

FINAL INSPECTION REPORT

Under the *Retirement Homes Act, 2010*

Inspection Information	
Date of Inspection: June 22, 2026	Name of Inspector: Melanie Leslie
Inspection Type: Responsive Inspection – Complaint	
Licensee: ACC-002941 - Casa Dolce Casa Inc.	
Retirement Home: Casa Dolce Casa	
License Number: T0475	

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-10139-Improper or Incompetent Treatment or Care - Continence Care

RHRA Inspector Findings

A complaint was made to the RHRA regarding improper or incompetent treatment or care relating to continence care. The inspector reviewed resident health records and documentation and found that staff were not providing continence assistance with the frequency set out in the resident's plan of care. The Licensee failed to ensure that all staff complied with the resident's plan of care.

Outcome

The Licensee must take corrective action to achieve compliance.

Concern #2: CON-10141-Improper or Incompetent Treatment or Care - Ambulation

RHRA Inspector Findings

A complaint was received by the RHRA regarding concerns of improper or incompetent treatment or care relating to ambulation. The inspector interviewed relevant individuals, reviewed resident health records, and observed CCTV footage and found that staff were not using safe techniques when assisting the resident with ambulation. Further, the home did not update the resident's plan of care to reflect the resident's current needs. The Licensee failed to ensure that all staff acted in compliance with the plan of care.

Outcome

The Licensee must take corrective action to achieve compliance.

Concern #3: CON-10150-Improper or Incompetent Treatment or Care - Feeding

RHRA Inspector Findings

A complaint was made to the RHRA of improper or incompetent treatment or care relating to feeding assistance. The inspector interviewed relevant individuals and reviewed resident health files and found that the home did not integrate an external care partner's assessment within the plan of care to ensure collaborative aspects of care. The Licensee failed to ensure the resident's plan of care was in compliance with the legislation.

Outcome

The Licensee must take corrective action to achieve compliance.

Concern #4: CON-10151-Improper or Incompetent Treatment or Care - Behaviour Management

RHRA Inspector Findings

A complaint was received by the RHRA regarding alleged concerns of improper care relating to resident behaviours. The inspector interviewed staff and reviewed resident health records and found that the resident's plan of care or other document did not include previously exhibited behaviours which posed a risk to others in the home, or techniques and strategies to address those behaviours. The Licensee had not implemented techniques, strategies and interventions for staff providing direct care as set forth in their strategy.

Outcome

The Licensee must take corrective action to achieve compliance.

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. 62. (8); Integration of assessments and care**s. 62. (8); Integration of assessments and care**

62. (8) The licensee shall ensure that there are protocols to promote the collaboration between the staff, external care providers and others involved in the different aspects of care of the resident,

Specifically, the Licensee failed to comply with the following subsection(s):**s. 62. (8), (a)**

(a) in the assessment of the resident so that their assessments are integrated and are consistent with and complement each other;

The Licensee failed to comply with the RHA s. 62. (6); Assessment of resident**s. 62. (6); Assessment of resident**

62. (6) The licensee shall ensure that the plan of care is based on an assessment of the resident and the needs and preferences of the resident.

The Licensee failed to comply with the RHA s. 62. (10); Compliance with plan**s. 62. (10); Compliance with plan**

62. (10) The licensee shall ensure that the care services that the licensee provides to the resident are set out in the plan of care and are provided to the resident in accordance with the plan and the prescribed requirements, if any.

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. 23. (1); Behaviour management

s. 23. (1); Behaviour management

23. (1) Every licensee of a retirement home shall develop and implement a written behaviour management strategy that includes,

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

s. 23. (1), (a)

(a) techniques to prevent and address resident behaviours that pose a risk to the resident or others in the home;

s. 23. (1), (b)

(b) strategies for interventions to prevent and address resident behaviours that pose a risk to the resident or others in the home;

The Licensee failed to comply with the O. Reg. 166/11 s. 39.; Assistance with ambulation

s. 39.; Assistance with ambulation

39. If one of the care services that the licensee or the staff of a retirement home provide to a resident of the home is assistance with ambulation, the licensee shall ensure that,

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

s. 39. (a)

(a) staff use safe transferring and positioning devices or techniques when assisting the resident;

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 <i>Melanie Leslie</i>	Date September 2, 2026
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