

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

Inspection Information	
Date of Inspection: November 4, 2022	Name of Inspector: Douglas Crust
Inspection Type: Routine Inspection	
Licensee: The Bill McMurray Residence Inc. / 180 Sheridan Avenue, Toronto, ON M6K 3C7 (the "Licensee")	
Retirement Home: Bill McMurray Residence / 180 Sheridan Avenue, Toronto, ON M6K 3C7 (the "home")	
Licence Number: T0189	

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. 27; Infection prevention and control program.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><u>27. (5)</u> The licensee of a retirement home shall ensure that, (0.a) any guidance, advice or recommendations given to retirement homes by the Chief Medical Officer of Health are followed in the retirement home;</p>
<p>Inspection Finding</p> <p>At the inspection, the Licensee was not able to provide evidence of an outbreak preparedness plan, contrary to the direction of the Chief Medical Officer of Health.</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 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.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><u>24. (5)</u> The licensee shall, (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 evidence confirmed that the Licensee has not met the requirements for a full evacuation, of the Home in the past two years. Further, the record of the last testing of the emergency kit of supplies, equipment and resources in the Home to be used in the event of an emergency was completed in 2018.

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.

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.

Inspection Finding

The Licensee was not able to provide evidence of annual staff training in 2021 in the PASD policy of the Home.

Outcome

The Licensee has demonstrated it has taken corrective action to achieve compliance.

4. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 62; Persons who approve plans of care.

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

- 62. (9)** The licensee shall ensure that the following persons have approved the plan of care, including any revisions to it, and that a copy is provided to them:

1. The resident or the resident’s substitute decision-maker.
2. The prescribed person if there is a person prescribed for the purpose of this paragraph.

Inspection Finding

A sample of three resident assessments and plans of care were inspected. For resident # 1, there was no evidence that an approved person has signed on behalf of the Licensee and the section which indicates a copy was provided to the resident has not been completed. For resident # 2, the plan of care is not

approved by either the resident or an approved person on behalf of the Licensee. For resident # 3, the plan of care is not approved by either the resident or an approved person on behalf of the Licensee. The plans of care for the three residents are not completed 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 December 5, 2022
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