

FINAL INSPECTION REPORT

Under the *Retirement Homes Act, 2010*

Inspection Information

Date of Inspection: September 15, 2025

Name of Inspector: Angela Newman

Inspection Type: Routine Inspection

Licensee: 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: Behaviour Management

RHRA Inspector Findings

As part of the routine inspection, the inspector reviewed a sample of resident files. A review of a resident's record who was identified as having responsive behaviours indicated that the Licensee had not developed a behaviour management strategy that included techniques and strategies to prevent and address the resident's behaviours. The Licensee failed to implement their behaviour management policy fully.

Outcome

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

Focus Area #2: Emergency Plan**RHRA Inspector Findings**

As part of the routine inspection the inspector reviewed the Licensee's emergency plan and found no documentation supporting the requirement of an evacuation at least every two years. The Licensee failed to follow its emergency plan to test its evacuation procedures.

Outcome

The Licensee submitted a plan to achieve compliance by October 1, 2025. RHRA to confirm compliance by following up with the Licensee or by inspection.

Focus Area #3: Maintenance**RHRA Inspector Findings**

As part of the routine inspection the inspector observed that hazardous chemicals used by staff were not kept inaccessible to residents on the main floor and lower floor of the home. The Licensee failed to ensure the proper storage of hazardous chemicals.

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 #4: Other Requirements**RHRA Inspector Findings**

During the inspection, the inspector reviewed employee files. There is a requirement that staff working in the home shall complete a criminal records check conducted by the police. Further, staff are required to complete a declaration disclosing if they have a criminal record, judgements, or orders against them. The inspection showed that one staff record was incomplete and one staff record did not include either the police criminal records check or the required declaration 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 #5: Resident Record, Assessment, Plan of Care**RHRA Inspector Findings**

As part of the routine inspection, the inspector reviewed a sample of resident plans of care. There is a requirement that resident plans of care are based on an assessment of the resident. The inspector found one plan of care was not based on a resident's assessment related to falls prevention. In addition, the inspector found three residents did not have their initial assessment and plans of care completed within two days of residency. The Licensee failed to ensure that plans of care were developed as

required by legislation.

Outcome

The Licensee must take corrective action to achieve compliance.

Focus Area #6: Staff Training

RHRA Inspector Findings

As part of the routine inspection, the inspector reviewed a sample of staff orientation and annual training records in the areas of zero tolerance of abuse, resident bill of rights, infection control, whistle blower protection, personal assistance services devices, fire prevention and safety, emergency plan, complaints, and behaviour management. The Licensee was not able to demonstrate that orientation training for one staff was completed as prescribed.

Outcome

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

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: Cleanliness and Pest Control

RHRA Inspector Findings

During the inspection the inspector learned the home continues to have a bed bug infestation. There is a requirement that the Licensee must respond in a timely matter to deal with the pests in the home. The inspection showed the Licensee had a professional pest control company attend the home but had stopped the service for five weeks allowing the infestation to go untreated. The Licensee failed to immediately deal with pests in the home as prescribed. In addition, the inspector observed cobwebs in windows and hallway corners throughout the home. The inspector found that the Licensee failed to keep the common areas of the home clean and sanitary.

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 Finding#2: Food Preparation and Provision

RHRA Inspector Findings

As part of the inspection, the inspector reviewed the Licensee's menus and interviewed relevant staff and residents. The inspector found that the Licensee failed to ensure the menus are varied, provides adequate nutrients and fiber and energy for residents, includes fresh seasonal foods and are consistent with Canada's Food Guide. In addition, the inspector observed food offered as snacks were not stored and served using methods to prevent contamination and food borne illness. The Licensee failed to ensure menus were delivered and food stored and served in accordance with the legislation.

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. 62. (6); Assessment of resident**s. 62. (6); Assessment of resident**

62. (6) The licensee shall ensure that the plan of care is based on an assessment of the resident and the needs and preferences of the resident.

