

COMPLIANCE ORDER TO BE MADE AVAILABLE IN HOME

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

Amica Mature Lifestyles Inc. / Style de Vie Amica Inc. o/a Amica Newmarket 275 Doak Lane Newmarket, ON L3Y 0A2

COMPLIANCE ORDER NO. 2023-T0145-90-01

Under section 90 of the *Retirement Homes Act, 2010* (the "Act"), the Deputy Registrar of the Retirement Homes Regulatory Authority (the "Deputy Registrar" and the "RHRA", respectively) 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 Deputy Registrar issues this Compliance Order (the "Order") to ensure Amica Mature Lifestyles Inc. / Style de Vie Amica Inc. (the "Licensee") operating as Amica Newmarket (the "Home") comes into compliance with the Act and Ontario Regulation 166/11 under the Act (the "Regulation").

CONTRAVENTION

The Deputy Registrar has reasonable grounds to believe that the Licensee contravened the following sections of the Act and Regulation:

- Sections 62(4)(b)(iii), 62(6), and 62(9) para 1 of the Act by failing to ensure the plan of care provided clear direction to staff, reflected the resident's current care needs, and had been approved by the resident or substitute decision-maker and a copy provided to them.
- Section 65(2) of the Act and section 14(2) of the Regulation for failing to ensure that
 no staff work in the home unless they have received training. Specifically, the Licensee
 failed to produce records indicating that staff of the Home had been trained in the
 Home's palliative care policy.
- Section 67(2) of the Act by failing to ensure the Licensee and staff of the Home do not neglect the residents. Specifically, the Licensee failed to provide clear directions to staff regarding the resident's care, administer medications as directed by the prescriber, and ensure that staff were trained in palliative care, which jeopardized the resident's wellbeing.
- Section 29(b) of the Regulation by failing to follow the directions of the prescribing physician.

• Section 40(e) of the Regulation by failing to ensure the menu includes alternative entrée choices at each meal.

BRIEF SUMMARY OF FACTS

This Order is issued due to non-compliance identified during an inspection of the Home on June 13, 2022. The Licensee failed to ensure a resident of the Home was not neglected by staff as the Home failed to provide clear directions to staff regarding a resident's care, administer medications to the resident as directed by the prescriber, and ensure that staff were trained in palliative care.

The Deputy Registrar has determined that this Order is appropriate to ensure the Licensee achieves and maintains compliance with the Act and Regulation.

REQUIRED ACTION

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

- 1. Ensure that any palliative residents' plans of care are updated and provide clear directions to staff, including any additional directions relating to palliative care, and to ensure the plans of care indicate whether the care will be provided by an external care provider or by the Home's staff.
- 2. Ensure there are protocols in place at the Home to promote collaboration between the Home's staff and external care providers with respect to the implementation and documentation of care to a resident, including medication administration, and that all staff are trained on such protocols.
- 3. Every three months for a period of one year after the issuance of this Order, provide the RHRA's Compliance Monitor with the Home's quarterly evaluations and monthly Narcotic Audits of the Home's medication administration program.
- 4. Ensure all resident plans of care, including any revisions to them, are approved by the resident or the resident's substitute decision maker and a copy of the same is provided to them.
- 5. Ensure the plans of care for residents with special dietary needs provide clear directions to staff on how to provide the special diet and on how to ensure it is being provided.

Demonstrate through written reports to the RHRA that it has complied with actions 1 - 5 set out above at the request of the RHRA Compliance Monitor.

Issued on February 23, 2023.