

FINAL INSPECTION REPORT Under the Retirement Homes Act, 2010

Inspection Information

Date of Inspection: March 3, 2021 **Name of Inspector:** Mark Dennis

Inspection Type: Routine Inspection

Licensee: M2 Developments Inc. / 18 O'Brien Avenue, Stouffville, ON L4A 1G6 (the "Licensee")

Retirement Home: Gardens of Parry Sound / 12 College Drive, Parry Sound, ON P2A 0A9 (the "home")

Licence Number: N0386

Purpose of Inspection

The RHRA conducts routine inspections as set out in section 77(3) of the *Retirement Homes Act, 2010* (the "RHA").

NON-COMPLIANCE

The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 62; Plan of care.
The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 62; Assessment of resident.
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. (1)</u> When a resident commences his or her residency in a retirement home, the licensee shall, within the prescribed times, ensure that the resident is assessed and that a plan of care is developed based on the assessment and in accordance with this section and the regulations.
- <u>62. (6)</u> The licensee shall ensure that the plan of care is based on an assessment of the resident and the needs and preferences of the resident.
- <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,
 - (a) a goal in the plan is met;
 - (b) the resident's care needs change or the care services set out in the plan are no longer necessary;
 - (c) the care services set out in the plan have not been effective.

Inspection Finding

A resident of the home did not have a plan of care. Further, a resident care needs had changed and the Licensee failed to make revisions to the plan of care as prescribed.

Outcome

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At the time of the inspection, the Licensee was not in compliance. The home has since taken corrective action to achieve compliance.

The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 65; 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,
 - (b) the licensee's policy mentioned in subsection 67 (4) to promote zero tolerance of abuse and neglect of residents;
- 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.

Inspection Finding

The Licensee failed to complete staff training as prescribed.

Outcome

At the time of the inspection, the Licensee was not in compliance. The home has since taken corrective action to achieve compliance. .

3. The Licensee failed to comply with O. Reg. 166/11, s. 27; Infection prevention and control program.

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

- 27. (5) The licensee of a retirement home shall ensure that,
 - (0.b) all reasonable steps are taken in the retirement home to follow,
 - (i) any directive respecting coronavirus (COVID-19) issued to long-term care homes by the Chief Medical Officer of Health under section 77.7 of the Health Protection and Promotion Act,

Inspection Finding

The Licensee did not have a staff contingency plan to mitigate staffing shortages in the event of an outbreak.

Outcome

At the time of the inspection, the Licensee was not in compliance. The home has since taken corrective action to achieve compliance.

4. The Licensee failed to comply with O. Reg. 166/11, s. 25; Emergency plan, retirement home with more than 10 residents.

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

- 25. (3) The licensee shall ensure that the emergency plan provides for the following:
 - 3. Resources, supplies and equipment vital for the emergency response being set aside and readily available at the retirement home and regular testing of all such resources, supplies and equipment to ensure that they are in working order.

Inspection Finding

The Licensee had resources put aside in the event of an emergency but was unable to provide evidence of regular testing of the resources as prescribed.

Outcome

At the time of the inspection, the Licensee was not in compliance. The home has since taken corrective action to achieve compliance.

5. The Licensee failed to comply with O. Reg. 166/11, s. 17; Cleanliness.

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

17. (3) The licensee shall document the routines and methods used to comply with subsections (1) and (2).

Inspection Finding

The Licensee failed to keep documents of the routines and methods used to keep the home clean.

Outcome

At the time of the inspection, the Licensee was not in compliance. The home has since taken corrective action to achieve compliance.

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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 Retirement Home Database available online at http://www.rhra.ca/en/retirement-home-database.

Signature of Inspector		Date
	<i>M</i> 11	March 22, 2021

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