

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

Inspection Information	
<b>Date of Inspection:</b> January 26, 2026	<b>Name of Inspector:</b> Julie Hebert
<b>Inspection Type:</b> Routine Inspection	
<b>Licensee:</b> ACC-002850 - Cardinal Place Inc.	
<b>Retirement Home:</b> Cardinal Place	
<b>License Number:</b> S0353	

About Routine Inspections
<p>A routine inspection, performed by an RHRA inspector, is a physical inspection of a licensed retirement home. During a routine inspection, an RHRA inspector will walk through the home, speak to residents and staff, observe care services and conditions in the home, and ensure the licensee’s management and staff follow mandatory policies and practices designed to protect the welfare of residents.</p> <p>Following a routine inspection, the RHRA inspector prepares a draft inspection report which is sent to the licensee. The draft report may include instances where the licensee has failed to meet the standards of the <i>RHA</i>. If included, the licensee can respond to these instances and is strongly encouraged to inform RHRA of its plans to meet the standards of the <i>RHA</i>.</p> <p>Following the draft report, the RHRA inspector prepares this final inspection report, incorporating any response from the licensee with their plans to meet the standards of the <i>RHA</i>. The most recent final inspection report must be posted in the home in a visible and easily accessible location. All final inspection reports from the previous two years must also be made available in an easily accessible location in the home. The licensee must provide a copy of this report to the home’s Residents’ Council, if one exists.</p> <p>In addition to inspection reports, RHRA may provide information to a licensee to encourage improvements of their current practices.</p> <p>If the licensee repeatedly does not meet the required standards, RHRA may take further action.</p>

Focus Areas
<p><i>During a routine inspection, an inspector will focus primarily on a set number of areas which have been identified as related to the health, safety and wellbeing of resident, and may take various actions to determine whether the licensee is compliant with the RHA in relating to the areas. The areas listed in this section are ones which an inspector has identified as non-compliant.</i></p> <p><b>Focus Area #1: Abuse and Neglect</b></p>

**RHRA Inspector Findings**

The inspector reviewed the home's zero tolerance of abuse policy and learned that they had not revised the policy to include prohibiting staff from borrowing money or property from a resident.

**Outcome**

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

**Focus Area #2: Complaints****RHRA Inspector Findings**

The inspector reviewed the home's complaints log and although the home had demonstrated they had dealt with complaints brought to their attention, they had not completed a quarterly analysis of the complaints to look for any trends.

**Outcome**

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

**Focus Area #3: Emergency Plan****RHRA Inspector Findings**

The inspector reviewed the home's emergency plan and learned the arrangements with community partners had not been updated since 2023. The arrangements were not updated annually 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.

**Focus Area #4: Resident Record, Assessment, Plan of Care****RHRA Inspector Findings**

As part of the routine inspection, the inspector reviewed several residents' plans of care. Firstly, for residents receiving the care service of Dementia Care, this care service was not included in their plan of care. Secondly, for Dementia care and assistance with daily living services, there were not clear directions and goals for the staff to provide these services to the individual resident. Thirdly, the plans of care were not all being updated as residents' care needs changed. Lastly, for those residents whose care needs included Dementia, skin and wound care, or Personal Assistive Service Devices, the home had not been completing an interdisciplinary care conference as part of the development of their plan of care.

The Licensee was not able to demonstrate that plans of care were developed and revised in accordance with the legislation.

**Outcome**

The Licensee submitted a plan to achieve compliance by March 03, 2026. RHRA to confirm compliance by following up with the Licensee or by inspection.

**Additional Findings**

*During a routine inspection, an inspector may observe areas of non-compliance that are not related to the standard focus areas. In these cases, an inspector may cite the home for these contraventions at the time of this inspection. In addition, an inspector may follow-up on findings of non-compliance from*

*previous inspections. Where the licensee is unable to demonstrate they have come into compliance or maintained compliance, an inspector may cite the home for these repeat contraventions at the time of this inspection.*

**Not Applicable**

### **Current Inspection – Citations**

*Citations relating to the above Focus Areas or Additional Findings made during the current inspection are listed below.*

#### **The Licensee failed to comply with the RHA s. 62. (12); Reassessment and revision**

##### **s. 62. (12); Reassessment and revision**

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,

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

###### **s. 62. (12), (a)**

(a) a goal in the plan is met;

#### **The Licensee failed to comply with the RHA s. 62. (4); Contents of plan**

##### **s. 62. (4); Contents of plan**

62. (4) 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,

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

###### **s. 62. (4), (a)**

(a) the care services that are part of a package of care services that the resident is entitled to receive under the resident's agreement with the licensee, whether or not the resident receives the services;

###### **s. 62. (4), (b)**

(b) the planned care services for the resident that the licensee will provide, including,

###### **s. 62. (4), (b), 1.**

(i) the details of the services,

###### **s. 62. (4), (b)**

(b) the planned care services for the resident that the licensee will provide, including,

###### **s. 62. (4), (b), 2.**

(ii) the goals that the services are intended to achieve,

###### **s. 62. (4), (b)**

(b) the planned care services for the resident that the licensee will provide, including,

###### **s. 62. (4), (b), 3.**

(iii) clear directions to the licensee's staff who provide direct care to the resident;

#### **The Licensee failed to comply with the O. Reg. 166/11 s. 47. (5); Development of plan of care**

**s. 47. (5); Development of plan of care**

47. (5) 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.

**Closed Citations**

*During an inspection, an inspector may follow-up with areas of non-compliance cited during a previous inspection, or verify compliance with areas initially cited during the current inspection. The inspector has verified that at the time of this report, the licensee was able to demonstrate that the following areas have come into compliance.*

**Retirement Homes Act, 2010:**

**s. 65. (2); Training**

65. (2) Every licensee of a retirement home shall ensure that no staff work in the home unless they have received training in,

**s. 65. (2), (h)**

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

**s. 65. (4); On-going training**

65. (4) The licensee shall ensure that the persons who are required to receive the training described in subsection (2) receive on-going training as described in that subsection at the times required by the regulations.

**Ontario Regulation 166/11:**

**s. 15. (3); Policy of zero tolerance of abuse and neglect**

15. (3) The policy to promote zero tolerance of abuse and neglect of residents described in subsection 67 (4) of the Act shall,

**s. 15. (3), (a.1)**

(a.1) contain an explanation of the prohibition on borrowing, receiving or holding a resident's money or other property, as set out in section 57.1;

**s. 24. (4); Emergency plan, general**

24. (4) The licensee shall keep current all arrangements with community agencies, partner facilities and resources that will be involved in responding to an emergency.

**s. 59. (3); Procedure for complaints to licensee**

59. (3) The licensee shall ensure that,

**s. 59. (3), (a)**

(a) the written record is reviewed and analyzed for trends at least quarterly;

**s. 59. (3); Procedure for complaints to licensee**

59. (3) The licensee shall ensure that,

**s. 59. (3), (b)**

(b) the results of the review and analysis are taken into account in determining what improvements are required in the retirement home;

**s. 59. (3); Procedure for complaints to licensee**

59. (3) The licensee shall ensure that,

**s. 59. (3), (c)**

(c) a written record is kept of each review and of the improvements made in response.

**NOTICE**

The Final Inspection Report is being provided to the Licensee, the Registrar of 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  <i>Julie Hebert</i>	Date  February 11, 2026
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