

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

Inspection Information	
Date of Inspection: 3/27/2025	Name of Inspector: Shyla Sittampalam, RN
Inspection Type: Routine Inspection	
Licensee: ACC-002759 - CVH (No.6) LP	
Retirement Home: Orchard Villa	
License Number: T0299	

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: Emergency Plan</b></p>

**RHRA Inspector Findings**

The inspector reviewed the Licensee's records of testing for their emergency plans and found that the testing for situations involving the loss of essential services, situations involving a missing resident, medical emergencies, epidemics and pandemics, and violent outbursts had not been completed on an annual basis. The Licensee failed to ensure that testing was done annually as required.

**Outcome**

The Licensee must take corrective action to achieve compliance.

**Focus Area #2: Resident Record, Assessment, Plan of Care****RHRA Inspector Findings**

The inspector reviewed a sample of resident care files and found that three residents' plans of care did not include all of the care services they were entitled to receive. The plans of care were not based on an assessment, did not include the details and goals of care services provided by an external care provider, and there was no evidence that the plans had been approved by the residents or their substitute decision-makers. The Licensee failed to ensure that all resident plans of care were completed as required.

**Outcome**

The Licensee must take corrective action to achieve compliance.

**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. (6); Assessment of resident****s. 62. (6); Assessment of resident**

62. (6) The licensee shall ensure that the plan of care is based on an assessment of the resident and the needs and preferences of the resident.

**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,

**The Licensee failed to comply with the RHA s. 62. (9); Persons who approve plans of care**

**s. 62. (9); Persons who approve plans of care**

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:

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

**s. 62. (9), para. 1**

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

**The Licensee failed to comply with the O. Reg. 166/11 s. 24. (5); Emergency plan, general**

**s. 24. (5); Emergency plan, general**

24. (5) The licensee shall,

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

**s. 24. (5), (a)**

(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,

**s. 24. (5), (a), 1.**

(i) the loss of essential services,

**s. 24. (5), (a)**

(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,

**s. 24. (5), (a), 2.**

(ii) situations involving a missing resident,

**s. 24. (5), (a)**

(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,

**s. 24. (5), (a), 3.**

(iii) medical emergencies,

**s. 24. (5), (a)**

(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,

**s. 24. (5), (a), 3.1**

(iii.1) epidemics and pandemics,

**s. 24. (5), (a)**

(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,

**s. 24. (5), (a), 4.**

(iv) violent outbursts;

**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.*

**Ontario Regulation 166/11:**

**s. 36. (1); Continence care**

36. (1) If one of the care services that the licensee or the staff of a retirement home provide to a resident of the home is continence care, the licensee shall establish a continence care program that includes,

**s. 36. (1), (a)**

(a) measures to promote continence;

**s. 36. (1); Continence care**

36. (1) If one of the care services that the licensee or the staff of a retirement home provide to a resident of the home is continence care, the licensee shall establish a continence care program that includes,

**s. 36. (1), (b)**

(b) measures to prevent constipation, including nutrition and hydration protocols;

**s. 36. (1); Continence care**

36. (1) If one of the care services that the licensee or the staff of a retirement home provide to a resident of the home is continence care, the licensee shall establish a continence care program that includes,

**s. 36. (1), (c)**

(c) toileting programs;

**s. 36. (1); Continence care**

36. (1) If one of the care services that the licensee or the staff of a retirement home provide to a resident of the home is continence care, the licensee shall establish a continence care program that includes,

**s. 36. (1), (d)**

(d) strategies to maximize the resident's independence, comfort and dignity, including the use of equipment, supplies, devices and assistive aids.

**s. 56. (3); Format and retention of records**

56. (3) The licensee shall ensure that each of the records is kept in a readable and useable format that allows a complete copy of the record to be readily produced.

**s. 59. (2); Procedure for complaints to licensee**

59. (2) The licensee shall ensure that a written record is kept in the retirement home that includes,

**s. 59. (2), (c)**

(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;

**s. 59. (2); Procedure for complaints to licensee**

59. (2) The licensee shall ensure that a written record is kept in the retirement home that includes,

**s. 59. (2), (d)**

(d) the final resolution, if any, of the complaint;

**s. 59. (2); Procedure for complaints to licensee**

59. (2) The licensee shall ensure that a written record is kept in the retirement home that includes,

**s. 59. (2), (e)**

(e) every date on which any response was provided to the complainant and a description of the response;

**s. 59. (2); Procedure for complaints to licensee**

59. (2) The licensee shall ensure that a written record is kept in the retirement home that includes,

**s. 59. (2), (f)**

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

**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>Shyla Sittampalam</i> , RN	Date April 28, 2025
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