

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

Inspection Information	
Date of Inspection: April 22, 2026	Name of Inspector: Jennifer Sarkis
Inspection Type: Responsive Inspection – Mandatory Report	
Licensee: ACC-002534 - DTOC III Long Term Care LP	
Retirement Home: The Wellington	
License Number: S0524	

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-9443-Improper or Incompetent Treatment or Care**RHRA Inspector Findings**

A report was made to RHRA which included multiple allegations relating to the care and safety of a resident. As part of the inspection in response to the report, the inspector reviewed the Licensee's policies, staff training records, internal documents, records relating to the resident, and interviewed staff and the resident's substitute decision maker. The inspector found several areas of non-compliance. The resident did not receive an assessment every 6 months and their plan of care was not approved by the substitute decision maker. Additionally, the Licensee failed to conduct a care conference as required, based on the residents responsive behaviours. Furthermore, the Licensee failed to ensure an annual falls analysis was conducted as outlined in their policy. The Licensee did not ensure their falls policy was complied with fully and assessments and plans of care were completed as required.

Outcome

The Licensee submitted a plan to achieve compliance by August 30, 2026. RHRA to confirm compliance by following up with the Licensee or by inspection.

Concern #2: CON-9445-Complaints procedure**RHRA Inspector Findings**

A report was made to RHRA which included multiple allegations relating to the care and safety of a resident. As part of the inspection in response to the report, the inspector reviewed the Licensee's policies, complaint log, records relating to the resident, and interviewed the staff and the resident's substitute decision maker. The inspector confirmed that the Licensee failed to follow their policy and ensure they completed a quarterly analysis of their complaints.

Outcome

The Licensee submitted a plan to achieve compliance by July 30, 2026. 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.

Additional Finding#1: CON-9703-Administrative issues**RHRA Inspector Findings**

While conducting this inspection, the inspector made a finding unrelated to the purpose of the inspection. The inspector found evidence through documentation in the home and interviews with staff and the substitute-decision-maker, that the Licensee advised the resident's substitute-decision-maker

they could no longer meet the resident's care needs. The Licensee issued a letter to terminate the resident's lease, without providing alternatives to living in the home. The Licensee failed to ensure they provided options of alternatives to living in the home to a resident and their substitute-decision-maker, when they made the decision to terminate a lease.

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.

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 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. 22. (4); Risk of falls

s. 22. (4); Risk of falls

22. (4) Every licensee of a retirement home shall keep a written record of all falls for which the licensee is required to ensure documentation under subsection (2) or (3) and that occur in each year, evaluate the risk of falls in the home at least annually and keep a written record of each evaluation.

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

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.

The Licensee failed to comply with the O. Reg. 166/11 s. 49. (1); Alternatives to a retirement home

s. 49. (1); Alternatives to a retirement home

49. (1) For the purposes of subsection 63 (3) of the Act, the licensee of a retirement home shall provide a resident with information about alternatives to living in the home if,

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

s. 49. (1), (b)

(b) the resident's care needs cannot be met at 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.

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>.

Signature of Inspector	Date
<i>Jennifer Sarkis</i>	June 4, 2026