

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

Inspection Information	
<b>Date of Inspection:</b> October 10, 2017	<b>Name of Inspector:</b> Julie Hebert
<b>Inspection Type:</b> Routine Inspection	
<b>Licensee:</b> Chartwell Master Care Corporation / 100 Milverton Drive, Mississauga, ON L5R 4H1 (the "Licensee")	
<b>Retirement Home:</b> Chartwell Royal Marquis Retirement Residence / 590 Grand Marais Road, Windsor, ON N8X 3H4 (the "home")	
<b>Licence Number:</b> S0058	

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. 55; Contents of records.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><b>55. (2)</b> The record for each resident shall include, (d) a copy of the resident's most recent plan of care;</p>
<p><b>Inspection Finding</b></p> <p>Not all resident files reviewed during the inspection contained an updated and completed plan of care.</p>
<p><b>Outcome</b></p> <p>The Licensee has advised it has taken corrective action to achieve compliance. RHRA to confirm compliance by inspection.</p>
<p><b>2. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 65; Training.</b> <b>The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 65; On-going training.</b> <b>The Licensee failed to comply with O. Reg. 166/11, s. 14; Staff training.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><b>65. (2)</b> Every licensee of a retirement home shall ensure that no staff work in the home unless they have received training in,</p>

- (b) the licensee’s policy mentioned in subsection 67 (4) to promote zero tolerance of abuse and neglect of residents;
- (d) the licensee’s policy mentioned in subsection 68 (3) regarding the use of personal assistance services devices for residents;

**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. (1)** For the purposes of clause 65 (2) (j) of the Act, every licensee of a retirement home shall ensure that all staff who work in the home receive training in the procedure described in subsection 73 (1) of the Act for a person to complain to the licensee.

**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**

Not all staff had completed training annually and at orientation on the home's most updated Zero tolerance of Abuse policy, PASD policy or complaint's policy.

**Outcome**

The Licensee submitted a plan to achieve compliance by December 1, 2017. RHRA to confirm compliance by inspection.

**3. The Licensee failed to comply with O. Reg. 166/11, s. 24; Emergency plan, general.  
The Licensee failed to comply with O. Reg. 166/11, s. 25; Emergency plan, retirement home with more than 10 residents.**

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,

- (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,

- (ii) situations involving a missing resident,

**25. (2)** The licensee shall ensure that the development of the emergency plan includes,

- (b) identification of hazards and risks that may give rise to an emergency affecting the home, whether the hazards and risks arise within the home or in the surrounding vicinity or community, and strategies to address those hazards and risks.

**Inspection Finding**

The home had not completed agreements with all community partners that would be involved in an emergency. They had not completed testing of the system in all required areas. The home was not able to demonstrate that they had identified all risks and hazards in and around the home.

**Outcome**

The Licensee submitted a plan to achieve compliance by December 1, 2017. RHRA to confirm compliance 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 Public Register, available online at <http://rhra.ca/en/register/>

Signature of Inspector 	Date December 20, 2017
---	---------------------------