

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

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| <b>Inspection Information</b>                                 |                                            |
| <b>Date of Inspection:</b> June 17, 2026                      | <b>Name of Inspector:</b> Michele Davidson |
| <b>Inspection Type:</b> Routine Inspection                    |                                            |
| <b>Licensee:</b> ACC-008266 - The Residences on Yonge, Aurora |                                            |
| <b>Retirement Home:</b> The Residences on Yonge, Aurora       |                                            |
| <b>License Number:</b> T01190                                 |                                            |

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| <b>About Routine Inspections</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <p>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.</p> <p>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 <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 the licensee repeatedly does not meet the required standards, RHRA may take further action.</p> |

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| <b>Focus Areas</b>                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| <p><i>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.</i></p> <p><b>Focus Area #1: Emergency Plan</b></p> |

**RHRA Inspector Findings**

A routine inspection of the retirement home included a review of the Licensee's emergency response procedures and related documentation. Based on the documented evidence available at the time of inspection, the Licensee did not demonstrate that the required tests of prescribed emergency situations had been completed within the previous 12 months, as required by the Regulation. Specifically, records reviewed did not provide evidence that drills for loss of essential services, missing resident, medical emergency, epidemic and pandemic, and violent outburst emergency situations were tested at the required frequency.

**Outcome**

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

**Focus Area #2: Resident Record, Assessment, Plan of Care****RHRA Inspector Findings**

During the inspection, a random selection of resident charts was reviewed. Based on the documented evidence available at the time of inspection, the Licensee did not demonstrate that interdisciplinary care conferences had been completed for residents whose assessed care needs required interdisciplinary review and integration into their plans of care. The absence of documented interdisciplinary care conferences represents an omission in the Licensee's records and as a result, the Licensee did not demonstrate compliance with the applicable regulatory requirements.

**Outcome**

The Licensee submitted a plan to achieve compliance by Friday, July 31, 2026. RHRA to confirm compliance by following up with the Licensee or by inspection.

**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 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.

### **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. 65. (5); Additional training for direct care staff**

65. (5) The licensee shall ensure that all staff who provide care services to residents receive training in the following matters and at the times required by the regulations, as a condition of continuing to have contact with residents, in addition to the other training that they are required to receive under this section:

##### **s. 65. (5), para. 2**

2. Mental health issues, including caring for persons with dementia.

#### **s. 65. (5); Additional training for direct care staff**

65. (5) The licensee shall ensure that all staff who provide care services to residents receive training in the following matters and at the times required by the regulations, as a condition of continuing to have contact with residents, in addition to the other training that they are required to receive under this section:

##### **s. 65. (5), para. 4**

4. Ways to minimize the need of residents for personal assistance services devices and if a resident needs such a device, the ways of using it in accordance with its manufacturer's operating instructions, this Act and the regulations.

### **Ontario Regulation 166/11:**

#### **s. 23. (2); Behaviour management**

23. (2) The licensee shall ensure that all staff who provide care services to residents are advised at the beginning of every shift of each resident whose behaviours require heightened monitoring because those behaviours pose a risk to the resident or others in the home.

#### **s. 24. (5); Emergency plan, general**

24. (5) The licensee shall,

##### **s. 24. (5), (a)**

(a) on an annual basis at least, test the emergency plan, including arrangements with community agencies, partner facilities and resources that will be involved in responding to an emergency, related to,

##### **s. 24. (5), (a), 1.**

(i) the loss of essential services,

#### **s. 24. (5); Emergency plan, general**

24. (5) The licensee shall,

##### **s. 24. (5), (a)**

(a) on an annual basis at least, test the emergency plan, including arrangements with community agencies, partner facilities and resources that will be involved in responding to an emergency, related to,

##### **s. 24. (5), (a), 2.**

(ii) situations involving a missing resident,

**s. 24. (5); Emergency plan, general**

24. (5) The licensee shall,

**s. 24. (5), (a)**

(a) on an annual basis at least, test the emergency plan, including arrangements with community agencies, partner facilities and resources that will be involved in responding to an emergency, related to,

**s. 24. (5), (a), 3.**

(iii) medical emergencies,

**s. 24. (5); Emergency plan, general**

24. (5) The licensee shall,

**s. 24. (5), (a)**

(a) on an annual basis at least, test the emergency plan, including arrangements with community agencies, partner facilities and resources that will be involved in responding to an emergency, related to,

**s. 24. (5), (a), 3.1**

(iii.1) epidemics and pandemics,

**s. 24. (5); Emergency plan, general**

24. (5) The licensee shall,

**s. 24. (5), (a)**

(a) on an annual basis at least, test the emergency plan, including arrangements with community agencies, partner facilities and resources that will be involved in responding to an emergency, related to,

**s. 24. (5), (a), 4.**

(iv) violent outbursts;

## 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         |
| M. Davidson            | July 9, 2026 |