
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 Peterborough Retirement Residence
1039 Water Street
Peterborough, ON K9H 3P5

COMPLIANCE ORDER NO. 2024-T0393-90-01

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 Lifetimes Limited Partnership (the “Licensee”) operating as Peterborough Retirement Residence (the “Home”) comes into compliance and maintains compliance with the Act and Ontario Regulation 166/11 under the Act (the “Regulation”).

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)(a)(b)(c) of the Regulation – failing to develop and implement a written behaviour management strategy.
- Section 29(b) of the Regulation – failing to ensure medication is administered in accordance with the directions for use specified by the prescribing physician.
- Section 36(1)(a) of the Regulation – failing to establish a continence care program that includes measures to promote continence.
- 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(12)(b) of the Act – failing to reassess and revise plans of care when care needs have changed.
- Section 67(1) of the Act – failing to protect residents of the Home from abuse by anyone.

- Section 67(2) of the Act – failing to ensure that the Licensee and staff of the Home do not neglect residents.
- Section 67(4) of the Act – failing to ensure compliance with the Home’s zero-tolerance of abuse and neglect policy.

BRIEF SUMMARY OF FACTS

The RHRA conducted two inspections of the Home on June 21 and September 27, 2023, resulting in the findings of non-compliance on which this Order is based.

Areas of identified non-compliance included failure to provide appropriate continence care, failure to reassess residents and revise plans of care as necessary every six months or when circumstances require it, and failure to ensure that resident’s plans of care are approved by the resident or their substitute decision maker.

The Licensee failed to ensure that two resident’s medications were administered in accordance with the respective physician’s orders. While there is no evidence that harm was caused to either resident, failing to administer medications as prescribed poses an inherent risk of harm.

Additionally, the Licensee failed to follow their behaviour management policy for a resident who demonstrated responsive behaviours that posed a risk to themselves and others.

REQUIRED ACTION

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

1. Within 90 days of the issuance of this Order ensure that all staff of the Home participate in a training session with a third-party organization, approved by the RHRA, on intervention strategies for residents exhibiting behaviours that pose a risk of harm to themselves or others. Provide documentation to the RHRA demonstrating that this training has been carried out.
2. Within 60 days of this Order, conduct an audit to ensure that a behaviour management strategy in place and implemented for all residents exhibiting or known to exhibit behaviours that pose a risk of harm to themselves or others. Provide documentation to the RHRA demonstrating that this audit has been carried out.
3. Within 60 days of this Order, ensure and provide to the RHRA confirmation that all resident plans of care are approved by the resident, or resident’s substitute decision maker if applicable.
4. Ensure and demonstrate, within 30 days of the issuance of this Order, that the Director of Care of the Home has completed the RHRA Compliance Assistance Module for Assessments and Plans of Care.
5. For a period of 12 months, conduct monthly audits to ensure that:

- a. staff administering drugs are doing so in accordance with the prescriber's order;
and
 - b. appropriate checks, especially those involving drug-drug interactions, are being carried out to verify the accuracy and completeness of resident Medication Administration Records.
6. All reports and documentation demonstrating compliance with the above-mentioned required actions must be submitted by email to the RHRA's Compliance Monitor at enforcement@rhra.ca.

Issued on March 27, 2024.