

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

Inspection Information

Date of Inspection: November 14, 2023

Name of Inspector: Mark Dennis

Inspection Type: Routine Inspection

Licensee: ACC-003154 - Huronia Retirement Homes Inc.

Retirement Home: Bayview Retirement Home

License Number: N0449

About Routine Inspections

A routine inspection, performed by an RHRA inspector, is a physical inspection of a licensed retirement home. During a routine inspection, an RHRA inspector will walk through the home, speak to residents and staff, observe care services and conditions in the home, and ensure the licensee's management and staff follow mandatory policies and practices designed to protect the welfare of residents.

Following a routine 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 the licensee repeatedly does not meet the required standards, RHRA may take further action.

Focus Areas

During a routine inspection, an inspector will focus primarily on a set number of areas which have been identified as related to the health, safety and wellbeing of resident, and may take various actions to determine whether the licensee is compliant with the RHA in relating to the areas. The areas listed in this section are ones which an inspector has identified as non-compliant.

Focus Area #1: Abuse and Neglect

RHRA Inspector Findings

During the inspection the Inspector learned of an incident involving resident vs resident physical abuse. There is a requirement that the home must investigate all abuse cases, report the matter to the Registrar and follow the home Zero Tolerance of Abuse and Neglect procedures. The home failed to produce evidence of an investigation, failed to report the incident to the Registrar and failed to comply with the home Zero Tolerance of Abuse and Neglect protocols.

Outcome

The Licensee has advised it has taken corrective action to achieve compliance. RHRA to confirm compliance by following up with the Licensee or by inspection.

Focus Area #2: Behaviour Management

RHRA Inspector Findings

During the inspection the Inspector reviewed resident charts. The Inspector learned that there was two residents who display either aggressive or responsive behaviours. There is a requirement that should a resident display such behaviours the home shall implement strategies and techniques to better manage the behaviours. The Licensee failed to implement behaviour management strategies and techniques as prescribed.

Outcome

The Licensee has advised it has taken corrective action to achieve compliance. RHRA to confirm compliance by following up with the Licensee or by inspection.

Focus Area #3: Complaints

RHRA Inspector Findings

The Inspector reviewed home complaint policy and procedures. The inspection showed the home kept no records of complaints.

Outcome

The Licensee must take corrective action to achieve compliance.

Focus Area #4: Emergency Plan

RHRA Inspector Findings

During the inspection the Inspector reviewed annual testing of the home emergency plan. There was no evidence annual testing of the plan had been completed. There was no evidence of agreements with community partners, evidence emergency supplies were set aside or evidence of a emergency plan involving pandemics or epidemics.

Outcome

The Licensee must take corrective action to achieve compliance.

Focus Area #5: Falls Prevention

RHRA Inspector Findings

The Inspector reviewed fall incident reports. The inspection showed a resident was falling and deemed a high risk of falls. There is a requirement that should a resident fall , the home shall implement strategies to reduce the risk of falls. There was no evidence the home was implementing strategies.

Outcome

The Licensee must take corrective action to achieve compliance.

Focus Area #6: Maintenance

RHRA Inspector Findings

During the inspection the Inspector located an unlocked closet, in a common area, that contained hazardous cleaning supplies. There is a requirement that hazardous substance can not be accessible to residents. The Licensee failed to keep hazardous substances inaccessible to residents.

Outcome

The Licensee has advised it has taken corrective action to achieve compliance. RHRA to confirm compliance by following up with the Licensee or by inspection.

Focus Area #7: Resident Record, Assessment, Plan of Care

RHRA Inspector Findings

During the inspection, the Inspector reviewed resident's plans of care. There were numerous residents that did not have either an assessment, plan of care, had not been approved by a Regulated Health Professional, did not include the care services provided or had no revisions in the previous 6 months, all as prescribed.

Outcome

The Licensee submitted a plan to achieve compliance by TBD. RHRA to confirm compliance by following up with the Licensee or by inspection.

Focus Area #8: Staff Training**RHRA Inspector Findings**

During the inspection the Inspector reviewed staff training records. There is a requirement that new staff hires must receive the prescribed training. Further, all staff must be trained annually as prescribed. The inspection showed a recent staff hire had not received the prescribed training and annual training, in all area's prescribed, had not been completed.

