

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

Inspection Information	
Date of Inspection: June 15, 2015	Name of Inspector: Julie Hebert
Inspection Type: Routine Inspection	
Licensee: Rykka Care Centres LP / 48 Galaxy Blvd, Toronto, ON M9W 6C8 (the "Licensee")	
Retirement Home: Lifetimes on Riverside / 3387 Riverside Drive , Windsor, ON N8Y 1A8 (the "home")	
Licence Number: S0232	

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"> (g) information about the role of the Authority and its contact information; (s) information as to whether the retirement home has automatic sprinklers in each resident's room;
<p>Inspection Finding</p> <p>The home's information package is either missing or includes inaccurate information regarding the above mentioned areas.</p>
<p>Outcome</p> <p>Corrective action taken by the Licensee.</p>
<p>2. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 53; Agreement required.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p>53. (1) The licensee of a retirement home shall enter into a written agreement with every resident of the home before the resident commences residency in the home.</p>
<p>Inspection Finding</p>

The home was not entering into agreements with residents prior to them commencing residency.

Outcome

Corrective action taken by the Licensee.

**3. 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,
- (ii) situations involving a missing resident,
- (iv) violent outbursts;

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.

Inspection Finding

The home's emergency plan was not in compliance in the above noted areas.

Outcome

Corrective action scheduled to be completed by the Licensee by August 15, 2015.

**4. The Licensee failed to comply with O. Reg. 166/11, s. 43; Initial assessment of care needs.
The Licensee failed to comply with O. Reg. 166/11, s. 44; Full assessment of care needs.**

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

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

- 2. Presence of infectious diseases.

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

- 2. Functional capacity.

<ul style="list-style-type: none"> 5. Need for care services. 6. Need for assistance with the activities of daily living. 7. The matters listed in subsection 43 (2).
<p>Inspection Finding The home's initial and full assessments were not complete in the above mentioned areas.</p>
<p>Outcome Corrective action required by the Licensee.</p>
<p>5. The Licensee failed to comply with O. Reg. 166/11, s. 59; Procedure for complaints to licensee.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p>59. (2) The licensee shall ensure that a written record is kept in the retirement home that includes,</p> <ul style="list-style-type: none"> (a) the nature of each verbal or written complaint; (b) the date that the complaint was received; (c) the type of action taken to resolve the complaint, including the date of the action, time frames for actions to be taken and any follow-up action required; (d) the final resolution, if any, of the complaint; (e) every date on which any response was provided to the complainant and a description of the response;
<p>Inspection Finding The home was not keeping written documentation of complaints containing the above mentioned information.</p>
<p>Outcome Corrective action taken by the Licensee.</p>

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 28, 2015
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