

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

Inspection Information	
Date of Inspection: July 2, 2026	Name of Inspector: Sarah Bradshaw
Inspection Type: Routine Inspection	
Licensee: ACC-009966 - Stirling Towers Retirement Residence Inc.	
Retirement Home: Stirling Towers Retirement Home	
License Number: N0501	

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 <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>. 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. 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
<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> Focus Area #1: Emergency Plan

RHRA Inspector Findings

The inspector reviewed the Licensee's records of testing for their emergency plans and found that the testing for a planned evacuation did not have a written record. The Licensee failed to ensure that a written record of the testing and any changes made to the emergency plan were documented as required. Additionally, the inspector reviewed the Licensee's emergency supplies and found that there had not been any regular testing as required.

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.

Focus Area #2: Medications**RHRA Inspector Findings**

During the inspection, the inspector observed staff leaving medications unattended during a medication pass. The Licensee failed to ensure that medications remained locked and secured as required.

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.

Focus Area #3: Other Requirements

Agency Binder - binder reviewed, ZTA process discussed, suggestions provided.

RHRA Inspector Findings

During the inspection, it was found that the Licensee engages an external care provider for approval of plans of care, however, they have not been provided with information on the home's policy to promote zero tolerance of abuse and neglect of residents. The Licensee failed to ensure the external care provider was provided with the information required.

Outcome

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

Focus Area #4: Resident Record, Assessment, Plan of Care**RHRA Inspector Findings**

The inspector reviewed a sample of resident care files and found that 1 resident did not have their plans of care revised appropriately. The inspector confirmed that the Licensee failed to ensure that the resident was reassessed and that the plan of care was reviewed and revised as the resident's care needs changed as required.

Outcome

The Licensee submitted a plan to achieve compliance by Fri Jul 24 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 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. 30.; Storage of drugs or other substances

s. 30.; Storage of drugs or other substances

30. If drugs or other substances are stored in a retirement home on behalf of a resident, the licensee of the home shall ensure that,

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

s. 30. (a)

(a) the drugs or other substances are stored in an area or a medication cart that,

s. 30. (a), 2.

(ii) is locked and secure,

The Licensee failed to comply with the O. Reg. 166/11 s. 24. (5); Emergency plan, general

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

24. (5) The licensee shall,

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

s. 24. (5), (c)

(c) keep a written record of the testing of the emergency plan and planned evacuations and of any changes made to improve the emergency plan.

The Licensee failed to comply with the O. Reg. 166/11 s. 25. (3); Emergency plan, retirement home with more than 10 residents

s. 25. (3); Emergency plan, retirement home with more than 10 residents

25. (3) The licensee shall ensure that the emergency plan provides for the following:

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

s. 25. (3), para. 3

3. Resources, supplies and equipment vital for the emergency response being set aside and readily available at the retirement home and regular testing of all such resources, supplies and equipment to ensure that they are in working order.

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.

Ontario Regulation 166/11:**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.

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), (a.1)

(a.1) contain an explanation of the prohibition on borrowing, receiving or holding a resident's money or other property, as set out in section 57.1;

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 <i>Sarah Bradshaw</i>	Date July 21, 2026
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