RHRA Retirement Homes Regulatory Authority

55 York Street, Suite 700
Toronto, ON. M5J 1R7

COMPLIANCE ORDER SUMMARY
TO BE MADE AVAILABLE IN HOME

Pursuant to the *Retirement Homes Act, 2010* S.O. 2010, Chapter 11, section 90.

The Shores of Port Credit Partnership
o/a The Shores of Port Credit
280 Lakeshore Road W.
Mississauga, ON L5H 0A5

COMPLIANCE ORDER NO. 2026-T0607-90-01

Under section 90 of the *Retirement Homes Act, 2010* (the "Act"), if the Registrar of the Retirement Homes Regulatory Authority (the "Registrar" and the "RHRA", respectively) believes on reasonable grounds that a licensee has contravened a requirement under the Act the Registrar may serve an order on a licensee ordering it to refrain from doing something, or to do something, for the purpose of ending the contravention and achieving compliance, ensuring that the contravention is not repeated, and that compliance is maintained.

The Registrar issues this Compliance Order (the "Order") to require The Shores of Port Credit Partnership (the "Licensee") operating as The Shores of Port Credit (the "Home") to come into and maintain compliance with the Act and O. Reg. 166/11: General (the "Regulation").

CONTRAVENTION

The Registrar has reasonable grounds to believe that the Licensee contravened the following section of the Act:

- Section 62(12)(b) of the Act: The Licensee did not ensure that the resident was reassessed, and the plan of care was reviewed and revised at least every six months and at any other time if the resident's care needs changed.
- Section 67(2) of the Act: The Licensee did not ensure that staff of the Home do not neglect the residents.
- Section 23(1)(a)-(c) of the Regulation: The Licensee did not ensure that there was a written behaviour management strategy that included techniques to prevent and address resident behaviours that pose a risk to the resident or others in the Home, strategies for interventions to prevent and address those behaviours, and strategies for monitoring residents who have demonstrated such behaviours.

BRIEF SUMMARY OF FACTS

Two inspections were conducted at the Home on March 4, 2026, and May 25, 2026, following concerns related to delayed responses to resident care needs. The inspections found that staff failed to respond promptly to a resident's emergency call following a fall and did not appropriately assess, escalate, or address another resident's ongoing unmet oral care needs, contrary to the Home's policies and procedures.

REQUIRED ACTION

Pursuant to section 90 of the Act, the Registrar orders the Licensee to immediately comply with the following:

1. Within 60 days of this Order, demonstrate there is a protocol in place for staff to identify, respond to, and escalate incidents of refusal of care. The Licensee must also ensure that all staff are trained in the protocol and understand their duty to remain attentive to residents' care needs.
2. Within 90 days of this Order, conduct an audit of all resident records to verify that residents who refuse care have individualized interventions documented in their records and that such interventions have been implemented in accordance with the residents' assessed needs and plan of care. Provide the results of the audit and evidence of any corrective action taken to the RHRA.
3. For a period of six months, conduct monthly audits of the Home's call bell response times and associated documentation to verify compliance with the Licensee's call bell response procedure. Provide the results of the audits and a summary of any corrective actions taken to the RHRA every two months.

.

Issued on July 29, 2026.