

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

| Inspection Information | |
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| Date of Inspection: January 19, 2017 | Name of Inspector: Mark Dennis |
| Inspection Type: Routine Inspection | |
| Licensee: 1954095 Ontario Limited / 138 Poplar Heights Drive, Toronto, ON M9A 4Z4 (the "Licensee") | |
| Retirement Home: Mulcaster Mews / 130 Mulcaster Street, Barrie, ON L4M 3M9 (the "home") | |
| Licence Number: N0428 | |

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

| NON-COMPLIANCE |
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| <p>1. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 53; Agreement required. The Licensee failed to comply with O. Reg. 166/11, s. 55; Contents of records.</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>55. (2) The record for each resident shall include,</p> <ul style="list-style-type: none"> (d) a copy of the resident's most recent plan of care; (e) a copy of the written agreement between the resident and the licensee required under section 53 of the Act; |
| <p>Inspection Finding</p> <p>The Licensee had not entered into a written agreement with two residents of the home before the residents commenced residency in the home. The Licensee did not keep a copy of the written agreement between the two residents. Further, the Licensee did not keep a copy of the most recent plan of care for one of the residents.</p> |
| <p>Outcome</p> <p>The Licensee has advised it has taken corrective action to achieve compliance. RHRA to confirm compliance by inspection.</p> |
| <p>2. The Licensee failed to comply with O. Reg. 166/11, s. 24; Emergency plan, general.</p> |

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. (4) The licensee shall keep current all arrangements with community agencies, partner facilities and resources that will be involved in responding to an emergency.

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,
- (iii) medical emergencies,
- (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. (4) The licensee shall ensure that the emergency plan addresses the following components:

- 1. Plan activation.
- 2. Lines of authority.
- 3. Communications plan.

Inspection Finding

The Licensee failed to provide evidence of a community agency that would provide transportation to residents if responding to an emergency at the home. The Licensee failed to provide evidence of annual testing of the emergency plan for loss of essential services, missing resident, medical emergencies or violent outbursts. Further, the Licensee has not kept a written record of this testing and changes made to improve the system. The Licensee emergency plan does not clearly address Plan Activation, Lines of Authority or a Communication plan.

Outcome

The Licensee has advised it has taken corrective action to achieve compliance. RHRA to confirm compliance by inspection.

3. The Licensee failed to comply with O. Reg. 166/11, s. 44; Full assessment of care needs. The Licensee failed to comply with O. Reg. 166/11, s. 47; Development of plan of care.

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

44. (1) Subject to section 46, no later than 14 days after a resident commences residency in a retirement home, the licensee shall ensure that a full assessment of the resident’s care needs and preferences is conducted.

47. (2) No later than 21 days after a resident commences residency in a retirement home, the licensee of the home shall develop a complete plan of care for the resident based on the full assessment of the resident’s care needs and preferences conducted under section 44 that takes into account all of the matters that must be considered in a full assessment.

Inspection Finding

The Licensee failed to complete a full assessment and a plan of care for one of the residents.

Outcome

The Licensee has advised it has taken corrective action to achieve compliance. RHRA to confirm compliance by inspection.

- 4. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 65; Training.
The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 65; On-going 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,

- (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;

65. (4) The licensee shall ensure that the persons who are required to receive the training described in subsection (2) receive on-going training as described in that subsection at the times required by the regulations.

14. (2) For the purposes of subsection 65 (4) of the Act, the licensee shall ensure that the persons who are required to receive training under subsection 65 (2) of the Act receive the training at least annually.

Inspection Finding

The Licensee failed to provide evidence that staff have received the prescribed training prior to commencing work in the home. Further, the Licensee failed to provide evidence that the persons who are required to receive the training described in section 65 (2) of the Act receive on-going training annually.

Outcome


The Licensee has advised it has taken corrective action to achieve compliance. RHRA to confirm compliance by inspection.

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/>

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| Signature of Inspector  | Date February 10, 2017 |
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