

## FINAL INSPECTION REPORT

## Under the Retirement Homes Act, 2010

Inspection Information		
Date of Inspection: January 10, 2024	Name of Inspector: Tania Buko	
Inspection Type: Routine Inspection		
Licensee: ACC-003247 - Sienna Ontario RH GP Inc.		
Retirement Home: Aspira Doon Village Retirement Living		
License Number: T0526		

#### **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: Behaviour Management

## **RHRA Inspector Findings**

As part of the routine inspection, the Inspector interviewed staff and reviewed several documents including resident care files and the Licensee's policies. The Inspector found that a resident, who has exit seeking and eloping behaviours that pose a risk of harm to themselves, had an incident of elopement from the home and the Licensee failed to fully implement their behaviour management policy, as heightened monitoring was not put in place following the incident.

#### Outcome

The Licensee submitted a plan to achieve compliance by Wednesday February 7, 2024. RHRA to confirm compliance by following up with the Licensee or by inspection.

#### Focus Area #2: Complaints

#### **RHRA Inspector Findings**

The Inspector reviewed the Licensee's complaints log and supporting documentation and found the Licensee did not fully implement their complaints policy in relation to a complainant. Specifically, there is a lack of documented evidence to support the complaint was investigated within 10 business days as required, what the response to the complainant about what the home has done to resolve the complaint, reasons if the complaint was unfounded, type of action taken to resolve the complaint, including the date of action timeframes for actions to be taken, the final resolution, and any response that was provided to the complainant, including the date and description of the response.

#### Outcome

The Licensee submitted a plan to achieve compliance by Wednesday January 31, 2024. RHRA to confirm compliance by following up with the Licensee or by inspection.

#### Focus Area #3: Emergency Plan

#### **RHRA Inspector Findings**

The Inspector reviewed the Licensee's emergency plan and found there were insufficient arrangements in place with community partners involved to respond to an emergency at the home. In addition, there was a lack of evidence to support testing for situations involving loss of essential services was completed every 12 months as required, and although the Licensee tested for situations involving a missing resident, the documentation was insufficient or lacking.

#### Outcome

The Licensee submitted a plan to achieve compliance by Wednesday January 31, 2024. RHRA to confirm compliance by following up with the Licensee or by inspection.

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

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

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

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

## <u>s. 23. (1), (c)</u>

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

#### The Licensee failed to comply with the RHA s. 24. (4); Emergency plan, general

#### s. 24. (4); Emergency plan, general

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.

#### The Licensee failed to comply with the RHA s. 24. (5); Emergency plan, general

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

24. (5) The licensee shall,

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

#### <u>s. 24. (5), (a)</u>

(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,

#### <u>s. 24. (5), (c)</u>

(c) keep a written record of the testing of the emergency plan and planned evacuations and of any changes made to improve the emergency plan.

#### The Licensee failed to comply with the RHA s. 59. (1); Procedure for complaints to licensee

#### 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:

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

#### <u>s. 59. (1), para. 2</u>

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.

## <u>s. 59. (1), para. 4</u>

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,

## s. 59. (1), para. 4

4. A response shall be made to the person who made the complaint, indicating,

## s. 59. (1), para. 4, 2.

ii. that the licensee believes the complaint to be unfounded and the reasons for the belief.

## The Licensee failed to comply with the RHA s. 59. (2); Procedure for complaints to licensee

## s. 59. (2); Procedure for complaints to licensee

59. (2) The licensee shall ensure that a written record is kept in the retirement home that includes,

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

## <u>s. 59. (2), (c)</u>

(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;

## <u>s. 59. (2), (d)</u>

(d) the final resolution, if any, of the complaint;

## <u>s. 59. (2), (e)</u>

(e) every date on which any response was provided to the complainant and a description of the response;

#### **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. 65. (2); Training

65. (2) Every licensee of a retirement home shall ensure that no staff work in the home unless they have received training in,

## s. 65. (2), (f)

(f) fire prevention and safety;

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

## s. 21. (2); Hazardous substances

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.

## s. 27. (5); Infection prevention and control program

27. (5) The licensee of a retirement home shall ensure that,

s. 27. (5), (0.a)

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

## s. 32.; Records

32. If the licensee or a member of the staff of a retirement home administers a drug or other substance to a resident, the licensee shall ensure that,

## s. 32. (b)

(b) if a drug is administered, there is written evidence that the drug was prescribed for the resident by a person who is authorized to prescribe a drug under section 27 of the Regulated Health Professions Act, 1991;

# 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 <u>http://www.rhra.ca/en/retirement-home-database</u>.

Signature of Inspector	Date
Tania Buko	February 1, 2024