

FINAL INSPECTION REPORT Under the Retirement Homes Act, 2010

Inspection Information

Date of Inspection: December 9, 2021 Name of Inspector: Julie Hebert

Inspection Type: Routine Inspection

Licensee: Chartwell Master Care Corporation / 7070 Derrycrest Drive, Mississauga, ON L5W 0G5 (the

"Licensee")

Retirement Home: Chartwell Collegiate Heights Retirement Residence / 95 Fauquier Avenue, Sault Ste.

Marie, ON P6B 2B2 (the "home")

Licence Number: N0074

Purpose of Inspection

The RHRA conducts routine inspections as set out in section 77(3) of the *Retirement Homes Act, 2010* (the "RHA").

NON-COMPLIANCE

1. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 62; Assessment of resident.

The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 62; Reassessment and revision.

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

- <u>62. (6)</u> The licensee shall ensure that the plan of care is based on an assessment of the resident and the needs and preferences of the resident.
- **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,
 - (b) the resident's care needs change or the care services set out in the plan are no longer necessary;

Inspection Finding

The home was not able to demonstrate that all resident plans of care included all resident care needs or were updated as care needs changed.

Outcome

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

2. The Licensee failed to comply with O. Reg. 166/11, s. 14; Staff training.

The Licensee failed to comply with O. Reg. 166/11, s. 29; Administration of drugs or other substances.

Final Inspection Report Page 1 of 4



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

- **14. (5)** The licensee shall ensure that the persons who are required to receive the training described in subsection 65 (5) of the Act receive that training on an ongoing basis, namely at least annually after receiving the training described in subsection (4).
- <u>29.</u> If one of the care services that the licensee or the staff of a retirement home provide to a resident of the home is the administration of a drug or other substance, the licensee shall ensure that,
 - (e) if the licensee or a staff member is involved in the administration of the drug or other substance at the home, that the licensee or staff member is trained in,
 - (i) ways of reducing the incidence of infectious disease, including maintaining proper hand hygiene,
 - (ii) the safe disposal of syringes and other sharps,
 - (iii) recognizing an adverse drug reaction and taking appropriate action;
 - (c) neither the licensee nor a staff member administers a drug to a resident in the home unless the licensee or the staff member has received training in the procedures applicable to the administration of the drug;

Inspection Finding

The home was not able to demonstrate that they completed medication training annually and at orientation with all relevant staff.

Outcome

At the time of the inspection, the Licensee was not in compliance. The home has since taken corrective action to achieve compliance.

3. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 65; Training.

The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 65; On-going training.

The Licensee failed to comply with O. Reg. 166/11, s. 14; Staff training.

The Licensee failed to comply with O. Reg. 166/11, s. 27; Infection prevention and control program.

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

- **65. (2)** Every licensee of a retirement home shall ensure that no staff work in the home unless they have received training in,
 - (a) the Residents' Bill of Rights;
 - (b) the licensee's policy mentioned in subsection 67 (4) to promote zero tolerance of abuse and neglect of residents;
 - (c) the protection afforded for whistle-blowing described in section 115;
 - (d) the licensee's policy mentioned in subsection 68 (3) regarding the use of personal assistance services devices for residents;
 - (f) fire prevention and safety;

Final Inspection Report Page 2 of 4



- <u>65. (4)</u> 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.
- **27. (9)** The licensee shall ensure that each staff member who works in the retirement home receives training on how to reduce the incidence of infectious disease transmission, including,
 - (a) the need for and method of maintaining proper hand hygiene and method of preventing cross contamination, including proper handling of soiled linens, the protection of uniforms, and the separation of clean and dirty items;
 - (b) the need for and process of reporting, providing surveillance of and documenting incidents of infectious illness.

Inspection Finding

The home was not able to demonstrate that they completed training annually and at orientation in all required areas of the legislation.

Outcome

The Licensee submitted a plan to achieve compliance by December 31, 2021. RHRA to confirm compliance by inspection.

4. The Licensee failed to comply with O. Reg. 166/11, s. 24; Emergency plan, general.

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

- 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,
 - (iii) medical emergencies,
 - (iv) violent outbursts;

Inspection Finding

The home was not able to demonstrate that they completed all required testing of their emergency plan.

Outcome

At the time of the inspection, the Licensee was not in compliance. The home has since taken corrective action to achieve compliance.

Final Inspection Report Page 3 of 4



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 Retirement Home Database available online at http://www.rhra.ca/en/retirement-home-database.

Signature of Inspector	Date
Quice Hebert	December 15, 2021

Final Inspection Report Page 4 of 4