

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

Inspection Information	
<b>Date of Inspection:</b> November 15, 2021	<b>Name of Inspector:</b> Shara Bundy
<b>Inspection Type:</b> Routine Inspection	
<b>Licensee:</b> Schlegel Villages Inc. / 325 Max Becker Drive, Kitchener, ON N2E 4H5 (the "Licensee")	
<b>Retirement Home:</b> The Village of Erin Meadows / 2930 Erin Centre Blvd., Mississauga, ON L5M 7M4 (the "home")	
<b>Licence Number:</b> T0550	

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 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. 44; Full assessment of care needs.</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. (12)</b> 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,</p> <p align="center">(b) the resident's care needs change or the care services set out in the plan are no longer necessary;</p> <p><b>44. (1)</b> Subject to section 46, no later than 14 days after a resident commences residency in a retirement home, the licensee shall ensure that a full assessment of the resident's care needs and preferences is conducted.</p> <p><b>47. (2)</b> No later than 21 days after a resident commences residency in a retirement home, the licensee of the home shall develop a complete plan of care for the resident based on the full assessment of the resident's care needs and preferences conducted under section 44 that takes into account all of the matters that must be considered in a full assessment.</p>
<p><b>Inspection Finding</b></p> <p>The Licensee failed to ensure that the full assessment and complete plan of care was completed for a resident within the required time frame. The Licensee also failed to ensure that the plan of care for a resident whose care needs changed, was reviewed and revised.</p>

**Outcome**

The Licensee has advised it has taken corrective action to achieve compliance. RHRA to confirm compliance by inspection.

**2. The Licensee failed to comply with O. Reg. 166/11, s. 29; Administration of drugs or other substances.**

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

- 29.** If one of the care services that the licensee or the staff of a retirement home provide to a resident of the home is the administration of a drug or other substance, the licensee shall ensure that,
- (e) if the licensee or a staff member is involved in the administration of the drug or other substance at the home, that the licensee or staff member is trained in,
    - (i) ways of reducing the incidence of infectious disease, including maintaining proper hand hygiene,
    - (ii) the safe disposal of syringes and other sharps,
    - (iii) recognizing an adverse drug reaction and taking appropriate action;
  - (c) neither the licensee nor a staff member administers a drug to a resident in the home unless the licensee or the staff member has received training in the procedures applicable to the administration of the drug;

**Inspection Finding**

The Licensee failed to ensure that a staff member responsible for administering medications received training in the procedures applicable to the administration of medication. The Licensee also failed to ensure that the staff administering medications are trained in proper hand hygiene, the safe disposal of syringes and other sharps, as well as recognizing an adverse effect of medication and taking appropriate action.

**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 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 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.

**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.

**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).

**Inspection Finding**

The Licensee failed to ensure that staff completed mandatory orientation and ongoing training as required.

**Outcome**

The Licensee has advised that it has taken corrective action to achieve compliance. RHRA to confirm compliance by inspection.

**4. 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.**

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

**24. (5)** The licensee shall,

(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,

- (i) the loss of essential services,
- (ii) situations involving a missing resident,
- (iv) violent outbursts;

**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 failed to at least on an annual basis, test the emergency plan, including arrangements with community agencies, partner facilities, and resources involved in responding to a violent outbursts, a missing resident and the loss of essential services. The Licensee also failed to at least once every two years, conduct a planned evacuation of the retirement home. Further the Licensee failed to ensure that the emergency plan provides for the 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.

**Outcome**

The Licensee has submitted a plan to achieve compliance by January 31, 2022. RHRA to confirm compliance by inspection.

**5. 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. (2)** The licensee shall consult on an ongoing basis and not less than once a year with the local medical officer of health or designate about identifying and addressing health care issues in the retirement home in order to reduce the incidence of infectious disease outbreaks in the home.

**27. (3)** The licensee shall keep a written record of the consultation required under subsection (2) that shall include a record of when the consultation took place, what was discussed and any recommendations that the local medical officer of health or designate made.

**Inspection Finding**

The Licensee failed to provide documented evidence of the an annual consultation with their local public health department as required.

**Outcome**

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

**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  <i>Shara Bundy</i>	Date  January 7, 2022
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