

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

Inspection Information	
<b>Date of Inspection:</b> May 16, 2022	<b>Name of Inspector:</b> Georges Gauthier
<b>Inspection Type:</b> Compliance Inspection	
<b>Licensee:</b> G & R Management Inc. / 387 Goodrich Road, Codrington, ON K0K 1R0 (the "Licensee")	
<b>Retirement Home:</b> Golden Pond Retirement Residence / 387 Goodrich Road, Codrington, ON K0K 1R0 (the "home")	
<b>Licence Number:</b> N0007	

Purpose of Inspection
The RHRA conducts compliance inspections as set out in section 77(1) 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; Contents of plan.</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> <p style="padding-left: 40px;">(a) the care services that are part of a package of care services that the resident is entitled to receive under the resident's agreement with the licensee, whether or not the resident receives the services.</p>
<p><b>Inspection Finding</b></p> <p>A review of two plans of care did not show the care services the residents were entitled to receive whether or not the services were utilized. The Licensee failed to ensure that the written plans of care set out the care services that are part of the package of care services that the resident is entitled to receive under the resident's agreement with the Licensee, whether or not the resident receives the services.</p>
<p><b>Outcome</b></p> <p>The Licensee has advised it has taken corrective action to achieve compliance. RHRA to confirm compliance by inspection.</p>
<p><b>2. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 53; Agreement required.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p>

**53. (1)** The licensee of a retirement home shall enter into a written agreement with every resident of the home before the resident commences residency in the home.

**Inspection Finding**

A review of resident documentation found there was no agreement in place for a resident who had already commenced residency. The Licensee failed to enter into a written agreement with a resident of the home before the resident commenced residency in the home.

**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. 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**

Two of the staff members who administer medications did not have evidence of annual retraining in the administration of medication. The Licensee failed to ensure the annual retraining provisions had been met.

**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. 24; Emergency plan, general.**

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.

**Inspection Finding**

On the day of inspection, there was no evidence to show that current arrangements were in place to fully support the Licensee’s emergency plan. The Licensee failed to ensure arrangements were fully in place with community agencies, partner facilities and resources that will be involved in responding to an emergency.

**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. 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**

An employee for the Licensee was in the home without a medical mask. Further, the screening conducted for the inspector was not complete. Furthermore, the visiting policy was not in line with the current Directive #3 and the Policy to Implement Directive #3. The Licensee failed to ensure compliance with Directive #3.

**Outcome**

The Licensee must take 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 June 10, 2022
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