Outcome

The Licensee has advised it has taken corrective action to achieve compliance. RHRA to confirm compliance by following up with the Licensee or by inspection.

Additional Findings

During a routine inspection, an inspector may observe areas of non-compliance that are not related to the standard focus areas. 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.

Additional Finding#1: Food Preparation and Provision**RHRA Inspector Findings**

The Inspector observed that the home posts a weekly menu within the dining room. The home also posts the daily menu. There is a requirement that the home shall ensure residents are aware of the weekly and daily menu. The weekly menu did not align with the daily menu. The Licensee failed to ensure residents were advised of their weekly menu.

Outcome

The Licensee has advised it has taken corrective action to achieve compliance. RHRA to confirm compliance by following up with the Licensee or by inspection.

Current Inspection – Citations

Citations relating to the above Focus Areas or Additional Findings made during the current inspection are listed below.

The Licensee failed to comply with the RHA s. 14. (1); Staff training**s. 14. (1); Staff training**

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.

The Licensee failed to comply with the RHA s. 14. (2); Staff training**s. 14. (2); Staff training**

14. (2) For the purposes of subsection 65 (4) of the Act, the licensee shall ensure that the persons who are required to receive training under subsection 65 (2) of the Act receive the training at least annually.

The Licensee failed to comply with the RHA s. 14. (5); Staff training**s. 14. (5); Staff training**

14. (5) The licensee shall ensure that the persons who are required to receive the training described in subsection 65 (5) of the Act receive that training on an ongoing basis, namely at least annually after receiving the training described in subsection (4).

The Licensee failed to comply with the RHA s. 21. (2); Hazardous substances**s. 21. (2); Hazardous substances**

21. (2) Every licensee of a retirement home shall ensure that all hazardous substances used by staff of the home or under their control are labelled properly and are kept inaccessible to residents at all times.

The Licensee failed to comply with the RHA s. 22. (1); Risk of falls

s. 22. (1); Risk of falls

22. (1) Every licensee of a retirement home shall develop, document and implement strategies to reduce or mitigate the risk of falls in common areas of the home.

The Licensee failed to comply with the RHA 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;

The Licensee failed to comply with the RHA s. 24. (4); Emergency plan, general

s. 24. (4); Emergency plan, general

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.

The Licensee failed to comply with the RHA s. 24. (5); Emergency plan, general

s. 24. (5); Emergency plan, general

24. (5) The licensee shall,

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

s. 24. (5), (a)

(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,

s. 24. (5), (a), 1.

(i) the loss of essential services,

s. 24. (5), (a)

(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,

s. 24. (5), (a), 2.

(ii) situations involving a missing resident,

s. 24. (5), (a)

(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,

s. 24. (5), (a), 3.

(iii) medical emergencies,

s. 24. (5), (a)

(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,

s. 24. (5), (a), 3.1

(iii.1) epidemics and pandemics,

s. 24. (5), (a)

(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,

s. 24. (5), (a), 4.

(iv) violent outbursts;

The Licensee failed to comply with the RHA s. 25. (3); Emergency plan, retirement home with more than 10 residents

s. 25. (3); Emergency plan, retirement home with more than 10 residents

25. (3) The licensee shall ensure that the emergency plan provides for the following:

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

s. 25. (3), para. 1

1. Dealing with,

s. 25. (3), para. 1, 5.1

v.1 epidemics and pandemics,

s. 25. (3), para. 3

3. Resources, supplies and equipment vital for the emergency response being set aside and readily available at the retirement home and regular testing of all such resources, supplies and equipment to ensure that they are in working order.

The Licensee failed to comply with the RHA s. 26.; Emergency plan, retirement home with 10 or fewer residents

s. 26.; Emergency plan, retirement home with 10 or fewer residents

26. The emergency plan for a retirement home that has the capacity to accommodate 10 or fewer residents shall, in addition to the requirements in section 24, meet the following requirements:

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

s. 26. para. 4

4. The plan shall require that resources, supplies and equipment vital for the emergency response are set aside, readily available at the home and tested regularly to ensure that they are in working order.

