

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

**Inspection Information** 

**Date of Inspection:** June 28, 2018 **Name of Inspector:** Michele Davidson

**Inspection Type:** Mandatory Reporting Inspection

Licensee: Dre's Lodge Inc. / 10 Empringham Drive, Scarborough, ON M1B 3T5 (the "Licensee")

Retirement Home: Dre's Lodge Inc. / 82 River Street, Sunderland, ON LOC 1H0 (the "home")

**Licence Number: T0487** 

## **Purpose of Inspection**

The RHRA received a report under section 75(1) of the Retirement Homes Act, 2010 (the "RHA").

#### **NON-COMPLIANCE**

1. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 62; Reassessment and revision.

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

<u>62. (12)</u> The licensee shall ensure that the resident is reassessed and the plan of care reviewed and revised at least every six months and at any other time if, in the opinion of the licensee or the resident,

## **Inspection Finding**

Inspection of the residents' files indicated that plans of care had not been reviewed and revised, at least every six months, as prescribed by the Act.

#### **Outcome**

The Licensee submitted plan to achieve compliance by August 7, 2018. RHRA to confirm compliance by inspection.

2. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 67; Policy to promote zero tolerance.

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

<u>67. (4)</u> Without in any way restricting the generality of the duties described in subsections (1) and (2), the licensee shall ensure that there is a written policy to promote zero tolerance of abuse and neglect of residents and shall ensure that the policy is complied with.

## **Inspection Finding**

The evidence indicated the Licensee did not follow their policy on resident abuse and neglect by investigating an allegation of resident to resident sexual abuse and taking steps to prevent a re-occurrence.

#### Outcome

The Licensee submitted plan to achieve compliance by August 7, 2018. RHRA to confirm compliance by inspection.

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# 3. 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,
  - (a) techniques to prevent and address resident behaviours that pose a risk to the resident or others in the home;
  - (b) strategies for interventions to prevent and address resident behaviours that pose a risk to the resident or others in the home;
  - (d) protocols for how staff and volunteers shall report and be informed of resident behaviours that pose a risk to the resident or others in the home.

## **Inspection Finding**

The Licensee did not provide evidence that strategies and communication to staff as prescribed in their behaviour management policy had been implemented. Further, the Licensee's policy did not contain techniques and strategies to prevent resident behaviours that pose a risk.

#### **Outcome**

The Licensee submitted plan to achieve compliance by August 7, 2018. RHRA to confirm compliance by inspection.

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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 <a href="http://rhra.ca/en/register/">http://rhra.ca/en/register/</a>

Signature of Inspector	Date
AT. Dande	August 9, 2018

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