
COMPLIANCE ORDER TO BE MADE AVAILABLE IN HOME

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

HCN-Revera Lessee (Alta Vista) LP
o/a Alta Vista Manor
751 Peter Morand Crescent
Ottawa, ON K1G 6S9

Served by email to: hartini.kumar@cogirseniorliving.ca
athena.aird@cogirseniorliving.ca

COMPLIANCE ORDER NO. 2024-N0393-90-01

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 HCN-Revera Lessee (Alta Vista) LP (the “Licensee”) operating as Alta Vista Manor (the “Home”) comes into compliance and maintains compliance with the Act and Ontario Regulation 166/11 under the Act (the “Regulation”).

The Contraventions 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 is not in compliance with the following sections of the Act and Regulation

- Section 23(1) of the Regulation – failing to develop and implement a written behaviour management strategy.
- Section 23(2) of the Regulation – failing to ensure staff are informed at the beginning of every shift of each resident whose behaviours require monitoring.
- Section 47(5) of the Regulation – failing to ensure that an interdisciplinary care conference is held as part of the development of the resident’s plan of care.

- Section 47(6) of the Regulation – failing to ensure that the resident/the resident's substitute decision-maker is given the opportunity to participate in an interdisciplinary care conference.
- Section 62(4)(b) and (c) of the Act – failing to ensure that resident's plans of care includes details and clear directions of services being provided.
- Section 62(9)(paragraph 1) of the Act – failing to ensure that a plan of care is approved by the resident or the resident's substitute decision-maker.
- Section 62(10) of the Act – failing to provide care to resident's in accordance with their plan of care.
- Section 62(12)(b) of the Act – failing to reassess and revise resident's plans of care when care needs have changed.

BRIEF SUMMARY OF FACTS

An RHRA inspector conducted a Mandatory Reporting Inspection of the Home on March 28, 2023, following an alleged incident of abuse between Resident A and Resident B.

Several staff reports indicated that Resident B had a history of inappropriate behaviours towards other residents. However, the Licensee failed to ensure that the residents plan of care was up to date or implement strategies such as monitoring to better understand and, if necessary, intervene in the situation.

REQUIRED ACTION

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

1. Within 30 days of the issuance of this Order, ensure the Home's Director of Care, General Manager and all staff of the Home that provide direct care to residents, review the RHRA's Compliance Assistance Module on Assessments and Plans of Care and provide proof of such review to the RHRA Compliance Monitor.
2. Within 90 days of the issuance of this Order, conduct an audit of all resident plans of care to ensure all residents have been assessed, plans of care have been created for each resident, and that all plans of care have been updated/revised based on the audit, and provide proof of such audit to the RHRA Compliance Monitor. Ensure all plans of care contain clear directions to staff for all care services provided, and any strategies and interventions are included address behaviour management.
3. Within 60 days of the issuance of this Order, ensure that all staff at the Home participate in a training session from Elder Abuse Prevention Ontario or another appropriate organization approved by the RHRA, on identification and appropriate interventions for suspected resident-resident sexual abuse, as well as understanding and identifying consent and capacity for residents with dementia.

4. The Licensee must submit audits every three months (for a period of 12 months after the issuance of this Order) to RHRA Compliance Monitoring, to confirm staff are following the Home's behaviour management policies.
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 as determined by the RHRA Compliance Monitor. These reports must be submitted by email to enforcement@rhra.ca.

Issued on February 21, 2024.