
COMPLIANCE ORDER TO BE MADE AVAILABLE IN HOME

Pursuant to the *Retirement Homes Act, 2010* S.O. 2010, Chapter 11, section 90.

Chartwell Master Care Corporation
o/a Chartwell Tranquility Place Retirement Residence
436 Powerline Road
Brantford, ON N3T 5L8

COMPLIANCE ORDER NO. 2024-S0057-90-01

Under section 90 of the *Retirement Homes Act, 2010* (the “Act”), if the Deputy Registrar of the Retirement Homes Regulatory Authority (the “Deputy Registrar” and the “RHRA”, respectively) believes on reasonable grounds that a licensee has contravened a requirement under the Act the Deputy Registrar may serve an order on a licensee ordering it to refrain from doing something, or to do something, for the purpose of ending the contravention and achieving compliance, ensuring that the contravention is not repeated, and that compliance is maintained. The Deputy Registrar issues this Compliance Order (the “Order”) to ensure Chartwell Master Care Corporation (the “Licensee”) operating as Chartwell Tranquility Place Retirement Residence (the “Home”) comes into compliance and maintains compliance with the Act and Ontario Regulation 166/11 under the Act (the “Regulation”).

CONTRAVENTIONS

The Deputy Registrar has reasonable grounds to believe that the Licensee contravened the following sections of the Act and Regulation

- Section 67(2) of the Act for failure to ensure staff do not neglect residents
- Section 59(2)(a)-(f) of the Regulation regarding failure to follow the complaints’ procedure
- Section 27(5)(0.a) of the Regulation– failure to follow guidance of the Chief Medical Officer of Health in the Home.

BRIEF SUMMARY OF FACTS

A resident of the Home sustained a fall and was unable to call for assistance due to a non-functioning pendant, which was known to the Licensee. Staff did not conduct safety checks in

accordance with the Licensee's procedure when a resident's pendant or call bell is not functioning. The Licensee incorrectly documented that the resident attended a meal, which she had not. The Licensee did not respond to the family's complaint in accordance with the complaints' procedure.

The Licensee did not follow the Chief Medical Officer of Health's (CMOH) recommendations regarding self-isolation requirements or daily symptom screening.

REQUIRED ACTION

Pursuant to section 90 of the Act, the Deputy Registrar orders the Licensee to comply with the following:

1. Within 45 days, ensure that the Licensee's procedures regarding what staff are required to do if a resident's pendant or call bell is not working are set out in writing and that all relevant staff receiving training on that procedure.
2. Within 45 days, train any staff of the Home, including management, who are responsible for responding to, managing and documenting complaints on the Licensee's complaints policy.
3. For the next six months, complete a weekly audit of the Home's mealtime attendance records to ensure accuracy.
4. Within 60 days, clarify its processes regarding self-isolation in the context of COVID-19 and train all care staff regarding self-isolation procedures, including the circumstances where a resident is no longer expected to self-isolate. As part of that process, the Licensee must ensure that isolated residents are symptom checked each day until they are no longer symptomatic, informed at what point they may stop isolating and be provided with individualized activities during the isolation period.
5. The Licensee must demonstrate through written reports to the RHRA that it has complied with the actions set out above. The Licensee must submit these ongoing reports at such regularity as is determined by the RHRA Compliance Monitor.

Issued on April 30, 2024.