
ADMINISTRATIVE PENALTY ORDER TO BE MADE AVAILABLE IN HOME

Pursuant to the *Retirement Homes Act, 2010* S.O. 2010, Chapter 11, section 93.

Chapel Hill Limited Partnership
o/a Chapel Hill Retirement Residence
2305 Page Road
Orleans, ON K1W 1H3

The Deputy Registrar of the Retirement Homes Regulatory Authority (the “Deputy Registrar” and the “RHRA”, respectively) has reasonable grounds to believe that Chapel Hill Limited Partnership (the “Licensee”) operating as Chapel Hill Retirement Residence (the “Home”) has contravened sections of the *Retirement Homes Act, 2010* (the “Act”).

The Deputy Registrar issues this Order to Pay an Administrative Penalty under section 93 of the Act to encourage the Licensee to comply with the requirements under the Act and Regulation.

Contraventions

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

- Section 62(10) of the Act, for failing to ensure that the Licensee provided the care services to residents as set out in their plans of care;
- Section 62(12)(b) of the Act, for failing to ensure that a resident’s plan of care was updated within the prescribed timeframe and when the resident’s care needs changed; and
- Section 67(2) of the Act for failing to ensure that the Licensee and staff of the Home do not neglect residents to whom they are providing care.

Brief Summary of Facts

On multiple nights in October and November 2021, there were no staff present in specific units of the Home, including the Home’s dementia care units. This resulted in care services not being provided to residents, contrary to those residents’ needs and plans of care.

The staffing issue raises serious concerns with potentially severe consequences on resident health, safety, and well-being. The Licensee must ensure it is taking adequate

steps to ensure that the level of care provided to residents is not compromised by staffing shortages and that residents are not left uncared for in the future.

Administrative Penalty Factors

1. The Deputy Registrar considered the factors contained in subsection 60.1(1) of the Regulation in determining the amount of the Administrative Monetary Penalty:
 - a) **Severity of Adverse Effect / Potential Adverse Effect:** The non-compliance associated with the staffing issue at the Home had the potential for a major adverse effect on resident safety and well-being. Residents of the 1st and 4th floors of the Home were repeatedly left unattended for extended periods of time overnight. Staffing shortages appear to be a longstanding issue at the Home which the Licensee has failed to adequately address.
 - b) **Mitigation of Contravention:** Although the Licensee did take certain corrective action, that correction action is aimed at responding to staffing shortages and not avoiding them. Certain corrective actions have the potential to place additional burdens on existing staff, which could in turn undermine the quality of care provided to residents and negatively impact staff.
 - c) **Previous Contraventions:** The Inspector raised the issue of staffing concerns with the Home in the months leading up to October and November 2021. Following a June 22, 2021 inspection into concerns regarding staffing, the Home was warned that it could be placing itself in a situation of non-compliance for failing to remedy the issue. The Licensee acknowledged these concerns but failed to address them.
 - d) **Economic Benefit:** The Licensee derives an indirect economic benefit from failing to hire more staff. This is a root cause of the non-compliance identified.
 - e) **Purpose of Administrative Penalty:** The purpose of the administrative penalty is to ensure that, going forward, the Licensee will address issues related to staffing at the Home proactively and in a manner that does not negatively impact the care provided to residents of the Home and the wellbeing of residents and staff.

Issued on March 23, 2022