

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

Inspection Information	
<b>Date of Inspection:</b> December 19, 2017	<b>Name of Inspector:</b> Debbie Rydall
<b>Inspection Type:</b> Routine Inspection	
<b>Licensee:</b> Tiverton Park Manor Inc. / 24 King Street, Tiverton, ON N0G 2T0 (the "Licensee")	
<b>Retirement Home:</b> Tiverton Park Manor / 24 King Street, Tiverton, ON N0G 2T0 (the "home")	
<b>Licence Number:</b> S0116	

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. 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.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><b>24. (5)</b> The licensee shall,</p> <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,</p> <p>(i) the loss of essential services,</p> <p>(ii) situations involving a missing resident,</p> <p>(iii) medical emergencies,</p> <p>(iv) violent outbursts;</p> <p>(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.</p> <p><b>25. (3)</b> The licensee shall ensure that the emergency plan provides for the following:</p> <p>1. Dealing with,</p> <p>vi. chemical spills,</p>

Inspection Finding
The home's emergency plan reviewed at the time of the routine inspection was not completely aligned with the legislation in the area listed above; further there was no documented evidence provided to support that the home had completed the annual testing of their emergency plan as per the requirements of the legislation.

**Outcome**

The Licensee submitted plan to achieve compliance by January 25, 2018. RHRA to confirm compliance by inspection.

**2. 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,  
(e) contain procedures for investigating and responding to alleged, suspected or witnessed abuse and neglect of residents;

**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;

**Inspection Finding**

The home's zero abuse and neglect policy reviewed at the time of the routine inspection was not completely aligned with the legislation in the areas listed.

**Outcome**

The Licensee submitted plan to achieve compliance by January 31, 2018. RHRA to confirm compliance by inspection.

**3. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 73; Procedure for complaints to licensee.**

**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):

**73. (1)** Every licensee of a retirement home shall ensure that there is a written procedure for a person to complain to the licensee about the operation of the home and for the way in which the licensee is required to deal with complaints.

**59. (1)** Every licensee of a retirement home shall ensure that every written or verbal complaint made to the licensee or a staff member concerning the care of a resident or operation of the home is dealt with as follows:

1. The complaint shall be investigated. If the complaint alleges harm or risk of harm to one or more residents, the investigation shall be commenced immediately.

**Inspection Finding**

The home's written complaints management procedure was not completely aligned with the requirements of the legislation.

**Outcome**

The Licensee submitted plan to achieve compliance by January 31, 2018. RHRA to confirm compliance by inspection..

**4. The Licensee failed to comply with O. Reg. 166/11, s. 23; Behaviour management.**

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

- 23. (1)** Every licensee of a retirement home shall develop and implement a written behaviour management strategy that includes,
- (c) strategies for monitoring residents that have demonstrated behaviours that pose a risk to the resident or others in the home;

**Inspection Finding**

The home's Behaviour Management strategy was not completely aligned with the legislation in the area listed.

**Outcome**


The Licensee submitted plan to achieve compliance by January 31, 2018. 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 January 29, 2018
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