

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

| Inspection Information | |
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| Date of Inspection: February 6, 2025 | Name of Inspector: Antonette Whitley-Scott |
| Inspection Type: Routine Inspection | |
| Licensee: ACC-002976 - Ventas SSL Ontario II Inc. | |
| Retirement Home: Sunrise Senior Living of Erin Mills | |
| License Number: T0198 | |

| About Routine Inspections |
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| <p>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.</p> <p>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 <i>RHA</i>. 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 <i>RHA</i>.</p> <p>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 <i>RHA</i>. 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.</p> <p>In addition to inspection reports, RHRA may provide information to a licensee to encourage improvements of their current practices.</p> <p>If the licensee repeatedly does not meet the required standards, RHRA may take further action.</p> |

| Focus Areas |
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| <p><i>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.</i></p> <p>Focus Area #1: Complaints</p> |

RHRA Inspector Findings

The inspector reviewed the Licensee's complaints log and noted that there are written complaints and that responses were being provided to the complainant. However, the written record is not being reviewed and analyzed for trends at least quarterly. The Licensee failed to ensure that the written record is reviewed and analyzed for trends at least quarterly; and that the results of the review and analysis are taken into account in determining what improvements are required in the retirement home.

Outcome

The Licensee submitted a plan to achieve compliance by Sun Mar 30 2025. RHRA to confirm compliance by following up with the Licensee or by inspection.

Focus Area #2: Emergency Plan**RHRA Inspector Findings**

The inspector reviewed the Licensee's current arrangements with community agencies, partner facilities and resources that will be involved in responding to an emergency and found that there was no current arrangements for transportation. The Licensee failed to ensure that there are current arrangements with community agencies, partner facilities and resources that will be involved in responding to an emergency.

Outcome

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

Focus Area #3: Resident Record, Assessment, Plan of Care**RHRA Inspector Findings**

The inspector reviewed a sample of resident care files and found that 1 resident did not have their plans of care approved appropriately, as there was no evidence that the plans had been approved by the residents or their substitute decision makers or the prescribed person from the Home. Additionally, the inspector reviewed a sample of three residents' care files, whose care needs included dementia care, skin and wound care, or the use of a personal assistance services device. The inspector found that there was no evidence that an interdisciplinary care conference was held as part of the development of the resident's plan of care, or that the resident's plan of care took into account the results of the care conference. The Licensee failed to ensure that an interdisciplinary care conference was held as part of the development of the resident's plan of care, that the resident's plan of care took into account the results of the care conference, and that the resident or the substitute decision-maker was given an opportunity to participate in the interdisciplinary care conference.

Outcome

The Licensee submitted a plan to achieve compliance by Sun Mar 30 2025. 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. 47. (5); Development of plan of care

s. 47. (5); Development of plan of care

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.

The Licensee failed to comply with the RHA s. 47. (6); Development of plan of care

s. 47. (6); Development of plan of care

47. (6) The licensee shall ensure that the resident, the resident's substitute decision-maker, if any, and any other person designated by the resident or the substitute decision-maker are given an opportunity to participate in the interdisciplinary care conference mentioned in subsection (5).

The Licensee failed to comply with the RHA s. 59. (3); Procedure for complaints to licensee

s. 59. (3); Procedure for complaints to licensee

59. (3) The licensee shall ensure that,

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

s. 59. (3), (a)

(a) the written record is reviewed and analyzed for trends at least quarterly;

s. 59. (3), (b)

(b) the results of the review and analysis are taken into account in determining what improvements are required in the retirement home;

s. 59. (3), (c)

(c) a written record is kept of each review and of the improvements made in response.

The Licensee failed to comply with the RHA s. 62. (9); Persons who approve plans of care

s. 62. (9); Persons who approve plans of care

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:

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

s. 62. (9), para. 1

1. The resident or the resident's substitute decision-maker.

s. 62. (9), para. 2

2. The prescribed person if there is a person prescribed for the purpose of this paragraph.

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), (j)

(j) all other prescribed matters.

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>.

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| Signature of Inspector | Date |
| <i>Antonette Whitley-Scott</i> | March 4, 2025 |