

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

Inspection Information	
Date of Inspection: August 27, 2026	Name of Inspector: Antonette Whitley-Scott
Inspection Type: Responsive Inspection – Mandatory Report	
Licensee: ACC-002624 - WC Operating (Ontario-2) LP	
Retirement Home: Bough Beeches Place	
License Number: T0263	

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-11383-Improper or Incompetent Treatment or Care

RHRA Inspector Findings

A report was made to RHRA that included allegations relating to the care and safety of a resident. The Inspector reviewed the resident's care file, conducted interviews with staff and residents, and reviewed call bell logs. The Inspector found that, on multiple occasions, the resident activated the call bell requesting assistance with toileting; however, staff did not respond to the call bell to provide the requested assistance. The resident's plan of care identifies that the resident requires assistance with toileting. The Licensee therefore failed to ensure that the care services identified in the resident's plan of care were provided in accordance with the plan of care and prescribed requirements. In addition, the Licensee failed to ensure that the resident received care in accordance with its Continence Care Program, which includes measures to promote continence, toileting programs, and strategies to maximize the resident's independence, comfort, and dignity.

Outcome

The Licensee submitted a plan to achieve compliance by Monday September 21, 2026. RHRA to confirm compliance by following up with the Licensee or by inspection.

Concern #2: CON-11384-Administrative issues

RHRA Inspector Findings

A report was made to RHRA that included allegations relating to the care and safety of a resident. The Inspector reviewed several residents' care files, conducted interviews with staff and residents, and reviewed the Licensee's complaints log. The Inspector noted that the resident's daughter had made a complaint to the home. The complaint was not resolved within 10 business days of receipt, nor did the Licensee provide the complainant with an acknowledgement within 10 business days indicating the date by which a resolution could reasonably be expected, followed by a response as soon as possible in the circumstances. In addition, the written record of the complaint was incomplete, as it did not include the dates and descriptions of responses provided to the complainant or any subsequent responses made by the complainant. Therefore, the Licensee failed to ensure that the complaint was dealt with and documented in accordance with the requirements.

Outcome

The Licensee submitted a plan to achieve compliance by Monday September 21, 2026. RHRA to confirm compliance by following up with the Licensee or by inspection.

Concern #3: CON-11385-Abuse

RHRA Inspector Findings

A report was made to the RHRA regarding an alleged incident of staff-to-resident abuse. In response, the inspector interviewed relevant staff and witnesses, reviewed the residents' care files, and examined the Licensee's Zero Tolerance of Abuse Policy and behaviour management strategy. The inspection found that a resident had a history of responsive behaviours that posed a risk to others; however, the resident had not been reassessed, the behaviours were not documented in the plan of care, and no individualized strategies were implemented. Consequently, the inspector found that the Licensee failed to ensure the resident was reassessed and that the plan of care was reviewed and revised despite changes in the resident's care needs, and further failed to ensure that techniques and strategies were

created to prevent and address resident behaviours that posed a risk to the resident or others in the home.

Outcome

The Licensee has demonstrated it has taken 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. (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. 36. (1); Continence care

s. 36. (1); Continence care

36. (1) If one of the care services that the licensee or the staff of a retirement home provide to a resident of the home is continence care, the licensee shall establish a continence care program that includes,

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

s. 36. (1), (a)

(a) measures to promote continence;

s. 36. (1), (c)

(c) toileting programs;

s. 36. (1), (d)

(d) strategies to maximize the resident's independence, comfort and dignity, including the use of equipment, supplies, devices and assistive aids.

The Licensee failed to comply with the O. Reg. 166/11 s. 59. (1); Procedure for complaints to licensee

s. 59. (1); Procedure for complaints to licensee

59. (1) Every licensee of a retirement home shall ensure that every written or verbal complaint made to the licensee or a staff member concerning the care of a resident or operation of the home is dealt with as follows:

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

s. 59. (1), para. 2

2. The complaint shall be resolved if possible, and a response that complies with paragraph 4 provided within 10 business days of the receipt of the complaint.

s. 59. (1), para. 3

3. For those complaints that cannot be investigated and resolved within 10 business days, an acknowledgement of receipt of the complaint shall be provided within 10 business days of receipt of the complaint, including the date by which the complainant can reasonably expect a resolution, and a follow-up response that complies with paragraph 4 shall be provided as soon as possible in the circumstances.

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;

s. 23. (1), (c)

(c) strategies for monitoring residents that have demonstrated behaviours that pose a risk to the resident or others in 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>Antonette Whitley-Scott</i>	September 30, 2026