RHRA Retirement Homes Regulatory Authority

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

Inspection Information	
Date of Inspection: October 26, 2026	**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: Complaints

RHRA Inspector Findings
During a routine inspection, the inspector reviewed the Licensee's complaints log and noted that several complaints did not have fully compliant written records. Specifically, the record of the complaint did not include the dates which responses were provided to the complainant and descriptions of the responses, as well as the responses made in turn by the complainant. The Licensee failed to ensure that their written record of a complaint included all the required elements.

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: Emergency Plan

RHRA Inspector Findings
The inspector reviewed the Licensee's records of testing for their emergency plans and found that the testing for situations involving epidemic and pandemic had not been completed annually. Additionally, upon review of the home's emergency resource supplies and equipment vital for emergency response, the inspector found the equipment failed to be checked regularly. The Licensee failed to ensure that testing of the emergency plan was conducted as required by regulation.

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: Infection Prevention and Control

RHRA Inspector Findings
As part of the routine inspection, the inspector reviewed the Licensee's infection prevention and control program. The inspector found that the alcohol-based hand sanitizer for use by residents and staff in communal resident areas and in staff work areas was expired. in addition, the Licensee failed to ensure annual consultation with the Ministry of Health or designate on matters in the home to reduce the incidence of infectious diseases. The Licensee failed to ensure alcohol-based hand sanitizer was available for use by residents and staff and consult annually with the Ministry of Health or designate.

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: Resident Record, Assessment, Plan of Care

RHRA Inspector Findings
As part of the routine inspection, the inspector reviewed a sample of residents' plan of care. There is a requirement that no 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. The inspector determined one resident's assessment and plan of care were not completed within the prescribed timelines. The Licensee failed to ensure that resident assessment and plan of care were developed in compliance with the legislation.

Outcome
The Licensee must take corrective action to achieve compliance.

Focus Area #5: Staff Training

RHRA Inspector Findings
As part of the routine inspection, the inspector reviewed a sample of annual training records in the areas of zero tolerance of abuse, resident bill of rights, infection control, injury prevention, whistle blower protection, personal assistance services devices, fire prevention and safety, emergency plan, complaints, care services and behaviour management. The Licensee was not able to demonstrate that staff were trained annually on care services offered by the home.

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: 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. The Licensee failed to ensure menus were delivered 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 O. Reg. 166/11 s. 27. (2); Infection prevention and control program

s. 27. (2); Infection prevention and control program
27. (2) The licensee shall consult on an ongoing basis and not less than once a year with the local medical officer of health or designate about identifying and addressing health care issues in the retirement home in order to reduce the incidence of infectious disease outbreaks in the home.

The Licensee failed to comply with the O. Reg. 166/11 s. 27. (3); Infection prevention and control program

s. 27. (3); Infection prevention and control program
27. (3) The licensee shall keep a written record of the consultation required under subsection (2) that shall include a record of when the consultation took place, what was discussed and any recommendations that the local medical officer of health or designate made.

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. 59. (1); Procedure for complaints to licensee

s. 59. (1); Procedure for complaints to licensee
59. (1) Every licensee of a retirement home shall ensure that every written or verbal complaint made to the licensee or a staff member concerning the care of a resident or operation of the home is dealt with as follows:

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

s. 59. (1), para. 1
1. The complaint shall be investigated. If the complaint alleges harm or risk of harm to one or more residents, the investigation shall be commenced immediately.

s. 59. (1), para. 2
2. The complaint shall be resolved if possible, and a response that complies with paragraph 4 provided within 10 business days of the receipt of the complaint.

s. 59. (1), para. 3
3. For those complaints that cannot be investigated and resolved within 10 business days, an acknowledgement of receipt of the complaint shall be provided within 10 business days of receipt of the complaint, including the date by which the complainant can reasonably expect a resolution, and a follow-up response that complies with paragraph 4 shall be provided as soon as possible in the circumstances.

s. 59. (1), para. 4
4. A response shall be made to the person who made the complaint, indicating,

s. 59. (1), para. 4, 1.
i. what the licensee has done to resolve the complaint,

s. 59. (1), para. 4
4. A response shall be made to the person who made the complaint, indicating,

s. 59. (1), para. 4, 2.
ii. that the licensee believes the complaint to be unfounded and the reasons for the belief.

The Licensee failed to comply with the O. Reg. 166/11 s. 59. (2); Procedure for complaints to licensee

s. 59. (2); Procedure for complaints to licensee
59. (2) The licensee shall ensure that a written record is kept in the retirement home that includes,

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

s. 59. (2), (a)
(a) the nature of each verbal or written complaint;

s. 59. (2), (b)
(b) the date that the complaint was received;

s. 59. (2), (c)

(c) the type of action taken to resolve the complaint, including the date of the action, time frames for actions to be taken and any follow-up action required;

s. 59. (2), (d)

(d) the final resolution, if any, of the complaint;

s. 59. (2), (e)

(e) every date on which any response was provided to the complainant and a description of the response;

s. 59. (2), (f)

(f) any response made in turn by the complainant.

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. 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. 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 O. Reg. 166/11 s. 27. (7); Infection prevention and control program

s. 27. (7); Infection prevention and control program

27. (7) The licensee of a retirement home shall ensure that waterless, alcohol-based hand sanitizer or another form of hand sanitation that provides equivalent protection against infectious disease transmission is available for use by residents and staff in communal resident areas and in staff work areas.

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. 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.

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);

Ontario Regulation 166/11:

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,

s. 13. (1), (a)

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

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:

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); 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:

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); 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:

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).

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. (3); Staff training

14. (3) For the purposes of paragraph 5 of subsection 65 (5) of the Act, every licensee of a retirement home shall ensure that every staff member who provides a care service to a resident has received or receives training in,

s. 14. (3), (b)

(b) each care service offered in the home so that the staff member is able to understand the general nature of each of those services, the standards applicable under the Act to each of those services and the aspects of each of those services that may be relevant to the staff member's own duties in the home.

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. 18. (3); Pest control

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

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.

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), 1.

(i) the loss of essential services,

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.

(iii) medical emergencies,

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. 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. 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,

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.; 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,

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.; 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,

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.; 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,

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;

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 *Angela Newman*	Date November 23, 2026