

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

Inspection Information	
Date of Inspection: August 19, 2025	Name of Inspector: Diana Teng
Inspection Type: Routine Inspection	
Licensee: ACC-008686 - 1000616364 Ontario Inc.	
Retirement Home: Shorthills Villa Retirement Community	
License Number: S01215	

About Routine Inspections

A routine inspection, performed by an RHRA inspector, is a physical inspection of a licensed retirement home. During a routine inspection, an RHRA inspector will walk through the home, speak to residents and staff, observe care services and conditions in the home, and ensure the licensee's management and staff follow mandatory policies and practices designed to protect the welfare of residents.

Following a routine 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 a final inspection report, incorporating any response from the licensee with their plans to meet the standards of the *RHA*.

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

If the licensee repeatedly does not meet the required standards, RHRA may take further action.

Focus Areas

During a routine inspection, an inspector will focus primarily on a set number of areas which have been identified as related to the health, safety and wellbeing of resident, and may take various actions to determine whether the licensee is compliant with the RHA in relating to the areas. The areas listed in this section are ones which an inspector has identified as non-compliant.

Focus Area #1: Behaviour Management

RHRA Inspector Findings

As part of a routine inspection, the inspector reviewed a sample of resident care files, the Licensee's policies, and interviewed staff. There were two residents within the dementia unit that were identified to have exit seeking behaviours that posed a risk to themselves. The inspector found that the Licensee

was unable to demonstrate that they had followed their behaviour management policy, as there was a lack of sufficient evidence to demonstrate interventions and strategies to address these exit seeking behaviours, as required.

Outcome

The Licensee must take corrective action to achieve compliance.

Focus Area #2: Complaints

RHRA Inspector Findings

As part of a routine inspection, the inspector reviewed the Licensee's complaint log and complaints policy. The inspector found that there was a lack of documentation to support that the home fully complied with the Licensee's complaints policy in relation to final resolution of the complaint, response to complainant, quarterly analysis, and improvements made after complaints. The inspector confirmed that the Licensee failed to comply with the home's complaint policy, as written records of complaints did not include all the required elements.

Outcome

The Licensee must take corrective action to achieve compliance.

Focus Area #3: Resident Record, Assessment, Plan of Care

RHRA Inspector Findings

As part of the routine inspection, the inspector reviewed a sample of residents' plans of care. There is a requirement under the Retirement Homes Act that resident plans of care be updated as care needs change or minimally every 6 months. The inspector found plans of care for three residents were not updated every six months. The Licensee failed to ensure the plans revise and updated in compliance with the legislation.

Outcome

The Licensee must take corrective action to achieve compliance.

Focus Area #4: Staff Training

RHRA Inspector Findings

As part of the routine inspection, the inspector reviewed a sample of relevant staff training in relation medication administration. One staff member was found to have expired annual training related to medication administration. The Licensee failed to train the staff in medication administration on an annual basis as required.

Outcome

The Licensee must take corrective action to achieve compliance.

Additional Findings

During a routine inspection, an inspector may observe areas of non-compliance that are not related to the standard focus areas. 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 Focus Areas or Additional Findings made during the current inspection are listed below.

The Licensee failed to comply with the RHA s. 62. (12); Reassessment and revision

s. 62. (12); Reassessment and revision

62. (12) The licensee shall ensure that the resident is reassessed and the plan of care reviewed and revised at least every six months and at any other time if, in the opinion of the licensee or the resident,

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), (b)

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

The Licensee failed to comply with the O. Reg. 166/11 s. 59. (2); Procedure for complaints to licensee

s. 59. (2); Procedure for complaints to licensee

59. (2) The licensee shall ensure that a written record is kept in the retirement home that includes,

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

s. 59. (2), (d)

(d) the final resolution, if any, of the complaint;

s. 59. (2), (e)

(e) every date on which any response was provided to the complainant and a description of the response;

s. 59. (2), (f)

(f) any response made in turn by the complainant.

The Licensee failed to comply with the O. Reg. 166/11 s. 59. (3); Procedure for complaints to licensee

s. 59. (3); Procedure for complaints to licensee

59. (3) The licensee shall ensure that,

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

s. 59. (3), (a)

(a) the written record is reviewed and analyzed for trends at least quarterly;

s. 59. (3), (b)

(b) the results of the review and analysis are taken into account in determining what improvements are required in the retirement home;

s. 59. (3), (c)

(c) a written record is kept of each review and of the improvements made in response.

The Licensee failed to comply with the O. Reg. 166/11 s. 14. (5); Staff training

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).

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.


Not Applicable

NOTICE

The Licensee may provide written comments regarding matters that are addressed in the above Draft Inspection Report. Comments must be submitted within 10 business days to:

Attention: Diana Teng
Retirement Homes Regulatory Authority
55 York St, Suite 700
Toronto, ON M5J 1R7
Diana.Teng@rhra.ca
Fax: 1-855-630-3775

The Licensee's written comments will be considered in the preparation of a Final Inspection Report. For matters where corrective action is required, including action relating to a written request for compliance, the Licensee should set out any proposed plans for achieving compliance. Pursuant to section 77(14) of the RHA, if an inspection is conducted for the purpose of determining whether the Licensee of a retirement home is in compliance with the requirements of the RHA, a Final Inspection Report must be given to the Licensee, the Registrar of the Retirement Homes Regulatory Authority and the Home's Residents' Council, if any.

Signature of Inspector 	Date September 3, 2025
---	-------------------------------