the persons who participated in the evaluation and the date that the changes and improvements were implemented is promptly prepared.

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

24. (5) The licensee shall,

**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), 2.**

(ii) situations involving a missing resident,

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

24. (5) The licensee shall,

**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), 4.**

(iv) violent outbursts;

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

24. (5) The licensee shall,

**s. 24. (5), (b)**

(b) at least once every two years, conduct a planned evacuation of the retirement home;

**s. 25. (3); Emergency plan, retirement home with more than 10 residents**

25. (3) The licensee shall ensure that the emergency plan provides for the following:

**s. 25. (3), para. 1**

1. Dealing with,

**s. 25. (3), para. 1, 5.1**

v.1 epidemics and pandemics,

**s. 43. (1); Initial assessment of care needs**

43. (1) Subject to section 45, no later than two days after a resident commences residency in a retirement home, the licensee of the home shall ensure that an initial assessment of the resident's immediate care needs is conducted.

**s. 43. (2); Initial assessment of care needs**

43. (2) The initial assessment mentioned in subsection (1) shall consider the following matters with respect to the resident:

**s. 43. (2), para. 2**

2. Presence of infectious diseases.

**s. 43. (2); Initial assessment of care needs**

43. (2) The initial assessment mentioned in subsection (1) shall consider the following matters with respect to the resident:

**s. 43. (2), para. 4**

4. Known allergies.

**s. 43. (2); Initial assessment of care needs**

43. (2) The initial assessment mentioned in subsection (1) shall consider the following matters with respect to the resident:

**s. 43. (2), para. 6**

6. Cognitive ability.

**s. 43. (2); Initial assessment of care needs**

43. (2) The initial assessment mentioned in subsection (1) shall consider the following matters with respect to the resident:

**s. 43. (2), para. 7**

7. Risk of harm to self and to others.

**s. 44. (1); Full assessment of care needs**

44. (1) Subject to section 46, no later than 14 days after a resident commences residency in a retirement home, the licensee shall ensure that a full assessment of the resident's care needs and preferences is conducted.

**s. 44. (2); Full assessment of care needs**

44. (2) The full assessment mentioned in subsection (1) shall consider the following matters with respect to the resident:

**s. 44. (2), para. 4**

4. Behavioural issues.

**s. 44. (3); Full assessment of care needs**

44. (3) If a licensee or a staff member of a retirement home has reason to believe that a resident's care needs may include dementia care, skin and wound care, or the use of a personal assistance services device, the licensee shall ensure that the full assessment is,

**s. 44. (3), (a)**

(a) conducted by a member of a College, as defined in the Regulated Health Professions Act, 1991;

**s. 47. (5); Development of plan of care**

47. (5) If an assessment of a resident indicates that the resident's care needs may include dementia care, skin and wound care or the use of a personal assistance services device, the licensee shall ensure that an interdisciplinary care conference is held as part of the development of the resident's plan of care and that the resident's plan of care takes into account the results of the care conference.

**s. 59. (1); Procedure for complaints to licensee**

59. (1) Every licensee of a retirement home shall ensure that every written or verbal complaint made to the licensee or a staff member concerning the care of a resident or operation of the home is dealt with as follows:

**s. 59. (1), para. 2**

2. The complaint shall be resolved if possible, and a response that complies with paragraph 4 provided within 10 business days of the receipt of the complaint.

**s. 59. (1); Procedure for complaints to licensee**

59. (1) Every licensee of a retirement home shall ensure that every written or verbal complaint made to the licensee or a staff member concerning the care of a resident or operation of the home is dealt with as follows:

**s. 59. (1), para. 3**

3. For those complaints that cannot be investigated and resolved within 10 business days, an acknowledgement of receipt of the complaint shall be provided within 10 business days of receipt of the complaint, including the date by which the complainant can reasonably expect a resolution, and a follow-up response that complies with paragraph 4 shall be provided as soon as possible in the circumstances.

**s. 59. (1); Procedure for complaints to licensee**

59. (1) Every licensee of a retirement home shall ensure that every written or verbal complaint made to the licensee or a staff member concerning the care of a resident or operation of the home is dealt with as follows:

**s. 59. (1), para. 4**

4. A response shall be made to the person who made the complaint, indicating,

**s. 59. (1), para. 4, 1.**

i. what the licensee has done to resolve the complaint,

**s. 59. (1); Procedure for complaints to licensee**

59. (1) Every licensee of a retirement home shall ensure that every written or verbal complaint made to the licensee or a staff member concerning the care of a resident or operation of the home is dealt with as follows:

**s. 59. (1), para. 4**

4. A response shall be made to the person who made the complaint, indicating,

**s. 59. (1), para. 4, 2.**

ii. that the licensee believes the complaint to be unfounded and the reasons for the belief.

## 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 <http://www.rhra.ca/en/retirement-home-database>.

Signature of Inspector		RN	Date October 16, 2023
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