The Licensee failed to comply with the RHA s. 27. (9); Infection prevention and control program

s. 27. (9); Infection prevention and control program

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,

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

s. 27. (9), (a)

(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;

s. 27. (9), (b)

(b) the need for and process of reporting, providing surveillance of and documenting incidents of infectious illness.

The Licensee failed to comply with the RHA s. 29.; Administration of drugs or other substances

s. 29.; Administration of drugs or other substances

29. If one of the care services that the licensee or the staff of a retirement home provide to a resident of the home is the administration of a drug or other substance, the licensee shall ensure that,

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

s. 29. (c)

(c) neither the licensee nor a staff member administers a drug to a resident in the home unless the licensee or the staff member has received training in the procedures applicable to the administration of the drug;

s. 29. (e)

(e) if the licensee or a staff member is involved in the administration of the drug or other substance at the home, that the licensee or staff member is trained in,

s. 29. (e), 1.

(i) ways of reducing the incidence of infectious disease, including maintaining proper hand hygiene,

s. 29. (e)

(e) if the licensee or a staff member is involved in the administration of the drug or other substance at the home, that the licensee or staff member is trained in,

s. 29. (e), 2.

(ii) the safe disposal of syringes and other sharps,

s. 29. (e)

(e) if the licensee or a staff member is involved in the administration of the drug or other substance at the home, that the licensee or staff member is trained in,

s. 29. (e), 3.

(iii) recognizing an adverse drug reaction and taking appropriate action;

The Licensee failed to comply with the RHA s. 40.; Provision of a meal

s. 40.; Provision of a meal

40. If one of the care services that the licensee or the staff of a retirement home provide to a resident of the home is the provision of a meal, the licensee shall ensure that,

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

s. 40. (g)

(g) the resident is informed of his or her daily and weekly menu options;

The Licensee failed to comply with the RHA s. 44. (1); Full assessment of care needs

s. 44. (1); Full assessment of care needs

44. (1) Subject to section 46, no later than 14 days after a resident commences residency in a retirement home, the licensee shall ensure that a full assessment of the resident's care needs and preferences is conducted.

The Licensee failed to comply with the RHA s. 44. (3); Full assessment of care needs

s. 44. (3); Full assessment of care needs

44. (3) If a licensee or a staff member of a retirement home has reason to believe that a resident's care needs may include dementia care, skin and wound care, or the use of a personal assistance services device, the licensee shall ensure that the full assessment is,

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

s. 44. (3), (a)

(a) conducted by a member of a College, as defined in the Regulated Health Professions Act, 1991;

The Licensee failed to comply with the RHA s. 55. (5); Contents of records

s. 55. (5); Contents of records

55. (5) A licensee of a retirement home shall keep records proving compliance with the Act and this Regulation in relation to,

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

s. 55. (5), (c)

(c) the skills, qualifications and training of the staff who work in the home;

The Licensee failed to comply with the RHA s. 56. (3); Format and retention of records

s. 56. (3); Format and retention of records

56. (3) The licensee shall ensure that each of the records is kept in a readable and useable format that allows a complete copy of the record to be readily produced.

The Licensee failed to comply with the RHA s. 62. (1); Plan of care

s. 62. (1); Plan of care

62. (1) When a resident commences his or her residency in a retirement home, the licensee shall, within the prescribed times, ensure that the resident is assessed and that a plan of care is developed based on the assessment and in accordance with this section and the regulations.

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,

The Licensee failed to comply with the RHA s. 65. (2); Training

s. 65. (2); Training

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

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

s. 65. (2), (a)

(a) the Residents' Bill of Rights;

s. 65. (2), (b)

(b) the licensee's policy mentioned in subsection 67 (4) to promote zero tolerance of abuse and neglect of residents;

s. 65. (2), (c)

(c) the protection afforded for whistle-blowing described in section 115;

s. 65. (2), (d)

(d) the licensee's policy mentioned in subsection 68 (3) regarding the use of personal assistance services devices for residents;

s. 65. (2), (f)

(f) fire prevention and safety;

s. 65. (2), (g)

(g) the licensee's emergency evacuation plan for the home mentioned in subsection 60 (3);

s. 65. (2), (h)

(h) the emergency plan and the infection prevention and control program of the licensee for the home mentioned in subsection 60 (4);

The Licensee failed to comply with the RHA s. 65. (4); On-going training

s. 65. (4); On-going training

65. (4) The licensee shall ensure that the persons who are required to receive the training described in subsection (2) receive on-going training as described in that subsection at the times required by the regulations.

