

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

| Inspection Information                                |                                |
|-------------------------------------------------------|--------------------------------|
| Date of Inspection: 6/3/2025                          | Name of Inspector: Shara Bundy |
| Inspection Type: Responsive Inspection – Complaint    |                                |
| Licensee: ACC-002574 - Oxford SC Highland Kitchner LP |                                |
| Retirement Home: Highland Place                       |                                |
| License Number: T0571                                 |                                |

#### About Responsive Inspections

A responsive inspection, performed by an RHRA inspector, is a physical inspection of a licensed retirement home. A responsive inspection is conducted when RHRA receives information that the licensee may have failed to meet the standards of the *Retirement Homes Act, 2010* or its regulations (the “RHA”). An inspection being conducted does not imply that an allegation is substantiated or that a contravention of the RHA has occurred. A licensee is required to report to RHRA if they suspect harm or risk of harm to a resident. During a responsive inspection, an RHRA inspector may observe the operations of the home, interview relevant individuals, review records and other documentation, and determine whether the licensee’s management and staff have followed mandatory policies and practices designed to protect the welfare of residents.

Following a responsive 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 *RHA*. 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 *RHA*.

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 *RHA*. 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.

In addition to inspection reports, RHRA may provide information to a licensee to encourage improvements of their current practices.

If there is a serious incident or the licensee repeatedly does not meet the required standards, RHRA may take further action.

#### Concern(s)

*During a responsive inspection, an inspector will focus primarily on the concern(s) which prompted the*

*inspection and may take various actions to determine whether the licensee is compliant with the RHA in relation to the concern(s). Any findings of non-compliance identified in relation to these concerns are listed below.*

**Concern #1: CON-5379-Abuse**

**RHRA Inspector Findings**

A complaint was made to RHRA regarding the alleged emotional abuse of a resident by the management of the home. As part of the inspection in response to the allegation, the inspector reviewed the Licensee's care policies and procedures, the residency agreement the Care Home Information Package (CHIP), staff training records, the resident's care file, and interviewed relevant staff and residents. While the inspector was unable to substantiate the allegation of emotional abuse, the inspector found that the Licensee failed to update their CHIP to ensure it was accurate and revised with relevant information, as required.

**Outcome**

The Licensee has demonstrated it has taken corrective action to achieve compliance.

**Concern #2: CON-5381-Improper or Incompetent Treatment or Care**

**RHRA Inspector Findings**

A complaint was made to RHRA regarding allegations of improper or incompetent care or treatment of a resident. In response to the complaint, the inspector reviewed the Licensee's policies and procedures, the residency agreement, Care Home Information Package (CHIP), staff training documentation and the resident's health file. The inspector also interviewed relevant staff and residents. While the inspector was unable to substantiate the allegations of improper or incompetent care or treatment of the resident, the inspector found that the Licensee failed to ensure that a member of College of Physicians and Surgeons of Ontario or the College of Nurses of Ontario completed the full assessments for a resident diagnosed with dementia, that the assessment and plan of care included accurate information about the resident's mental health, and that an interdisciplinary care conference was conducted, as required. The Licensee also failed to ensure that the plan of care was approved by the resident's substitute decision maker. Additionally, the Licensee failed to ensure that the staff of the home followed their behaviour management strategy, regarding the notification of the substitute decision maker following responsive behaviours displayed the resident. Lastly, the home failed to ensure that all care staff that provide care services to the residents of the home are provided with the required training annually, as required.

**Outcome**

The Licensee has advised it has taken corrective action to achieve compliance. RHRA to confirm compliance by following up with the Licensee or by inspection.

**Additional Findings**

*During a responsive inspection, an inspector may observe areas of non-compliance that are not related to the concern(s) which prompted the inspection. 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 Concerns or Additional Findings made during the current inspection are listed below.*

#### **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. 44. (3); Full assessment of care needs**

##### **s. 44. (3); Full assessment of care needs**

44. (3) If a licensee or a staff member of a retirement home has reason to believe that a resident's care needs may include dementia care, skin and wound care, or the use of a personal assistance services device, the licensee shall ensure that the full assessment is,

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

##### **s. 44. (3), (a)**

(a) conducted by a member of a College, as defined in the Regulated Health Professions Act, 1991;

#### **The Licensee failed to comply with the O. Reg. 166/11 s. 23. (1); Behaviour management**

##### **s. 23. (1); Behaviour management**

23. (1) Every licensee of a retirement home shall develop and implement a written behaviour management strategy that includes,

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

##### **s. 23. (1), (a)**

(a) techniques to prevent and address resident behaviours that pose a risk to the resident or others in the home;

### 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.*

#### **Retirement Homes Act, 2010:**

##### **s. 54. (1); Information for residents**

54. (1) Every licensee of a retirement home shall ensure that,

**s. 54. (1), (c)**

(c) the package of information is accurate and revised as necessary;

**Ontario Regulation 166/11:**

**s. 14. (5); Staff training**

14. (5) The licensee shall ensure that the persons who are required to receive the training described in subsection 65 (5) of the Act receive that training on an ongoing basis, namely at least annually after receiving the training described in subsection (4).

**s. 44. (2); Full assessment of care needs**

44. (2) The full assessment mentioned in subsection (1) shall consider the following matters with respect to the resident:

**s. 44. (2), para. 1**

1. Physical and mental health.

**s. 47. (5); Development of plan of care**

47. (5) If an assessment of a resident indicates that the resident's care needs may include dementia care, skin and wound care or the use of a personal assistance services device, the licensee shall ensure that an interdisciplinary care conference is held as part of the development of the resident's plan of care and that the resident's plan of care takes into account the results of the care conference.

## 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<br><br><i>Shara Bundy</i> | Date<br><br>July 16, 2025 |
|--------------------------------------------------|---------------------------|