

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

Inspection Information	
<b>Date of Inspection:</b> January 12, 2022	<b>Name of Inspector:</b> Cindy Ma
<b>Inspection Type:</b> Routine Inspection	
<b>Licensee:</b> 2596217 Ontario Inc. / 515 Consumer's Road, North York, ON M2J 4Z2 (the "Licensee")	
<b>Retirement Home:</b> Georgian Bay Seniors Lodge / 7 Harriet Street, Penetanguishene, ON L9M 1K8 (the "home")	
<b>Licence Number:</b> N0469	

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. 23; Behaviour management.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><b>23. (1)</b> Every licensee of a retirement home shall develop and implement a written behaviour management strategy that includes,</p> <ul style="list-style-type: none"> <li>(a) techniques to prevent and address resident behaviours that pose a risk to the resident or others in the home;</li> <li>(b) strategies for interventions to prevent and address resident behaviours that pose a risk to the resident or others in the home;</li> <li>(c) strategies for monitoring residents that have demonstrated behaviours that pose a risk to the resident or others in the home.</li> </ul>
<p><b>Inspection Finding</b></p> <p>A review of a resident's plan of care who was identified as having responsive behaviours indicated that the Licensee had not implemented behaviour management strategies to address the behaviours.</p>
<p><b>Outcome</b></p> <p>At the time of the inspection, the Licensee was not in compliance. The home has since taken corrective action to achieve compliance.</p>
<p><b>2. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 62; Reassessment and revision.</b></p>

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

**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.

**Inspection Finding**

At the time of the inspection, a review of a resident’s plan of care revealed that the Licensee did not update the plan of care at the time the resident’s care needs related to behaviour management changed.

**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; 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. (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**

At the time of the inspection the Licensee’s training records showed that not all staff were trained annually, as required.

**Outcome**

The Licensee submitted a plan to achieve compliance by February 14th, 2022. RHRA to confirm compliance by inspection.

**4. 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**

At the time of the inspection, the documentation reviewed did not support that the Licensee followed a directive respecting coronavirus (COVID-19) issued by the Chief Medical Officer of Health under section 77.7 of the Health Protection and Promotion Act, as active screening of residents for signs and symptoms including temperature checks once daily was not being completed 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.

**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.**

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

**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.

**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,
- (iii) medical emergencies,
- (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**

At the time of the inspection, no evidence was provided to demonstrate that the Licensee's emergency plan contained current arrangements with emergency partners. Further, the Licensee was unable to provide evidence to show that they completed testing of the emergency plan, in relation to missing residents; loss of essential services; medical emergencies and violent outbursts. Lastly, emergency preparedness kit was not assembled, as required.

**Outcome**

The Licensee submitted a plan to achieve compliance by March 9th, 2022. RHRA to confirm compliance by inspection.

**6. 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):

**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's training records showed that not all staff administering medications received training annually on administration of drugs or other substances, 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.

**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 February 4, 2022
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