

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

Inspection Information	
<b>Date of Inspection:</b> November 8, 2022	<b>Name of Inspector:</b> Nathalie Bartlett
<b>Inspection Type:</b> Mandatory Reporting Inspection	
<b>Licensee:</b> 2758908 Ontario Ltd. / 9 Stafford Street, Barry's Bay, ON K0J 1B0 (the "Licensee")	
<b>Retirement Home:</b> Champlain Gardens / 9 Stafford Street, Barry's Bay, ON K0J 1B0 (the "home")	
<b>Licence Number:</b> N0530	

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 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. (1)</b> Every licensee of a retirement home shall ensure that every written or verbal complaint made to the licensee or a staff member concerning the care of a resident or operation of the home is dealt with as follows:</p> <ol style="list-style-type: none"> <li>1. The complaint shall be investigated. If the complaint alleges harm or risk of harm to one or more residents, the investigation shall be commenced immediately.</li> <li>2. The complaint shall be resolved if possible, and a response that complies with paragraph 4 provided within 10 business days of the receipt of the complaint.</li> <li>3. For those complaints that cannot be investigated and resolved within 10 business days, an acknowledgement of receipt of the complaint shall be provided within 10 business days of receipt of the complaint, including the date by which the complainant can reasonably expect a resolution, and a follow-up response that complies with paragraph 4 shall be provided as soon as possible in the circumstances.</li> <li>4. A response shall be made to the person who made the complaint, indicating,</li> </ol> <p><b>59. (2)</b> The licensee shall ensure that a written record is kept in the retirement home that includes,</p> <ol style="list-style-type: none"> <li>(a) the nature of each verbal or written complaint;</li> <li>(b) the date that the complaint was received;</li> <li>(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;</li> <li>(d) the final resolution, if any, of the complaint;</li> <li>(e) every date on which any response was provided to the complainant and a description of the response;</li> </ol>

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

**Inspection Finding**

A report was made to the RHRA regarding the suspected improper care of a resident. As part of the inspection in response to the report, the inspector reviewed the Licensee’s complaints log and noted that a recent complaint did not have a complaint written record. Specifically, the record of the complaint did not include the dates on which responses were provided to the complainant and descriptions of the responses, as well as the responses made in turn by the complainant. The License failed to follow their complaint policy as required.

**Outcome**

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

**2. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 62; Persons who approve plans of care.**

**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. (9)** The licensee shall ensure that the following persons have approved the plan of care, including any revisions to it, and that a copy is provided to them:

1. The resident or the resident’s substitute decision-maker.

**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**

A report was made to the RHRA regarding suspected improper care of a resident. As part of the inspection in response to the report, the inspector reviewed records relating to the resident, and interviewed both the staff and the substitute decision maker. The inspector confirmed that the Licensee failed to ensure that the resident of the home had their plan of care approved and reassessed as required.

**Outcome**

The Licensee submitted a plan to achieve compliance by December 2, 2022. 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; Integration of assessments and care.**

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

**62. (8)** The licensee shall ensure that there are protocols to promote the collaboration between the staff, external care providers and others involved in the different aspects of care of the resident,  
 (b) in the development and implementation of the plan of care so that the different aspects of care are integrated and are consistent with and complement each other.

**Inspection Finding**

A report was made to the RHRA regarding suspected improper care of a resident. As part of the inspection in response to the report, the inspector reviewed records relating to the resident, and interviewed both the staff and the substitute decision maker. The inspector confirmed that the Licensee failed to include the external caregiver services being provided in the resident’s plan of care as required.

**Outcome**


The Licensee submitted a plan to achieve compliance by December 2, 2022. 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>November 28<sup>th</sup>, 2022</p>
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