

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

Inspection Information	
<b>Date of Inspection:</b> October 17, 2018	<b>Name of Inspector:</b> Ben Razulis
<b>Inspection Type:</b> Routine Inspection	
<b>Licensee:</b> Maple Retirement Homes Inc. / 307 King street, Hamilton, ON L8N 1C1 (the "Licensee")	
<b>Retirement Home:</b> Montgomery Retirement Home / 1605 Main Street , Hamilton, ON L8H 1C4 (the "home")	
<b>Licence Number:</b> S0457	

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 the RHA, S.O. 2010, c. 11, s. 53; Agreement required.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><b>53. (1)</b> The licensee of a retirement home shall enter into a written agreement with every resident of the home before the resident commences residency in the home.</p>
<p><b>Inspection Finding</b></p> <p>The Licensee failed to ensure that all residents had signed a residency agreement prior to them commencing residency at the home.</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 O. Reg. 166/11, s. 24; Emergency plan, general.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><b>24. (4)</b> The licensee shall keep current all arrangements with community agencies, partner facilities and resources that will be involved in responding to an emergency.</p>
<p><b>Inspection Finding</b></p> <p>The Licensee failed to ensure that there were appropriate arrangements in place with resources who would be assisting in response to an emergency.</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>

**3. 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. 44; Full assessment of care needs.**

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

**43. (2)** The initial assessment mentioned in subsection (1) shall consider the following matters with respect to the resident:

1. Continence.

**44. (2)** The full assessment mentioned in subsection (1) shall consider the following matters with respect to the resident:

7. The matters listed in subsection 43 (2).

**Inspection Finding**

The Licensee failed to ensure that the residents were being assessed fully on the above noted area.

**Outcome**

The Licensee submitted a plan to achieve compliance by December 2, 2018. RHRA to confirm compliance by inspection.

**4. The Licensee failed to comply with O. Reg. 166/11, s. 15; Policy of zero tolerance of abuse and neglect.**

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

**15. (3)** The policy to promote zero tolerance of abuse and neglect of residents described in subsection 67 (4) of the Act shall,

- (e) provide that the licensee of the retirement home shall ensure that the resident and the resident's substitute decision-makers, if any, are notified of the results of an investigation described in clause 67 (5) (e) of the Act immediately upon the completion of the investigation;

**Inspection Finding**

The Licensee's policy to promote zero tolerance of abuse and neglect did not include that residents and/or their substitute decision makers would be notified immediately of the results of an investigation into alleged, suspected or witnessed abuse or neglect.

**Outcome**

The Licensee has advised it has taken corrective action to achieve compliance. RHRA to confirm compliance by inspection.

**5. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 73; Requirements for procedure.  
The Licensee failed to comply with O. Reg. 166/11, s. 59; Procedure for complaints to licensee.**

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

**73. (2)** The procedure shall comply with the regulations.

**59. (2)** The licensee shall ensure that a written record is kept in the retirement home that includes,  
(a) the nature of each verbal or written complaint;

(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;

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

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

(f) any response made in turn by the complainant.

**Inspection Finding**  
The Licensee failed to keep appropriate records of complaints made to the home.


**Outcome**  
The Licensee submitted a plan to achieve compliance by December 2, 2018. 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 November 7, 2018
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