The Licensee failed to comply with the O. Reg. 166/11 s. 47. (1); Development of plan of care**s. 47. (1); Development of plan of care**

47. (1) Subject to subsection (4), as soon as possible and not later than two days after a resident commences residency in a retirement home, the licensee of a retirement home shall develop an initial plan of care for the resident based on the initial assessment of the resident's immediate care needs conducted under section 43 that includes all of the information listed in subsection 62 (4) of the Act that is relevant to the resident's immediate care needs.

The Licensee failed to comply with the O. Reg. 166/11 s. 20. (2); Food preparation**s. 20. (2); Food preparation**

20. (2) The licensee shall ensure that all foods and fluids used in food preparation are prepared, stored, and served using methods to prevent contamination and food borne illness.

The Licensee failed to comply with the O. Reg. 166/11 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 O. Reg. 166/11 s. 17. (1); Cleanliness**s. 17. (1); Cleanliness**

17. (1) Every licensee of a retirement home shall ensure that the common areas of the home, including the floors and any furnishings, equipment and linens in those areas, are clean and sanitary.

The Licensee failed to comply with the O. Reg. 166/11 s. 13. (1); Hiring staff and volunteers**s. 13. (1); Hiring staff and volunteers**

13. (1) The police background check required by section 64 of the Act for a staff member or a volunteer working in a retirement home shall be,

Specifically, the Licensee failed to comply with the following subsection(s):**s. 13. (1), (a)**

(a) conducted by a police record check provider within the meaning of the Police Record Checks Reform Act, 2015;

The Licensee failed to comply with the O. Reg. 166/11 s. 13. (3); Hiring staff and volunteers**s. 13. (3); Hiring staff and volunteers**

13. (3) A licensee of a retirement home shall require that a staff member or volunteer who applies to work

or who works in the home provide the licensee with a signed declaration disclosing the following with respect to the period since the day the person's last police background check was conducted under subsection (1), or if no such police background check has been conducted, since the day this section comes into force:

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

s. 13. (3), para. 1

1. Every offence with which the person has been charged under the Criminal Code (Canada), the Controlled Drugs and Substances Act (Canada) or the Food and Drugs Act (Canada) and the outcome of the charge.

s. 13. (3), para. 2

2. Every order of a judge or justice of the peace made against the person in respect of an offence under the Criminal Code (Canada), the Controlled Drugs and Substances Act (Canada) or the Food and Drugs Act (Canada), including a peace bond, probation order, prohibition order or warrant.

s. 13. (3), para. 4

4. Every offence of which the person has been convicted under the Criminal Code (Canada), the Controlled Drugs and Substances Act (Canada) or the Food and Drugs Act (Canada).

The Licensee failed to comply with the O. Reg. 166/11 s. 18. (3); Pest control

s. 18. (3); Pest control

18. (3) The licensee shall ensure that timely action is taken to deal with pests in the retirement home.

The Licensee failed to comply with the O. Reg. 166/11 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. (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. (c)

(c) the menu is varied and changes daily;

The Licensee failed to comply with the O. Reg. 166/11 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), (b)

(b) at least once every two years, conduct a planned evacuation of the retirement 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.

Retirement Homes Act, 2010:

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,

s. 65. (2), (a)

(a) the Residents' Bill of Rights;

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,

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); Training

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

s. 65. (2), (c)

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

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,

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); Training

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

s. 65. (2), (e)

(e) injury prevention;

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,

s. 65. (2), (f)

(f) fire prevention and safety;

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,

s. 65. (2), (g)

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

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,

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);

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.

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:

s. 65. (5), para. 3

3. Behaviour management.

Ontario Regulation 166/11:

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.

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.

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).

s. 23. (1); Behaviour management

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

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); Behaviour management

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

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. 24. (5); Emergency plan, general

24. (5) The licensee shall,

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. 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:

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.

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,

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); 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,

s. 27. (9), (b)

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

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. (a)

(a) if the licensee is the sole provider of the resident's meals, the resident is offered at least three meals per day at reasonable and regular meal hours, a beverage between the morning and midday meals, a snack and a beverage between the midday and evening meals and a snack and a beverage after the evening meal;

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 <i>Angela Newman</i>	Date October 1, 2025
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