

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

Inspection Information				
Date of Inspection: December 13, 2022	Name of Inspector: Angela Butler			
Inspection Type: Routine Inspection				
Licensee: Chartwell Master Care Corporation / 7070 Derrycrest Drive, Mississauga, ON L5W 0G5 (the "Licensee")				
<b>Retirement Home:</b> Chartwell Royalcliffe Retirement Residence / 609 Wharncliffe Road, London, ON N6J 2N7 (the "home")				
Licence Number: S0059				

## **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 O. Reg. 166/11, s. 23; Behaviour management.

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

**23. (1)** Every licensee of a retirement home shall develop and implement a written behaviour management strategy that includes,

(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**

The Inspector reviewed samples of residents' files including their progress notes and plans of care and found two residents who exhibited responsive behaviour. The Inspector found there was insufficient evidence that strategies, interventions, and techniques to prevent and address the behaviours as well as strategies for monitoring were developed and implemented, and that those were documented in the resident's plan of care, as per the home's policy. The Licensee failed to comply with the home's behaviour management policy.

#### Outcome

The Licensee submitted a plan to achieve compliance by January 31, 2023. RHRA to confirm compliance by



following up with the Licensee or by inspection.

## 2. 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. (12)</u> 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,

### Inspection Finding

The inspector reviewed a sample of resident care files and found that 2 residents did not have their plans of care updated every 6 months. The Licensee failed to update plans of care in accordance 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.

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.
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;

(h) the emergency plan and the infection prevention and control program of the licensee for the home mentioned in subsection 60 (4);

<u>14. (1)</u> 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. (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>27. (9)</u>** 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 3 staff had not completed the required training prior to working in the home. Also, 4 staff members had not completed the annual behavioural management training. The Licensee failed to ensure that staff were trained as required.

### Outcome

The Licensee submitted a plan to achieve compliance by January 1, 2023. RHRA to confirm compliance by following up with the Licensee or by inspection.

## 4. 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):

## 27. (5) The licensee of a retirement home shall ensure that,

(0.a) any guidance, advice or recommendations given to retirement homes by the Chief Medical Officer of Health are followed in the retirement home;

### **Inspection Finding**

The Inspector requested documentation for daily resident screening and temperature checks and was advised the home was not screening residents daily. The Inspector also observed visitors wearing cloth masks in the home at the time of the inspection. The Licensee failed to follow the guidance of the Chief Medical Officer of Health.

## 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 <u>http://www.rhra.ca/en/retirement-home-database</u>.

Signature of Inspector	Angele Burder	RN	Date December 22, 2022
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