
COMPLIANCE ORDER TO BE MADE AVAILABLE IN HOME

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

Lifetimes Limited Partnership
o/a Willoughby Manor Retirement Residence
3584 Bridgewater Street,
Niagara Falls, ON L2G 6H1

COMPLIANCE ORDER NO. 2022-S0348-90-01

Under section 90 of the *Retirement Homes Act, 2010* (the “Act”), the Deputy Registrar of the Retirement Homes Regulatory Authority (the “Deputy Registrar” and the “RHRA”, respectively) 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 that Lifetimes Limited Partnership (the “Licensee”) operating as Willoughby Manor Retirement Residence (the “Home”) comes into compliance with the Act and Ontario Regulation 166/11 under the Act (the “Regulation”).

The Contravention and Order listed below are followed by the reasons for this Order, and information on the appeal process.

CONTRAVENTION

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

- Section 67(1) of the Act by failing to protect a resident of the Home from abuse by anyone.

REQUIRED ACTION

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

1. By **August 12, 2022**, the Licensee must issue a communication, acceptable to the RHRA, to all management and staff of the Home advising that any attempt by the Licensee to retaliate against a staff member for reporting an instance of abuse, neglect or incompetent care or any failure by the Licensee or staff to report same to the RHRA is unacceptable and an offence both under section 75(1) and section 115 of the *Retirement Homes Act, 2010*, for which that person can be prosecuted.

2. By **August 17, 2022**, The Licensee must provide the RHRA with evidence acceptable to the RHRA that it has complied with Paragraph 1 above.

REASONS

3. On June 15, 2021 an RHRA inspector (the "Inspector") conducted an inspection of the Home. The inspection followed a report to the RHRA that a senior staff member of the Home verbally berated a resident and banned the resident's only visiting relative from the Home for two weeks, leaving the resident socially and emotionally isolated.
4. The Inspector interviewed, among others, staff who work at the Home and family members of various residents.
5. As a result of those interviews, it was revealed that there were multiple incidents of threatening and intimidation towards residents and families by a particular staff member.
6. After inspectors interviewed staff, the senior staff member questioned staff as to what was asked of them by the inspectors and told one staff member, she must report what was said to the inspector.
7. The behaviour of this senior staff member at the inspection appears to have been intimidating to some of the staff, with one showing signs of stress and anxiety.
8. The Deputy Registrar has reasonable grounds to believe that this senior staff member was emotionally abusive towards the resident. Further, while the Inspector did not find the Licensee to have been in non-compliance with s. 115(1) of the Act (the prohibition on retaliation or threatening retaliation against whistle-blowers), a number of staff at the Home advised the inspector that this staff member told them not to report to the RHRA without going to the staff member first. There were statements from a number of staff members of the Home indicating that there was a culture of fear and intimidation among staff due to this staff member.
9. The corrective action taken in response to the findings on the inspection, lacked insight into the behaviour by this staff member at the Home. There was nothing in the response that adequately addressed the concerns about the treatment of the resident or culture of intimidation in the Home.
10. The Deputy Registrar is aware that shortly after the inspection, this staff member ceased working at the Home, which gives the Deputy Registrar some assurance that a similar situation will not arise.
11. For the foregoing reasons, the Deputy Registrar believes that the above-noted required action is reasonable and appropriate to ensure the Licensee corrects its non-compliance and maintains compliance going forward.

Issued on July 20, 2022.