

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

Inspection Information	
Date of Inspection: December 11, 2018	Name of Inspector: Tania Buko
Inspection Type: Routine Inspection	
Licensee: ATK Care Group Ltd. / 1386 Indian Grove, Mississauga, ON L5H 2S6 (the "Licensee")	
Retirement Home: Exeter Villa / 155 John Street, Exeter, ON N0M 1S1 (the "home")	
Licence Number: S0117	

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>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.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p>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.</p> <p>24. (5) 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>25. (3) The licensee shall ensure that the emergency plan provides for the following:</p> <p>1. Dealing with,</p> <p>vi. chemical spills,</p>

25. (5) The licensee shall ensure that the emergency plan for the retirement home is evaluated and updated at least annually and that the updating includes contact information for the relevant community agencies, partner facilities and resources that will be involved in responding to an emergency.

Inspection Finding

Community partners were identified in the home's emergency plan; however, current letters of understanding were not in place for all the partners listed. In addition, there was no evidence to support that the home completed the required annual testing of their emergency plan in the noted areas. On the day of inspection, there was no evidence to support that the home's emergency plan had procedures to deal with chemical spills, or that the emergency plan was evaluated and reviewed on an annual basis.

Outcome

The Licensee submitted plan to achieve compliance by January 31, 2019. RHRA to confirm compliance by inspection.

- 2. 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 the RHA, S.O. 2010, c. 11, s. 65; Additional training for direct care staff.
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;

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.

65. (5) The licensee shall ensure that all staff who provide care services to residents receive training in the following matters and at the times required by the regulations, as a condition of continuing to have contact with residents, in addition to the other training that they are required to receive under this section:

- 3. Behaviour management.

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.

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.

<p>Inspection Finding</p> <p>The routine inspection revealed that not all new staff have completed training in the home's Complaint's Procedures or Personal Assistance Services Devices policy prior to the commencement of work in the home. Further, not all reviewed existing staff completed their annual training in the home's policies as mentioned above or in the home's Behaviour Management Strategies.</p>
<p>Outcome</p> <p>The Licensee submitted plan to achieve compliance by January 31, 2019. RHRA to confirm compliance by inspection.</p>
<p>3. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 67; Contents.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p>67. (5) At a minimum, the policy to promote zero tolerance of abuse and neglect of residents shall, (a) clearly set out what constitutes abuse and neglect;</p>
<p>Inspection Finding</p> <p>The definition of neglect in the home's Zero Tolerance of Abuse and Neglect Policy is not fully aligned with the legislation.</p>
<p>Outcome</p> <p>The Licensee submitted plan to achieve compliance by January 31, 2019. RHRA to confirm compliance by inspection.</p>
<p>4. The Licensee failed to comply with O. Reg. 166/11, s. 22; Risk of falls.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p>22. (1) Every licensee of a retirement home shall develop, document and implement strategies to reduce or mitigate the risk of falls in common areas of the home.</p>
<p>Inspection Finding</p> <p>On the day of inspection, there were no falls strategies in place to mitigate the risk of falls as per the legislation.</p>
<p>Outcome</p> <p>The Licensee submitted plan to achieve compliance by January 31, 2019. RHRA to confirm compliance by inspection.</p>

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 7, 2019
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