

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

Inspection Information	
Date of Inspection: September 2, 2022	Name of Inspector: Michele Davidson
Inspection Type: Routine Inspection	
Licensee: Amica Mature Lifestyles Inc. / Style de Vie Amica Inc. / 20 Queen Street, Toronto, ON M5H 3R4 (the "Licensee")	
Retirement Home: Amica Newmarket / 275 Doak Lane, Newmarket, ON L3Y 0A2 (the "home")	
Licence Number: T0145	

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>1. The Licensee failed to comply with O. Reg. 166/11, s. 32; Records.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p>32. If the licensee or a member of the staff of a retirement home administers a drug or other substance to a resident, the licensee shall ensure that,</p> <p style="padding-left: 40px;">(b) if a drug is administered, there is written evidence that the drug was prescribed for the resident by a person who is authorized to prescribe a drug under section 27 of the Regulated Health Professions Act, 1991;</p>
<p>Inspection Finding</p> <p>The Inspector reviewed resident medication administration records and physicians orders. The review indicated that the home did not have the prescription for one medication being administered to a resident. The Licensee failed to ensure that prescriptions or orders were on file for all medications being administered.</p>
<p>Outcome</p> <p>At the time of the inspection, the Licensee was not in compliance. The home has since taken corrective action to achieve compliance.</p>
<p>2. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 65; Training.</p> <p>The Licensee failed to comply with O. Reg. 166/11, s. 14; Staff training.</p> <p>The Licensee failed to comply with O. Reg. 166/11, s. 27; Infection prevention and control program.</p>

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

65. (2) Every licensee of a retirement home shall ensure that no staff work in the home unless they have received training in,

- (a) the Residents’ Bill of Rights;
- (b) the licensee’s policy mentioned in subsection 67 (4) to promote zero tolerance of abuse and neglect of residents;
- (c) the protection afforded for whistle-blowing described in section 115;
- (d) the licensee’s policy mentioned in subsection 68 (3) regarding the use of personal assistance services devices for residents;
- (f) fire prevention and safety;
- (h) the emergency plan and the infection prevention and control program of the licensee for the home mentioned in subsection 60 (4);

14. (1) 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.

27. (9) The licensee shall ensure that each staff member who works in the retirement home receives training on how to reduce the incidence of infectious disease transmission, including,

- (a) the need for and method of maintaining proper hand hygiene and method of preventing cross contamination, including proper handling of soiled linens, the protection of uniforms, and the separation of clean and dirty items;
- (b) the need for and process of reporting, providing surveillance of and documenting incidents of infectious illness.

Inspection Finding

During the inspection, staff training records were reviewed. The Inspector found two employees who had been trained in all the mandatory areas prior to commencing work at the retirement home. The Licensee failed to ensure mandatory training had been completed in the areas listed.

Outcome

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

3. 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. (5) The licensee shall,

- (a) on an annual basis at least, test the emergency plan, including arrangements with community agencies, partner facilities and resources that will be involved in responding to an emergency, related to,
 - (ii) situations involving a missing resident,
 - (iv) violent outbursts;

(b) at least once every two years, conduct a planned evacuation of the retirement home;
<p>Inspection Finding</p> <p>The Inspector reviewed the emergency response plan. At the time of the inspection, the home had not completed emergency drills in missing persons, violent outbursts and a full building evacuation. The Licensee did not complete these drills within the prescribed periods.</p>
<p>Outcome</p> <p>The Licensee submitted a plan to achieve compliance by October 13, 2022. RHRA to confirm compliance by following up with the Licensee or by inspection.</p>

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>.

<p>Signature of Inspector</p> <p style="text-align: center;"><i>M. Davidson</i></p>	<p>Date</p> <p style="text-align: center;">September 29, 2022</p>
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