

# FINAL INSPECTION REPORT Under the Retirement Homes Act, 2010

**Inspection Information** 

Date of Inspection: October 04, 2023 Name of Inspector: Matthew John

**Inspection Type:** Routine Inspection

Licensee: ACC-002775 - The Royale Development LP

**Retirement Home: Aspira Traditions of Durham Retirement Living** 

**License Number: T0460** 

## **About Routine Inspections**

A routine inspection, performed by an RHRA inspector, is a physical inspection of a licensed retirement home. During a routine inspection, an RHRA inspector will walk through the home, speak to residents and staff, observe care services and conditions in the home, and ensure the licensee's management and staff follow mandatory policies and practices designed to protect the welfare of residents.

Following a routine inspection, the RHRA inspector prepares a draft inspection report which is sent to the licensee. The draft report may include instances where the licensee has failed to meet the standards of the RHA. If included, the licensee can respond to these instances and is strongly encouraged to inform RHRA of its plans to meet the standards of the RHA.

Following the draft report, the RHRA inspector prepares this final inspection report, incorporating any response from the licensee with their plans to meet the standards of the RHA. The most recent final inspection report must be posted in the home in a visible and easily accessible location. All final inspection reports from the previous two years must also be made available in an easily accessible location in the home. The licensee must provide a copy of this report to the home's Residents' Council, if one exists.

In addition to inspection reports, RHRA may provide information to a licensee to encourage improvements of their current practices.

If the licensee repeatedly does not meet the required standards, RHRA may take further action.

## **Focus Areas**

During a routine inspection, an inspector will focus primarily on a set number of areas which have been identified as related to the health, safety and wellbeing of resident, and may take various actions to determine whether the licensee is compliant with the RHA in relating to the areas. The areas listed in this section are ones which an inspector has identified as non-compliant.

Focus Area #1: Abuse and Neglect

# **RHRA Inspector Findings**

The inspector found evidence through documentation in the home that an incident of resident-to-resident abuse had occurred and had not been reported to the RHRA. The Licensee failed to ensure the incident was reported as required. Furthermore, after interviewing staff and reviewing records of the incident in the home, the inspector confirmed the Licensee was aware of the incident but failed to notify the residents' substitute decision makers of the abuse, failed to notify the local police services, and failed to conduct an investigation, as required by their zero tolerance of abuse policy. The Licensee did not ensure the incident was investigated as required and did not ensure their zero tolerance of abuse policy was complied with fully.

#### Outcome

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

## Focus Area #2: Complaints

## **RHRA Inspector Findings**

The inspector found evidence through documentation in the home that a recent complaint did not have a response to the complainant, indicating what actions were taken by the Licensee and whether the complaint was resolved. The Licensee did not ensure their complaints policy was complied with fully.

#### Outcome

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

## Focus Area #3: Emergency Plan

## **RHRA Inspector Findings**

The inspector reviewed the Licensee's records for testing of emergency plans and found that testing had not been completed for responding to an emergency related to loss of essential services and responding to an emergency related to epidemics and pandemics. The Licensee did not ensure that testing was completed annually as required.

#### Outcome

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

## Focus Area #4: Resident Record, Assessment, Plan of Care

## **RHRA Inspector Findings**

The inspector reviewed a sample of resident care files and found that two residents had experienced a change in care needs and were not reassessed and the plans of care were not revised as required. The Licensee did not ensure reassessment and revision of the plans of care as required. In addition, the inspector found that one resident's recent assessment and plan of care did not contain an accurate description of their cognitive status and how care is provided to the resident. The Licensee did not ensure the assessment and plan of care included clear directions to the Licensee's staff who provide direct care to the resident.

#### Outcome

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

## **Additional Findings**

During a routine inspection, an inspector may observe areas of non-compliance that are not related to the standard focus areas. In these cases, an inspector may cite the home for these contraventions at the time of this inspection. In addition, an inspector may follow-up on findings of non-compliance from previous inspections. Where the licensee is unable to demonstrate they have come into compliance or maintained compliance, an inspector may cite the home for these repeat contraventions at the time of this inspection.

## **Not Applicable**

## **Current Inspection – Citations**

Citations relating to the above Focus Areas or Additional Findings made during the current inspection are listed below.

## The Licensee failed to comply with the RHA s. 67. (4); Policy to promote zero tolerance

## s. 67. (4); Policy to promote zero tolerance

67. (4) Without in any way restricting the generality of the duties described in subsections (1) and (2), the licensee shall ensure that there is a written policy to promote zero tolerance of abuse and neglect of residents and shall ensure that the policy is complied with.

The Licensee failed to comply with the RHA s. 74.; Licensee's duty to respond to incidents of wrongdoing

## s. 74.; Licensee's duty to respond to incidents of wrongdoing

74. Every licensee of a retirement home shall ensure that,

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

#### s. 74. (a)

(a) every alleged, suspected or witnessed incident of the following of which the licensee knows or that is reported to the licensee is immediately investigated:

### s. 74. (a), 1.

(i) abuse of a resident of the home by anyone.

# The Licensee failed to comply with the RHA s. 75. (1); Reporting certain matters to Registrar

# s. 75. (1); Reporting certain matters to Registrar

75. (1) A person who has reasonable grounds to suspect that any of the following has occurred or may occur shall immediately report the suspicion and the information upon which it is based to the Registrar:

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

## s. 75. (1), para. 2

2. Abuse of a resident by anyone or neglect of a resident by the licensee or the staff of the retirement home of the resident if it results in harm or a risk of harm to the resident.

## **Closed Citations**

During an inspection, an inspector may follow-up with areas of non-compliance cited during a previous inspection, or verify compliance with areas initially cited during the current inspection. The inspector has verified that at the time of this report, the licensee was able to demonstrate that the following areas have come into compliance.

## **Retirement Homes Act, 2010:**

## s. 62. (12); Reassessment and revision

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,

# s. 62. (12), (b)

(b) the resident's care needs change or the care services set out in the plan are no longer necessary.

# s. 62. (4); Contents of plan

62. (4) 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,

#### s. 62. (4), (b)

(b) the planned care services for the resident that the licensee will provide, including,

## s. 62. (4), (b), 3.

(iii) clear directions to the licensee's staff who provide direct care to the resident.

## **Ontario Regulation 166/11:**

## s. 23. (1); Behaviour management

23. (1) Every licensee of a retirement home shall develop and implement a written behaviour management strategy that includes,

## s. 23. (1), (c)

(c) strategies for monitoring residents that have demonstrated behaviours that pose a risk to the resident or others in the home.

## s. 24. (5); Emergency plan, general

24. (5) The licensee shall,

#### s. 24. (5), (a)

(a) on an annual basis at least, test the emergency plan, including arrangements with community agencies, partner facilities and resources that will be involved in responding to an emergency, related to,

## s. 24. (5), (a), 1.

(i) the loss of essential services.

## s. 24. (5); Emergency plan, general

24. (5) The licensee shall,

# s. 24. (5), (a)

(a) on an annual basis at least, test the emergency plan, including arrangements with community agencies, partner facilities and resources that will be involved in responding to an emergency, related to,

s. 24. (5), (a), 3.1

(iii.1) epidemics and pandemics.

## s. 59. (1); Procedure for complaints to licensee

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:

- s. 59. (1), para. 4
- 4. A response shall be made to the person who made the complaint, indicating,
  - s. 59. (1), para. 4, 1.
  - i. what the licensee has done to resolve the complaint.

## NOTICE

The Final Inspection Report is being provided to the Licensee, the Registrar of 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
Matthew John, RN	November 08, 2023