

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

Inspection Information	
Date of Inspection: March 29, 2022	Name of Inspector: Heather Pozzo
Inspection Type: Routine Inspection	
Licensee: Lifetimes Limited Partnership / 3200 Dufferin Street, Toronto, ON M6A 3B2 (the "Licensee")	
Retirement Home: Maple Court Retirement Residence / 5 Fourth Street, Walkerton, ON N0G 2V0 (the "home")	
Licence Number: S0344	

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. 23; Behaviour management.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p>23. (1) Every licensee of a retirement home shall develop and implement a written behaviour management strategy that includes,</p> <ul style="list-style-type: none"> (a) techniques to prevent and address resident behaviours that pose a risk to the resident or others in the home; (b) strategies for interventions to prevent and address resident behaviours that pose a risk to the resident or others in the home; (c) strategies for monitoring residents that have demonstrated behaviours that pose a risk to the resident or others in the home.
<p>Inspection Finding</p> <p>The home failed to develop a behaviour management plan for a resident that required one.</p>
<p>Outcome</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>2. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 62; Reassessment and revision.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p>

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.

Inspection Finding

The home failed to reassess and revise a plan of care within 6 months for a resident that required it.

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

The home failed to ensure that all staff completed the mandatory annual training updates.

Outcome

The Licensee submitted a plan to achieve compliance by April 19, 2022. RHRA to confirm compliance by following up with the Licensee or by inspection.

4. The Licensee failed to comply with O. Reg. 166/11, s. 24; Emergency plan, general.

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,

(ii) situations involving a missing resident,

(iii) medical emergencies,


(iv) violent outbursts.
<p>Inspection Finding The home failed to test some of their emergency plans which is required on an annual basis.</p>
<p>Outcome At the time of the inspection, the Licensee was not in compliance. The home has since taken corrective action to achieve compliance.</p>
<p>5. The Licensee failed to comply with O. Reg. 166/11, s. 17; Cleanliness.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p>17. (3) The licensee shall document the routines and methods used to comply with subsections (1) and (2).</p>
<p>Inspection Finding The home could not produce any evidence of high touch surfaces being cleaned in the home twice daily.</p>
<p>Outcome The Licensee has advised it has taken corrective action to achieve compliance. 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 Retirement Home Database available online at <http://www.rhra.ca/en/retirement-home-database>.

<p>Signature of Inspector</p> 	<p>Date</p> <p>April 18, 2022</p>
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