

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

Inspection Information	
<b>Date of Inspection:</b> May 11, 2017	<b>Name of Inspector:</b> Julie Hebert
<b>Inspection Type:</b> Mandatory Reporting Inspection	
<b>Licensee:</b> London Canada Investors Limited Partnership / 355 Burrard Street, Vancouver, BC V6C 2G8 (the "Licensee")	
<b>Retirement Home:</b> Arbor Trace Alzheimer's Special Care Center / 120 Chelton Road, London, ON N6M 1C6 (the "home")	
<b>Licence Number:</b> S0221	

Purpose of Inspection
The RHRA received a report under section 75(1) of the <i>Retirement Homes Act, 2010</i> (the "RHA").

NON-COMPLIANCE
<p><b>1. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 62; Compliance with plan. The Licensee failed to comply with O. Reg. 166/11, s. 41; Dementia care program.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><b>62. (10)</b> The licensee shall ensure that the care services that the licensee provides to the resident are set out in the plan of care and are provided to the resident in accordance with the plan and the prescribed requirements, if any.</p> <p><b>41. (2)</b> The program shall include,</p> <ul style="list-style-type: none"> <li>(c) therapies, techniques and activities to promote quality of life and wellbeing for the resident;</li> <li>(e) strategies for identifying and addressing triggers for responsive behaviours if the resident exhibits responsive behaviours.</li> </ul>
<p><b>Inspection Finding</b></p> <p>The Licensee had not implemented their dementia care program for a resident who was exit seeking and eloped from the home. The resident's plan of care did not address triggers for their exit seeking, nor did it include therapies, techniques and activities to maximize the resident's functioning and quality of life, as per the dementia care program.</p>
<p><b>Outcome</b></p> <p>The Licensee submitted a plan to achieve compliance by June 30, 2017. RHRA to confirm compliance by inspection</p>

**2. 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):

**14. (3)** For the purposes of paragraph 5 of subsection 65 (5) of the Act, every licensee of a retirement home shall ensure that every staff member who provides a care service to a resident has received or receives training in,

(b) each care service offered in the home so that the staff member is able to understand the general nature of each of those services, the standards applicable under the Act to each of those services and the aspects of each of those services that may be relevant to the staff member's own duties in the home.

**Inspection Finding**

Not all staff trained in the home have received training in the home's dementia care program as per the legislation.

**Outcome**

The Licensee submitted a plan to achieve compliance by June 27, 2017. 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/>

Signature of Inspector  	Date  June 26, 2017
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