

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

Inspection Information	
Date of Inspection: July 29, 2025	Name of Inspector: Tania Buko
Inspection Type: Responsive Inspection – Mandatory Report	
Licensee: ACC-002399 - Hygate Management Services Corporation	
Retirement Home: The Hygate on Lexington	
License Number: T0608	

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-6078-Abuse-Financial**RHRA Inspector Findings**

The Licensee reported to the RHRA an incident of alleged sexual, financial and emotional abuse from an external care provider and agency towards a resident in the home. The Inspector interviewed relevant individuals and reviewed records of the incident, the Licensee's related policies, staff training records and resident charts and found several non-compliances. Firstly, the Licensee failed to immediately investigate the allegations of sexual, financial and emotional abuse. Secondly, the Licensee failed to immediately report the incidents of alleged abuse to the Registrar of the RHRA as required. Thirdly, the Licensee failed to ensure their zero tolerance of abuse and neglect policy was aligned with the legislation in several areas including the definitions of neglect, sexual, verbal, emotional, and physical abuse, a program to prevent abuse and neglect, specifically hiring practices. new staff training on the relationship between power imbalances between staff and residents and the potential for abuse/neglect by those in a position of trust, power and responsibility for resident care and on situations that may lead to abuse and neglect and how to avoid such situations, procedures to deal with persons who have abused or neglected residents, and consequences for those who abuse or neglect residents other than staff, family and residents. Fourthly, the Licensee failed to ensure all external care providers who provide care services to residents in the home are provided with information with respect to the licensee's policy to promote zero tolerance for abuse and neglect of residents. Fifthly, the Licensee was unable to demonstrate the general manager of the home completed training in a compliant zero tolerance of abuse and neglect policy. Lastly, the evidence showed a resident's plan of care was not fully compliant as it lacked directions to staff who provide assistance with continence care and ambulation/transfers, and the resident's needs related to their high risk of falls and strategies to mitigate their falls were not documented.

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.

Concern #2: CON-6483-Behaviour Management**RHRA Inspector Findings**

During the course of the inspection, the Inspector discovered the resident has behaviours that pose a risk to others in the home. The Licensee was unable to demonstrate there were developed, implemented and documented strategies to prevent and address the behaviours. The Licensee failed to fully follow the directives of their Behaviour Management Policy.

Outcome

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

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. 74.; Licensee's duty to respond to incidents of wrongdoing

s. 74.; Licensee's duty to respond to incidents of wrongdoing

74. Every licensee of a retirement home shall ensure that,

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

s. 74. (a)

(a) every alleged, suspected or witnessed incident of the following of which the licensee knows or that is reported to the licensee is immediately investigated:

s. 74. (a), 1.

(i) abuse of a resident of the home by anyone,

The Licensee failed to comply with the RHA s. 75. (1); Reporting certain matters to Registrar

s. 75. (1); Reporting certain matters to Registrar

75. (1) A person who has reasonable grounds to suspect that any of the following has occurred or may occur shall immediately report the suspicion and the information upon which it is based to the Registrar:

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

s. 75. (1), para. 2

2. Abuse of a resident by anyone or neglect of a resident by the licensee or the staff of the retirement home of the resident if it results in harm or a risk of harm to the resident.

The Licensee failed to comply with the O. Reg. 166/11 s. 14.1; Information for external care providers

s. 14.1; Information for external care providers

14.1 The licensee shall ensure that as soon as is practical after the licensee is made aware that an external care provider is or will be providing care services to a resident in the retirement home, the external care provider is provided with information with respect to the home's policy to promote zero tolerance for abuse and neglect of residents.

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. 62. (4); Contents of plan

62. (4) The licensee of a retirement home shall ensure that there is a written plan of care for each resident of the home that sets out,

s. 62. (4), (b)

(b) the planned care services for the resident that the licensee will provide, including,

s. 62. (4), (b), 3.

(iii) clear directions to the licensee's staff who provide direct care to the resident;

s. 62. (6); Assessment of resident

62. (6) The licensee shall ensure that the plan of care is based on an assessment of the resident and the needs and preferences of the resident.

s. 65. (2); Training

65. (2) Every licensee of a retirement home shall ensure that no staff work in the home unless they have received training in,

s. 65. (2), (b)

(b) the licensee's policy mentioned in subsection 67 (4) to promote zero tolerance of abuse and neglect of residents;

s. 67. (5); Contents

67. (5) At a minimum, the policy to promote zero tolerance of abuse and neglect of residents shall,

s. 67. (5), (a)

(a) clearly set out what constitutes abuse and neglect;

s. 67. (5); Contents

67. (5) At a minimum, the policy to promote zero tolerance of abuse and neglect of residents shall,

s. 67. (5), (c)

(c) provide for a program for preventing abuse and neglect;

s. 67. (5); Contents

67. (5) At a minimum, the policy to promote zero tolerance of abuse and neglect of residents shall,

s. 67. (5), (f)

(f) set out the consequences for those who abuse or neglect residents;

Ontario Regulation 166/11:

s. 15. (1); Policy of zero tolerance of abuse and neglect

15. (1) The program for preventing abuse and neglect described in clause 67 (5) (c) of the Act shall entail training and retraining requirements for all staff of the retirement home, including,

s. 15. (1), (a)

(a) training on the relationship between power imbalances between staff and residents and the potential for abuse and neglect by those in a position of trust, power and responsibility for resident care;

s. 15. (1); Policy of zero tolerance of abuse and neglect

15. (1) The program for preventing abuse and neglect described in clause 67 (5) (c) of the Act shall entail training and retraining requirements for all staff of the retirement home, including,

s. 15. (1), (b)

(b) situations that may lead to abuse and neglect and how to avoid such situations.

s. 15. (3); Policy of zero tolerance of abuse and neglect

15. (3) The policy to promote zero tolerance of abuse and neglect of residents described in subsection 67 (4) of the Act shall,

s. 15. (3), (b)

(b) contain procedures and interventions to deal with persons who have abused or neglected or allegedly abused or neglected residents, as appropriate;

s. 23. (1); Behaviour management

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

s. 23. (1), (a)

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

s. 23. (1); Behaviour management

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

s. 23. (1), (b)

(b) strategies for interventions to prevent and address resident behaviours that pose a risk to the resident or others in the home;

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	Date
<i>Tania Buko</i>	September 10, 2025