The Licensee failed to comply with the RHA s. 65. (5); Additional training for direct care staff

s. 65. (5); Additional training for direct care staff

65. (5) The licensee shall ensure that all staff who provide care services to residents receive training in the following matters and at the times required by the regulations, as a condition of continuing to have contact with residents, in addition to the other training that they are required to receive under this section:

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

s. 65. (5), para. 3

3. Behaviour management.

The Licensee failed to comply with the RHA s. 67. (4); Policy to promote zero tolerance

s. 67. (4); Policy to promote zero tolerance

67. (4) Without in any way restricting the generality of the duties described in subsections (1) and (2), the licensee shall ensure that there is a written policy to promote zero tolerance of abuse and neglect of residents and shall ensure that the policy is complied with.

The Licensee failed to comply with the RHA s. 74.; Licensee's duty to respond to incidents of wrongdoing

s. 74.; Licensee's duty to respond to incidents of wrongdoing

74. Every licensee of a retirement home shall ensure that,

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

s. 74. (a)

(a) every alleged, suspected or witnessed incident of the following of which the licensee knows or that is reported to the licensee is immediately investigated:

s. 74. (a), 1.

(i) abuse of a resident of the home by anyone,

The Licensee failed to comply with the RHA s. 75. (1); Reporting certain matters to Registrar

s. 75. (1); Reporting certain matters to Registrar

75. (1) A person who has reasonable grounds to suspect that any of the following has occurred or may occur shall immediately report the suspicion and the information upon which it is based to the Registrar:

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

s. 75. (1), para. 3

3. Unlawful conduct that resulted in harm or a risk of harm to a 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.

Ontario Regulation 166/11:

s. 11. (1); Posted information

11. (1) For the purposes of paragraph 4 of subsection 55 (2) of the Act, the following information is prescribed as information that must be posted in a retirement home under that subsection:

s. 11. (1), para. 6

6. A copy of the most recent final inspection report prepared by an inspector under section 77 of the Act, subject to section 114 of the Act.

s. 19. (1); Maintenance

19. (1) Every licensee of a retirement home shall ensure that a maintenance program is in place to ensure that the building forming the retirement home, including both interior and exterior areas and its operational systems, are maintained in good repair.

s. 27. (5); Infection prevention and control program

27. (5) The licensee of a retirement home shall ensure that,

s. 27. (5), (0.a)

(0.a) any guidance, advice or recommendations given to retirement homes by the Chief Medical Officer of Health are followed in the retirement home;

s. 32.; Records

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,

s. 32. (b)

(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;

s. 40.; Provision of a meal

40. If one of the care services that the licensee or the staff of a retirement home provide to a resident of the home is the provision of a meal, the licensee shall ensure that,

s. 40. (b)

(b) menus provide adequate nutrients, fibre and energy for the resident, include fresh seasonal foods and are consistent with standards of good nutrition in Canada;

s. 40.; Provision of a meal

40. If one of the care services that the licensee or the staff of a retirement home provide to a resident of the home is the provision of a meal, the licensee shall ensure that,

s. 40. (e)

(e) the menu includes alternative entrée choices at each meal;

s. 40.; Provision of a meal

40. If one of the care services that the licensee or the staff of a retirement home provide to a resident of the home is the provision of a meal, the licensee shall ensure that,

s. 40. (f)

(f) an individualized menu is developed for the resident if the resident's needs cannot be met through the home's menu cycle;

s. 40.; Provision of a meal

40. If one of the care services that the licensee or the staff of a retirement home provide to a resident of the home is the provision of a meal, the licensee shall ensure that,

s. 40. (i)


(i) food service workers and staff assisting the resident are aware of the resident's diet, special needs and preferences;

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 December 4, 2023
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