

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

Inspection Information	
<b>Date of Inspection:</b> October 28, 2015	<b>Name of Inspector:</b> Michele Davidson
<b>Inspection Type:</b> Routine Inspection	
<b>Licensee:</b> Sts. Peter and Paul Ukrainian Community Homes / 221 Milner Avenue, Toronto, ON M1S 4P4 (the "Licensee")	
<b>Retirement Home:</b> Sts. Peter and Paul Residence / 221 Milner Avenue, Toronto, ON M1S 4P4 (the "home")	
<b>Licence Number:</b> T0164	

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><b>1. The Licensee failed to comply with O. Reg. 166/11, s. 11; Posted information.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><b>11. (1)</b> For the purposes of paragraph 4 of subsection 55 (2) of the Act, the following information is prescribed as information that must be posted in a retirement home under that subsection:</p> <p>3. An explanation of the procedures to be followed in the case of an evacuation.</p>
<p><b>Inspection Finding</b></p> <p>The posted emergency information did not address the procedures to be followed in the event of an evacuation.</p>
<p><b>Outcome</b></p> <p>Corrective action scheduled to be taken by the Licensee by December 31, 2015</p>
<p><b>2. The Licensee failed to comply with O. Reg. 166/11, s. 24; Emergency plan, general.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><b>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><b>24. (5)</b> The licensee shall,</p>

- (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,
  - (iii) medical emergencies,
  - (iv) violent outbursts;
- (b) at least once every two years, conduct a planned evacuation of the retirement home;
- (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.

**Inspection Finding**

The emergency plan did not contain testing of the situations listed. Further, there was no evidence of current arrangements with emergency partners.

**Outcome**

Corrective action scheduled to be taken by the Licensee by January 31, 2016.

**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.**

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,

- (d) the licensee’s policy mentioned in subsection 68 (3) regarding the use of personal assistance services devices for residents;

**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**

Staff was not trained in the listed items.

**Outcome**

Corrective action scheduled to be taken by the Licensee by November 27, 2015.

**4. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 67; Contents.  
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):

- 67. (5)** At a minimum, the policy to promote zero tolerance of abuse and neglect of residents shall,
- (f) set out the consequences for those who abuse or neglect residents;
  - (g) comply with the prescribed requirements, if any, respecting the matters described in clauses (a) to (f);
  - (h) deal with the additional matters, if any, that are prescribed.

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

- (a) contain procedures and interventions to assist and support residents who have been abused or neglected or allegedly abused or neglected;
- (b) contain procedures and interventions to deal with persons who have abused or neglected or allegedly abused or neglected residents, as appropriate;
- (c) identify measures and strategies to prevent abuse and neglect;
- (g) provide that the licensee of the retirement home shall ensure that,
  - (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,
  - (iii) the results of the analysis undertaken under subclause (i) are considered in the evaluation mentioned in subclause (ii),
  - (iv) the changes and improvements mentioned in subclause (ii) are promptly implemented,
  - (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.

**Inspection Finding**

The Abuse and Neglect Policy did not contain the listed items as required by the Act and Regulations.

**Outcome**

Corrective action taken by the Licensee.

**5. The Licensee failed to comply with O. Reg. 166/11, s. 59; Procedure for complaints to licensee.**

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

- 59. (2)** The licensee shall ensure that a written record is kept in the retirement home that includes,
- (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;

**Inspection Finding**

The Complaint Procedure did not meet the requirements prescribed by the Regulation in the listed areas.


<b>Outcome</b> 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 December 31, 2015
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