

FINAL INSPECTION REPORT Under the Retirement Homes Act, 2010

Inspection Information

Date of Inspection: October 2, 2014 **Name of Inspector:** Debbie Rydall

Inspection Type: Routine Inspection

Licensee: Amica Mature Lifestyles Inc. / Style de Vie Amica Inc. / 1111 Melville Street, Vancouver, BC V6E

3V6 (the "Licensee")

Retirement Home: Amica at Thornhill / 546 Steeles Avenue, Vaughan, ON L4J 1A2 (the "home")

Licence Number: T0149

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

1. The Licensee failed to comply with O. Reg. 166/11, s. 24; Emergency plan, general.

The Licensee failed to comply with O. Reg. 166/11, s. 25; Emergency plan, retirement home with more than 10 residents.

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

- 24. (5) The licensee shall,
 - (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,
 - (i) the loss of essential services,
 - (iv) violent outbursts;
 - (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.
- 25. (3) The licensee shall ensure that the emergency plan provides for the following:
 - 1. Dealing with,
 - iii. violent outbursts,
 - 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.

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25. (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

There is an emergency plan in place; however the plan does not include violent outbursts and does not list the resources and supplies that would be involved in responding to an emergency. There was evidence that the home has completed some but not all of the required testing of their emergency plan and there was no evidence that the home has reviewed their plan on an annual basis as is required by the legislation.

Outcome

Corrective action scheduled to be completed by the Licensee by December 31, 2014.

2. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 65; Training. The Licensee failed to comply with O. Reg. 166/11, s. 14; Staff training.

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

- <u>65. (2)</u> Every licensee of a retirement home shall ensure that no staff work in the home unless they have received training in,
 - (a) the Residents' Bill of Rights;
 - (b) the licensee's policy mentioned in subsection 67 (4) to promote zero tolerance of abuse and neglect of residents;
 - (c) the protection afforded for whistle-blowing described in section 115;
- **14. (1)** For the purposes of clause 65 (2) (j) of the Act, every licensee of a retirement home shall ensure that all staff who work in the home receive training in the procedure described in subsection 73 (1) of the Act for a person to complain to the licensee.

Inspection Finding

There was no evidence provided to support that staff have received the required training as per the legislation and no proof of training for 2013 was provided during the inspection. The two employee files reviewed didn't support that the employees had received all of the required training prior to working in the home.

Outcome

Corrective action scheduled to be completed by the Licensee by November 20, 2014.

3. The Licensee failed to comply with O. Reg. 166/11, s. 15; Policy of zero tolerance of abuse and neglect.

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

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

(e) 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;

Inspection Finding

The home has a prevention of abuse policy and procedure in place; however the policy does not include that the Resident /SDM is to be immediately notified of the results of the investigation upon the completion of the investigation.

Outcome

Corrective action taken by the Licensee.

4. The Licensee failed to comply with O. Reg. 166/11, s. 23; Behaviour management.

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

- **23. (1)** Every licensee of a retirement home shall develop and implement a written behaviour management strategy that includes,
 - (c) strategies for monitoring residents that have demonstrated behaviours that pose a risk to the resident or others in the home;

Inspection Finding

The home has developed a behaviour management policy; however the policy does not include strategies for monitoring residents who have demonstrated behaviours that pose a risk to the resident or others in the home.

Outcome

Corrective action taken by the Licensee.

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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
Affolas	October 22, 2014

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