

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

Inspection Information	
<b>Date of Inspection:</b> January 13, 2022	<b>Name of Inspector:</b> Cindy Ma
<b>Inspection Type:</b> Routine Inspection	
<b>Licensee:</b> Bayfield House Retirement Lodge Inc. / 5 Beck Boulevard, Penetanguishene, ON L9M 1C1 (the "Licensee")	
<b>Retirement Home:</b> Bayfield House Retirement Lodge / 5 Beck Boulevard, Penetanguishene, ON L9M 1C1 (the "home")	
<b>Licence Number:</b> N0124	

Purpose of Inspection
The RHRA conducts routine inspections as set out in section 77(3) of the <i>Retirement Homes Act, 2010</i> (the "RHA").

NON-COMPLIANCE
<p><b>1. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 65; Training.</b> <b>The Licensee failed to comply with O. Reg. 166/11, s. 14; Staff training.</b></p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p><b>65. (2)</b> Every licensee of a retirement home shall ensure that no staff work in the home unless they have received training in,</p> <ul style="list-style-type: none"> <li>(a) the Residents' Bill of Rights;</li> <li>(b) the licensee's policy mentioned in subsection 67 (4) to promote zero tolerance of abuse and neglect of residents;</li> <li>(c) the protection afforded for whistle-blowing described in section 115;</li> <li>(d) the licensee's policy mentioned in subsection 68 (3) regarding the use of personal assistance services devices for residents;</li> <li>(f) fire prevention and safety;</li> <li>(h) the emergency plan and the infection prevention and control program of the licensee for the home mentioned in subsection 60 (4).</li> </ul> <p><b>14. (1)</b> For the purposes of clause 65 (2) (j) of the Act, every licensee of a retirement home shall ensure that all staff who work in the home receive training in the procedure described in subsection 73 (1) of the Act for a person to complain to the licensee.</p>
Inspection Finding

At the time of the inspection the Licensee's training records showed that a recently hired staff had not been trained in the areas listed before beginning to work in the Home.

**Outcome**

At the time of the inspection, the Licensee was not in compliance. The home has since taken corrective action to achieve compliance.

**2. The Licensee failed to comply with O. Reg. 166/11, s. 23; Behaviour management.**

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

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

- (a) techniques to prevent and address resident behaviours that pose a risk to the resident or others in the home;
- (b) strategies for interventions to prevent and address resident behaviours that pose a risk to the resident or others in the home;
- (c) strategies for monitoring residents that have demonstrated behaviours that pose a risk to the resident or others in the home.

**Inspection Finding**

A review of a resident's plan of care who was identified as having responsive behaviours indicated that the Licensee had not implemented behaviour management strategies to address the behaviours.

**Outcome**

The Licensee has advised it has taken corrective action to achieve compliance. RHRA to confirm compliance by inspection.

**3. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 62; Reassessment and revision.**

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

**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,

- (b) the resident's care needs change or the care services set out in the plan are no longer necessary.

**Inspection Finding**

At the time of the inspection, the plans of care reviewed revealed that the Licensee did not review and revise the plans at least every six months, as prescribed. Further, the residents' plan of care reviewed indicated that the Licensee did not update the plan of care at the time the resident's care needs related to behaviour management and fall management changed.

**Outcome**

The Licensee has advised it has taken corrective action to achieve compliance. RHRA to confirm compliance by inspection.

**4. The Licensee failed to comply with O. Reg. 166/11, s. 24; Emergency plan, general.**

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

**24. (4)** The licensee shall keep current all arrangements with community agencies, partner facilities and resources that will be involved in responding to an emergency.

**Inspection Finding**

At the time of the inspection, the Licensee's emergency plan did not contain current arrangements with emergency partners.

**Outcome**


At the time of the inspection, the Licensee was not in compliance. The home has since taken corrective action to achieve compliance.

**NOTICE**

The Final Inspection Report is being provided to the Licensee, the Registrar of the Retirement Homes Regulatory Authority (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 February 3, 2022
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