

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

Inspection Information	
<b>Date of Inspection:</b> June 6, 2014	<b>Name of Inspector:</b> Julie Hebert
<b>Inspection Type:</b> Routine Inspection	
<b>Licensee:</b> Rykka Care Centres LP / 48 Galaxy Boulevard, Unit 415, Toronto, ON M9W 6C8 (the "Licensee")	
<b>Retirement Home:</b> Lifetimes on Riverside / 3387 Riverside Drive E., Windsor, ON N8Y 1A8 (the "home")	
<b>Licence Number:</b> S0232	

Purpose of Inspection
The RHRA conducts routine inspections as set out in section 77(3) of the Retirement Homes Act, 2010 (the "RHA").

NON-COMPLIANCE
<p><b>1. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 60; Standards.</b>  <b>The Licensee failed to comply with O. Reg. 166/11, s. 24; Emergency plan, general.</b>  <b>The Licensee failed to comply with O. Reg. 166/11, s. 25; Emergency plan, retirement home with more than 10 residents.</b></p> <p>Specifically, the Licensee failed to comply with the following subsections:</p> <p><b>s. 60. (4)</b> Every licensee of a retirement home shall ensure that the following are in place for the home:</p> <ol style="list-style-type: none"> <li>1. An emergency plan that responds to emergencies in the home or in the community in which the home is located and that meets the prescribed requirements.</li> </ol> <p><b>s. 24. (4)</b> The licensee shall keep current all arrangements with community agencies, partner facilities and resources that will be involved in responding to an emergency.</p> <p>(5) The licensee shall,</p> <ol style="list-style-type: none"> <li>(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,             <ol style="list-style-type: none"> <li>(i) the loss of essential services,</li> <li>(ii) situations involving a missing resident,</li> <li>(iii) medical emergencies, and</li> <li>(iv) violent outbursts;</li> </ol> </li> <li>(b) at least once every two years, conduct a planned evacuation of the retirement home; and</li> <li>(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.</li> </ol>

- s. 25. (2)** The licensee shall ensure that the development of the emergency plan includes,
- (a) consultation with the relevant community agencies, partner facilities and resources that will be involved in responding to an emergency;
  - (b) identification of hazards and risks that may give rise to an emergency affecting the home, whether the hazards and risks arise within the home or in the surrounding vicinity or community, and strategies to address those hazards and risks.
- (3) The licensee shall ensure that the emergency plan provides for the following:
- 2. Evacuation of the retirement home, including a system in the home to account for the whereabouts of all residents in the event that it is necessary to evacuate and relocate residents and evacuate staff and others in case of an emergency.
  - 3. Resources, supplies and equipment vital for the emergency response being set aside and readily available at the retirement home and regular testing of all such resources, supplies and equipment to ensure that they are in working order.
  - 4. Identification of the community agencies, partner facilities and resources that will be involved in responding to an emergency.
- (4) The licensee shall ensure that the emergency plan addresses the following components:
- 1. Plan activation.
  - 2. Lines of authority.
  - 3. Communications plan.
  - 4. Specific staff roles and responsibilities.
- (5) The licensee shall ensure that the emergency plan for the retirement home is evaluated and updated at least annually and that the updating includes contact information for the relevant community agencies, partner facilities and resources that will be involved in responding to an emergency.

**Inspection Finding**

The home has a new Emergency Plan which was just implemented May 1, 2014. It has not been adapted to the home as of yet and is not compliant with the above noted sections.

**Outcome**

Corrective action scheduled to be completed by the Licensee by August 15, 2014.

**2. 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. 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; and
  - (b) the need for and process of reporting, providing surveillance of and documenting incidents of infectious illness.

**Inspection Finding**

The home could not show evidence of training in the above mentioned sections of infection control.

**Outcome**

Corrective action scheduled to be completed by the Licensee by September 15, 2014.

**3. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 65; Obligations of licensees re staff.**

Specifically, the Licensee failed to comply with the following subsections:

**s. 65. (2)** Every licensee of a retirement home shall ensure that no staff work in the home unless they have received training in,

(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;

(5) The licensee shall ensure that all staff who provide care services to residents receive training in the following matters and at the times required by the regulations, as a condition of continuing to have contact with residents, in addition to the other training that they are required to receive under this section:

3. Behaviour management.

**Inspection Finding**

The home could not show evidence of training in the above mentioned sections.

**Outcome**


Corrective action scheduled to be completed by the Licensee by September 15, 2014.

**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 Public Register, available online at <http://rhra.ca/en/register/>.

Signature of Inspector  	Date  July 29, 2014
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