

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

Inspection Information	
Date of Inspection: January 22, 2015	Name of Inspector: Debbie Rydall
Inspection Type: Routine Inspection	
Licensee: Mon Sheong Foundation / 11211 Yonge Street, Richmond Hill, ON L4S 1L2 (the "Licensee")	
Retirement Home: Mon Sheong Private Care / 11211 Yonge Street, Richmond Hill, ON L4S 0E9 (the "home")	
Licence Number: T0407	

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

NON-COMPLIANCE
<p>1. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 54; Contents.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p>54. (2) The package of information shall include, at a minimum,</p> <ul style="list-style-type: none"> (c) the licensee's policy mentioned in subsection 67 (4) to promote zero tolerance of abuse and neglect of residents; (d) the licensee's procedure for complaints mentioned in subsection 73 (1); (l) a statement that a resident may purchase or apply for care services, other services, programs or goods from external care providers; (s) information as to whether the retirement home has automatic sprinklers in each resident's room; (t) information relating to staffing, including night time staffing levels and qualifications of staff of the retirement home;
<p>Inspection Finding</p> <p>Routine inspection revealed that the information package provided to residents did not contain the required information as prescribed by the legislation.</p>
<p>Outcome</p> <p>Corrective action scheduled to be completed by the Licensee by March 31, 2015.</p>
<p>2. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 60; Safety plans.</p>

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

- 60. (4)** Every licensee of a retirement home shall ensure that the following are in place for the home:
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.

Inspection Finding

Routine inspection revealed that the Licensee did not have an emergency plan in place as is prescribed by the legislation.

Outcome

Corrective action scheduled to be completed by the Licensee by March 31, 2015.

- 3. 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.
The Licensee failed to comply with O. Reg. 166/11, s. 55; Contents of records.**

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

- 65. (2)** 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;
 - (d) the licensee’s policy mentioned in subsection 68 (3) regarding the use of personal assistance services devices for residents;
 - (f) fire prevention and safety;

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.

- 55. (5)** A licensee of a retirement home shall keep records proving compliance with the Act and this Regulation in relation to,
- (c) the skills, qualifications and training of the staff who work in the home;

Inspection Finding

Routine inspection revealed that the Licensee did not have documented evidence to support that staff had received the prescribed training prior to working in the home.

Outcome

Corrective action scheduled to be completed by the Licensee by March 31, 2015.

4. The Licensee failed to comply with O. Reg. 166/11, s. 31; Medication management system.

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

31. (1) 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 establish a medication management system, which includes written policies and procedures, to ensure that all drugs and other substances to be administered to residents of the home are acquired, received in the home, stored, dispensed, administered, destroyed and disposed of correctly as required by law and in accordance with prevailing practices.

Inspection Finding

Routine inspection revealed that the medication management policy and procedure in place is not aligned with the current practice of the home and the policy does not state how drugs and other substances are to be administered to the residents.

Outcome

Corrective action scheduled to be completed by the Licensee by March 31, 2015.

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 February 6, 2015
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