

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

Inspection Information	
<b>Date of Inspection:</b> August 2, 2022	<b>Name of Inspector:</b> Cindy Ma
<b>Inspection Type:</b> Routine Inspection	
<b>Licensee:</b> Chartwell Master Care Corporation / 7070 Derrycrest Drive, Mississauga, ON L5W 0G5 (the "Licensee")	
<b>Retirement Home:</b> Chartwell Scarlett Heights Retirement Residence / 4005 Eglinton Avenue, Etobicoke, ON M9A 5H3 (the "home")	
<b>Licence Number:</b> T0108	

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. 59; Procedure for complaints to licensee.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><b>59. (2)</b> The licensee shall ensure that a written record is kept in the retirement home that includes, (f) any response made in turn by the complainant.</p>
<p><b>Inspection Finding</b></p> <p>At the time of the inspection, the inspector reviewed the Licensee's complaint reports. The Licensee failed to ensure that the written records included descriptions of the responses made by complainants. The Licensee failed to ensure that their written record of a complaint included all the required elements.</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>
<p><b>2. The Licensee failed to comply with O. Reg. 166/11, s. 23; Behaviour management.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><b>23. (1)</b> Every licensee of a retirement home shall develop and implement a written behaviour management strategy that includes,</p>

- (a) techniques to prevent and address resident behaviours that pose a risk to the resident or others in the home;
- (b) strategies for interventions to prevent and address resident behaviours that pose a risk to the resident or others in the home;
- (c) strategies for monitoring residents that have demonstrated behaviours that pose a risk to the resident or others in the home.

**Inspection Finding**

At the time of the inspection, a review of a resident’s record who was identified as having responsive behaviours indicated that the Licensee had not developed a behaviour management strategy that included techniques and strategies to prevent and address the behaviours, and strategies for monitoring the resident. The Licensee failed to comply with the requirements as prescribed in the legislation.

**Outcome**

The Licensee has advised it has taken corrective action to achieve compliance. RHRA to confirm compliance by following up with the Licensee or by inspection.

**3. 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):

- 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 inspector reviewed a sample of resident service plans and found one of the plans was not updated at the time the residents’ care needs changed, in relation to behaviour management and fall risk management. The Licensee failed to ensure the plan was in compliance with the legislation.

**Outcome**

The Licensee has advised it has taken corrective action to achieve compliance. RHRA to confirm compliance by following up with the Licensee or by inspection.

- 4. 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; Additional training for direct care staff.**
  - 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;
- (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;
- (h) the emergency plan and the infection prevention and control program of the licensee for the home mentioned in subsection 60 (4);

**65. (5)** The licensee shall ensure that all staff who provide care services to residents receive training in the following matters and at the times required by the regulations, as a condition of continuing to have contact with residents, in addition to the other training that they are required to receive under this section:

- 3. Behaviour management.

**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.

**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 inspector reviewed a sample of staff training records and found that not all recent hired staff members received training in the above listed areas before beginning to work in the Home, or at the times required by the regulations. The Licensee failed to ensure that staff were trained as required.

**Outcome**

The Licensee has advised it has taken corrective action to achieve compliance. RHRA to confirm compliance by following up with the Licensee or by inspection.

**5. 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,
  - (i) the loss of essential services,

(iii) medical emergencies,  
 (ii) situations involving a missing resident,  
 (iv) violent outbursts.  
 (b) at least once every two years, conduct a planned evacuation of the retirement home.

**Inspection Finding**  
 At the time of the inspection, the Licensee did not provide evidence to demonstrate that testing for situations involving the loss of essential services, missing residents, medical emergencies, and violent outbursts had been completed annually as required. Further, there was insufficient evidence to demonstrate that an evacuation drill had been completed as required. The Licensee failed to ensure that testing was done as prescribed in the legislation.

**Outcome**  
 The Licensee has advised it has taken corrective action to achieve compliance. RHRA to confirm compliance by following up with the Licensee or 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 Retirement Home Database available online at <http://www.rhra.ca/en/retirement-home-database>.

<p>Signature of Inspector</p> 	<p>Date</p> <p>August 16, 2022</p>
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