

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

Inspection Information	
<b>Date of Inspection:</b> April 4, 2022	<b>Name of Inspector:</b> Denise Tessier
<b>Inspection Type:</b> Mandatory Reporting Inspection	
<b>Licensee:</b> 2292819 Ontario Inc. / 138 Caledonia Road, St. Isidore, ON K0C 2B0 (the "Licensee")	
<b>Retirement Home:</b> Le Manoir Caledonia / 138 Caledonia Road, St. Isidore, ON K0C 2B0 (the "home")	
<b>Licence Number:</b> N0180	

Purpose of Inspection
The RHRA received a report under section 75(1) 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. 62; Contents of plan. The Licensee failed to comply with O. Reg. 166/11, s. 47; Development of plan of care.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><b>62. (4)</b> The licensee of a retirement home shall ensure that there is a written plan of care for each resident of the home that sets out,</p> <p style="padding-left: 40px;">(b) the planned care services for the resident that the licensee will provide, including,</p> <p style="padding-left: 80px;">(i) the details of the services,</p> <p style="padding-left: 80px;">(iii) clear directions to the licensee's staff who provide direct care to the resident;</p> <p><b>47. (5)</b> 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.</p>
<p><b>Inspection Finding</b></p> <p>A report was made to RHRA regarding suspected improper care of residents. As part of the inspection, the inspector reviewed records relating to the residents. The inspector confirmed that the Licensee failed to ensure that a resident of the home had the required care needs and directions identified in the plans of care and failed to complete an inter-disciplinary care conference for a resident requiring the use of Personal Assistance Service Devices.</p>
<p><b>Outcome</b></p> <p>At the time of the inspection, the Licensee was not in compliance. The home has since taken corrective action to achieve compliance.</p>

**2. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 65; Training.  
The Licensee failed to comply with O. Reg. 166/11, s. 14; Staff training.**

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;
- (e) injury prevention;
- (f) fire prevention and safety;
- (g) the licensee’s emergency evacuation plan for the home mentioned in subsection 60 (3);
- (h) the emergency plan and the infection prevention and control program of the licensee for the home mentioned in subsection 60 (4);
- (i) all Acts, regulations, policies of the Authority and similar documents, including policies of the licensee, that are relevant to the person’s duties;
- (j) all other prescribed matters.

**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.

**Inspection Finding**

The Licensee failed to ensure a new staff member received the required training at hire.

**Outcome**

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

**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 April 28, 2022
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