

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

Inspection Information	
Date of Inspection: November 25, 2022	Name of Inspector: Tania Buko
Inspection Type: Routine Inspection	
Licensee: Sienna Ontario RH GP Inc. / 302 Town Centre Boulevard , Markham, ON L3R 0E8 (the “Licensee”)	
Retirement Home: Aspira Doon Village Retirement Living / 868 Doon Village Road, Kitchener, ON N2P 3A4 (the “home”)	
Licence Number: T0526	

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 the RHA, S.O. 2010, c. 11, s. 65; Training. The Licensee failed to comply with O. Reg. 166/11, s. 14; Staff training. 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>65. (2) Every licensee of a retirement home shall ensure that no staff work in the home unless they have received training in,</p> <ul style="list-style-type: none"> (a) the Residents’ Bill of Rights; (b) the licensee’s policy mentioned in subsection 67 (4) to promote zero tolerance of abuse and neglect of residents; (c) the protection afforded for whistle-blowing described in section 115; (d) the licensee’s policy mentioned in subsection 68 (3) regarding the use of personal assistance services devices for residents; (f) fire prevention and safety; (h) the emergency plan and the infection prevention and control program of the licensee for the home mentioned in subsection 60 (4); <p>14. (1) For the purposes of clause 65 (2) (j) of the Act, every licensee of a retirement home shall ensure that all staff who work in the home receive training in the procedure described in subsection 73 (1) of the Act for a person to complain to the licensee.</p> <p>27. (9) The licensee shall ensure that each staff member who works in the retirement home receives training on how to reduce the incidence of infectious disease transmission, including,</p>

- (a) the need for and method of maintaining proper hand hygiene and method of preventing cross contamination, including proper handling of soiled linens, the protection of uniforms, and the separation of clean and dirty items;
- (b) the need for and process of reporting, providing surveillance of and documenting incidents of infectious illness.

Inspection Finding

As part of the routine inspection, the Inspector reviewed a sample of training records for new staff and found that most of the staff reviewed had not been trained on the Licensee’s policies upon hire. The Licensee failed to ensure that new staff were trained as required.

Outcome

The Licensee submitted a plan to achieve compliance by December 16, 2022. RHRA to confirm compliance by following up with the Licensee or by inspection.

2. 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.a) any guidance, advice or recommendations given to retirement homes by the Chief Medical Officer of Health are followed in the retirement home.

Inspection Finding

The Inspector reviewed documents and interviewed staff and found the Licensee failed to follow the Chief Medical Officer of Health and the Ministry of Health’s recommendations outlined in the updated COVID-19 Guidance in relation to conducting daily resident temperature and symptoms screening, as required.

Outcome

The Licensee submitted a plan to achieve compliance by November 28, 2022. RHRA to confirm compliance by following up with the Licensee or by inspection.

3. The Licensee failed to comply with O. Reg. 166/11, s. 59; Procedure for complaints to licensee.

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

- 59. (1)** Every licensee of a retirement home shall ensure that every written or verbal complaint made to the licensee or a staff member concerning the care of a resident or operation of the home is dealt with as follows:
 - 4. A response shall be made to the person who made the complaint, indicating,
 - i. what the licensee has done to resolve the complaint,
 - ii. that the licensee believes the complaint to be unfounded and the reasons for the belief.

2. The complaint shall be resolved if possible, and a response that complies with paragraph 4 provided within 10 business days of the receipt of the complaint.

- 59. (2)** The licensee shall ensure that a written record is kept in the retirement home that includes,
- (c) the type of action taken to resolve the complaint, including the date of the action, time frames for actions to be taken and any follow-up action required;
 - (d) the final resolution, if any, of the complaint;
 - (e) every date on which any response was provided to the complainant and a description of the response.

Inspection Finding

The Inspector reviewed the Licensee’s complaints log and policy and found that the Licensee did not fully comply with the home’s complaints policy in the management of a complaint. Specifically, there was insufficient evidence that the complaint was resolved if possible within 10 business days, the types of actions taken to resolve the complaint, including dates and times and time frames for those actions, dates which responses were provided to the complainant to indicate what the home has done to resolve the complaint, whether the complaint was unfounded and the reasons for the belief, and descriptions of the responses. The Inspector confirmed the Licensee failed to fully comply with their complaints policy.

Outcome

The Licensee submitted a plan to achieve compliance by November 27, 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. 21; Hazardous substances.

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

- 21. (2)** Every licensee of a retirement home shall ensure that all hazardous substances used by staff of the home or under their control are labelled properly and are kept inaccessible to residents at all times.

Inspection Finding

On the day of inspection, the Inspector made observations of the housekeeping carts in the hallways of the home and interviewed staff. The Inspector found the Licensee failed to ensure hazardous chemicals located in housekeeping carts were inaccessible to residents.

Outcome

The Licensee submitted a plan to achieve compliance by December 16, 2022. RHRA to confirm compliance by following up with the Licensee or by inspection.

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>Tania Buko</i>	Date December 16, 2022
---	-------------------------------