

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

Inspection Information	
<b>Date of Inspection:</b> June 2, 2021	<b>Name of Inspector:</b> Julie Hebert
<b>Inspection Type:</b> Routine Inspection	
<b>Licensee:</b> AMG London Inc. / 7370 Sierra Morena Blvd, Calgary, AB T3H 4H9 (the "Licensee")	
<b>Retirement Home:</b> The Manor Village at London / 230 Victoria Street, London, ON N6A 2C2 (the "home")	
<b>Licence Number:</b> S0396	

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. 22; Risk of falls.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><b>22. (1)</b> 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><b>Inspection Finding</b></p> <p>The home was not able to demonstrate that they had implemented strategies to mitigate falls for all residents of the home.</p>
<p><b>Outcome</b></p> <p>The Licensee submitted a plan to achieve compliance by July 7, 2021. RHRA to confirm compliance by inspection.</p>
<p><b>2. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 62; Contents of plan.</b>  <b>The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 62; Assessment of resident.</b>  <b>The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 62; Reassessment and revision.</b>  <b>The Licensee failed to comply with O. Reg. 166/11, s. 47; Development of plan of care.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><b>62. (4)</b> The licensee of a retirement home shall ensure that there is a written plan of care for each resident of the home that sets out,</p>

- (b) the planned care services for the resident that the licensee will provide, including,
  - (ii) the goals that the services are intended to achieve,
  - (iii) clear directions to the licensee's staff who provide direct care to the resident;

**62. (6)** 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.

**62. (12)** 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,

- (b) the resident's care needs change or the care services set out in the plan are no longer necessary;

**47. (1)** Subject to subsection (4), as soon as possible and not later than two days after a resident commences residency in a retirement home, the licensee of a retirement home shall develop an initial plan of care for the resident based on the initial assessment of the resident's immediate care needs conducted under section 43 that includes all of the information listed in subsection 62 (4) of the Act that is relevant to the resident's immediate care needs.

**Inspection Finding**

The home was not able to demonstrate that all plans of care were in alignment with the above noted sections of the legislation.

**Outcome**

The Licensee submitted a plan to achieve compliance by July 7, 2021. RHRA to confirm compliance by inspection.

**3. The Licensee failed to comply with O. Reg. 166/11, s. 14; Staff training.  
The Licensee failed to comply with O. Reg. 166/11, s. 55; Contents of records.**

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.

**14. (5)** The licensee shall ensure that the persons who are required to receive the training described in subsection 65 (5) of the Act receive that training on an ongoing basis, namely at least annually after receiving the training described in subsection (4).

**55. (5)** A licensee of a retirement home shall keep records proving compliance with the Act and this Regulation in relation to,

- (c) the skills, qualifications and training of the staff who work in the home;

<p><b>Inspection Finding</b></p> <p>The home was not able to demonstrate that they were training staff on relevant care services annually and at orientation.</p>
<p><b>Outcome</b></p> <p>The Licensee submitted a plan to achieve compliance by July 14th, 2021. RHRA to confirm compliance by inspection.</p>
<p><b>4. The Licensee failed to comply with O. Reg. 166/11, s. 27; Infection prevention and control program.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><b>27. (5)</b> The licensee of a retirement home shall ensure that,</p> <p>(0.b) all reasonable steps are taken in the retirement home to follow,</p> <p>(ii) any guidance, advice or recommendations respecting coronavirus (COVID-19) that are given to long-term care homes by the Chief Medical Officer of Health and made available on the Government of Ontario’s website respecting coronavirus (COVID-19);</p>
<p><b>Inspection Finding</b></p> <p>The home was not able to demonstrate that they were following all guidance and directives issues by the Chief Medical officer of health, namely, staff were not all wearing medical grade masks or eye protection.</p>
<p><b>Outcome</b></p> <p>The Licensee advised they have taken corrective action to achieve compliance. RHRA to confirm compliance by inspection.</p>
<p><b>5. 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. (4)</b> 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><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>(iii) medical emergencies,</p> <p>(b) at least once every two years, conduct a planned evacuation of the retirement home;</p>

**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 home was not able to demonstrate that their emergency plan testing and procedures were in compliance with the above noted sections of the legislation.

**Outcome**

The Licensee submitted a plan to achieve compliance by July 14th, 2021. RHRA to confirm compliance by inspection.

**6. The Licensee failed to comply with O. Reg. 166/11, s. 30; Storage of drugs or other substances.**

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

**30.** If drugs or other substances are stored in a retirement home on behalf of a resident, the licensee of the home shall ensure that,

- (a) the drugs or other substances are stored in an area or a medication cart that,
  - (iv) complies with the manufacturer’s instructions for the storage of the drugs or other substances;

**Inspection Finding**

The home was not able to demonstrate that all medications were stored in compliance with the manufacturer's instructions for the storage of the drugs.

**Outcome**

The Licensee advised they have taken corrective action to achieve compliance. 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 Retirement Home Database available online at <http://www.rhra.ca/en/retirement-home-database>.

Signature of Inspector  	Date July 12, 2021
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