

FINAL INSPECTION REPORT Under the Retirement Homes Act, 2010

Inspection Information

Date of Inspection: February 24, 2023 Name of Inspector: Angela Butler

Inspection Type: Routine Inspection

Licensee: London Canada Investors Limited Partnership / 355 Burrard Street, Vancouver, BC V6C 2G8 (the

"Licensee")

Retirement Home: Arbor Trace Alzheimer's Special Care Center / 120 Chelton Road, London, ON N6M 1C6

(the "home")

Licence Number: S0221

Purpose of Inspection

The RHRA conducts routine inspections as set out in section 77(3) of the *Retirement Homes Act, 2010* (the "RHA").

NON-COMPLIANCE

1. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 62; Plan of care.

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

The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 62; Reassessment and revision.

The Licensee failed to comply with O. Reg. 166/11, s. 43; Initial assessment of care needs.

The Licensee failed to comply with O. Reg. 166/11, s. 47; Development of plan of care.

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

- **62. (1)** When a resident commences his or her residency in a retirement home, the licensee shall, within the prescribed times, ensure that the resident is assessed and that a plan of care is developed based on the assessment and in accordance with this section and the regulations.
- **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.
- <u>62. (12)</u> 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;
- **43. (1)** Subject to section 45, no later than two days after a resident commences residency in a retirement home, the licensee of the home shall ensure that an initial assessment of the resident's

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immediate care needs is conducted.

47. (5) If an assessment of a resident indicates that the resident's care needs may include dementia care, skin and wound care or the use of a personal assistance services device, the licensee shall ensure that an interdisciplinary care conference is held as part of the development of the resident's plan of care and that the resident's plan of care takes into account the results of the care conference.

Inspection Finding

As part of the routine inspection, the inspector reviewed a sample of residents' plans of care and found that 5 of the 6 plans of care had not been developed within 21 days of admission. Furthermore, one resident did not have an initial assessment completed within two days of admission, one did not have his plan of care updated when his skin and wound care needs changed, and two residents had not had their plans of care updated every 6 months. Furthermore, there were two residents who did not have their plans of care approved by the SDM, and all residents had not had an interdisciplinary care conference held which has been cited at 3 previous inspections since 2021. The Licensee failed to ensure the plans of care are in compliance with the legislation.

Outcome

The Licensee has advised it has taken corrective action to achieve compliance. 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. 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.
- 24. (5) The licensee shall,
 - (b) at least once every two years, conduct a planned evacuation of the retirement home;

Inspection Finding

The inspector reviewed the Licensee's agreements with community partners for shelter and transportation in response to an emergency and records of testing for their emergency plans. The inspector found memorandums of understanding with community partners had not been signed since 2021 and that a planned evacuation had not been completed since 2020. The Licensee failed to ensure that agreements were signed and testing was conducted in accordance with the legislation.

Outcome

The Licensee provided information indicating that corrective action was being taken, however, further action must be taken to achieve compliance with all areas outlined in the finding. RHRA to confirm compliance by following up with the Licensee or by inspection.

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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 Chapele Sculler RN Date March 15, 2023

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