

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

| Inspection Information | |
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| Date of Inspection: November 4, 2025 | Name of Inspector: Kate Fish |
| Inspection Type: Responsive Inspection – Mandatory Report | |
| Licensee: ACC-002486 - Sienna-Sabra LP | |
| Retirement Home: Aspira Douglas Crossing Retirement Living | |
| License Number: T0621 | |

| About Responsive Inspections |
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| <p>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 <i>Retirement Homes Act, 2010</i> or its regulations (the “<i>RHA</i>”). 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.</p> <p>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 <i>RHA</i>. 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 <i>RHA</i>.</p> <p>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 <i>RHA</i>. 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.</p> <p>In addition to inspection reports, RHRA may provide information to a licensee to encourage improvements of their current practices.</p> <p>If there is a serious incident or the licensee repeatedly does not meet the required standards, RHRA may take further action.</p> |

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-7248-Improper or Incompetent Treatment or Care**RHRA Inspector Findings**

An inspection was conducted after the home self-reported an incident of improper or incompetent treatment of a resident. In response to the concern as part of the inspection, relevant documents and policies were reviewed and interviews were conducted with relevant individuals. The inspector found that the home received a complaint regarding improper care of a resident and failed to meet the following complaint requirements: documenting steps taken to resolve a complaint, documenting responses (if any) from the complainant, communicating with the complainant that a resolution was not possible within 10 days, and documenting the outcome of the complaint investigation. In addition, after learning about an incident of improper care the home failed to assess the resident, which is outlined as a requirement in their Zero Tolerance of Abuse policy. Lastly, while reviewing the resident's care file the inspector noted changes in the resident's condition. There is a requirement that a resident be reassessed, and a new plan of care established when there is a change in condition. The home failed to meet this requirement.

Outcome

The Licensee provided information indicating that corrective action was being taken, however, further action must be taken to achieve compliance with all areas outlined in the finding. RHRA to confirm compliance by following up with the Licensee or by inspection.

Concern #2: CON-7250-Administrative issues**RHRA Inspector Findings**

An inspection was conducted after the home self-reported an incident of improper or incompetent treatment of a resident. There is a requirement that alleged or confirmed improper or incompetent treatment or care of a resident that results in harm or a risk of harm to the resident be reported immediately. The home failed to meet this requirement.

Outcome

The Licensee provided information indicating that corrective action was being taken, however, further action must be taken to achieve compliance with all areas outlined in the finding. 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. 75. (1); Reporting certain matters to Registrar

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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. 1

1. Improper or incompetent treatment or care of a resident that resulted in harm or a risk of harm to the resident.

The Licensee failed to comply with the RHA s. 67. (4); Policy to promote zero tolerance

s. 67. (4); Policy to promote zero tolerance

67. (4) Without in any way restricting the generality of the duties described in subsections (1) and (2), the licensee shall ensure that there is a written policy to promote zero tolerance of abuse and neglect of residents and shall ensure that the policy is complied with.

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,

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

s. 62. (12), (b)

(b) the resident's care needs change or the care services set out in the plan are no longer necessary;

The Licensee failed to comply with the O. Reg. 166/11 s. 59. (1); Procedure for complaints to licensee

s. 59. (1); Procedure for complaints to licensee

59. (1) Every licensee of a retirement home shall ensure that every written or verbal complaint made to the licensee or a staff member concerning the care of a resident or operation of the home is dealt with as follows:

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

s. 59. (1), para. 3

3. For those complaints that cannot be investigated and resolved within 10 business days, an acknowledgement of receipt of the complaint shall be provided within 10 business days of receipt of the complaint, including the date by which the complainant can reasonably expect a resolution, and a follow-up response that complies with paragraph 4 shall be provided as soon as possible in the circumstances.

s. 59. (1), para. 4

4. A response shall be made to the person who made the complaint, indicating,

s. 59. (1), para. 4, 1.

i. what the licensee has done to resolve the complaint,

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), (c)

(c) the type of action taken to resolve the complaint, including the date of the action, time frames for actions to be taken and any follow-up action required;

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.

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 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>.

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| Signature of Inspector | Date |
| <i>Kate Fish</i> | November 21, 2025 |