

## FINAL INSPECTION REPORT

### Under the *Retirement Homes Act, 2010*

Inspection Information	
<b>Date of Inspection:</b> February 6, 2023	<b>Name of Inspector:</b> Nathalie Bartlett
<b>Inspection Type:</b> Routine Inspection	
<b>Licensee:</b> The Royale GP Corporation / 302 Town Centre Boulevard, Markham, ON L3R 0E8 (the "Licensee")	
<b>Retirement Home:</b> Aspira Waterford Kingston Retirement Living / 471 Cataraqui Woods Drive, Kingston, ON K7P 0E6 (the "home")	
<b>Licence Number:</b> N0470	

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> </ul>
<p><b>Inspection Finding</b></p> <p>The inspector reviewed a sample of resident care files and found that the Licensee failed to ensure that 2 of the resident's plans of care did not have their techniques and strategies for interventions to prevent and address resident behaviours that pose a risk to the resident or others in the home.</p>
<p><b>Outcome</b></p> <p>The Licensee submitted a plan to achieve compliance by March 31, 2023. RHRA to confirm compliance by following up with the Licensee or by inspection.</p>
<p><b>2. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 62; Reassessment and revision.</b></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,  
(b) the resident's care needs change or the care services set out in the plan are no longer necessary;

**Inspection Finding**

The inspector reviewed a sample of resident care files and found the Licensee failed to ensure that the resident is reassessed and the plan of care reviewed and revised at least every six months and at any other time the resident's care needs change or the care services set out in the plan are no longer necessary.

**Outcome**

The Licensee submitted a plan to achieve compliance by March 31, 2023. RHRA to confirm compliance by following up with the Licensee or by inspection.

- 3. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 65; Training.  
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. (2)** Every licensee of a retirement home shall ensure that no staff work in the home unless they have received training in,

- (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);
- (i) all Acts, regulations, policies of the Authority and similar documents, including policies of the licensee, that are relevant to the person's duties;

**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.

**Inspection Finding**

The inspector reviewed a sample of staff training and found that the Licensee failed to ensure that no staff works in the home unless they have received training in all prescribed matters listed in the regulations as

required. This includes all direct care services as well as ensuring that all staff receives ongoing annual training as described in that subsection at the times required by the regulations.

**Outcome**

The Licensee submitted a plan to achieve compliance by March 31, 2023. 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

*Nathalie Bartlett*

Date

February 23, 2023