

Ministry of Long-Term Care

Long-Term Care Operations Division
Long-Term Care Inspections Branch

North District

159 Cedar St, Suite 403
Sudbury, ON, P3E 6A5
Telephone: (800) 663-6965

Public Report

Report Issue Date: May 2, 2025

Inspection Number: 2025-1349-0003

Inspection Type:

Critical Incident
Follow up

Licensee: Chapleau Health Services

Long Term Care Home and City: The Bignucolo Residence, Chapleau

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): April 23-25, 2025.

The inspection occurred offsite on the following date(s): April 28, 2025.

The following intake(s) were inspected:

- Intake: related to a Fall of a resident resulting in an injury.
- Intake: - Follow-up #: 1 - FLTCA, 2021 - s. 5.

Previously Issued Compliance Order(s)

The following previously issued Compliance Order(s) were found to be in compliance:

Order #901 from Inspection #2025-1349-0003 related to FLTCA, 2021, s. 5

The following **Inspection Protocols** were used during this inspection:

Falls Prevention and Management

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INSPECTION RESULTS

IMMEDIATE COMPLIANCE ORDER [ICO #901] Safe and Secure Home

NC #001 Immediate Compliance Order (ICO)

FLTCA, 2021, s. 5, served on April 24, 2025

Home to be safe, secure environment

s. 5. Every licensee of a long-term care home shall ensure that the home is a safe and secure environment for its residents.

This ICO was complied during this inspection.

Date Complied: April 25, 2025

WRITTEN NOTIFICATION: Falls Prevention and Management

NC #002 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 54 (1)

Falls prevention and management

s. 54 (1) The falls prevention and management program must, at a minimum, provide for strategies to reduce or mitigate falls, including the monitoring of residents, the review of residents' drug regimes, the implementation of restorative care approaches and the use of equipment, supplies, devices and assistive aids. O. Reg. 246/22, s. 54 (1).

The licensee has failed to comply with the home's falls prevention and management policy related to a specific protocol being completed for a resident, after a fall with injury, as identified in the falls prevention program.

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In accordance with O. Reg. 246/22, s. 11 (1) b. the licensee is required to ensure that written policies and protocols were developed for falls prevention and management program and to ensure they are complied with.

Specifically, staff did not comply with the licensee's policy titled, Falls Prevention Program-Long Term Care, when they did not complete the specific protocol for a resident with a fall.

Sources: a resident's progress notes, fall assessments, Neurological Observation records/with vitals; Fall policy titled, Falls Prevention Program-Long Term Care; interviews with a Personal Support Worker, two Registered Practical Nurses, and a Registered Nurse.

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REVIEW/APPEAL INFORMATION

TAKE NOTICE The Licensee has the right to request a review by the Director of this (these) Order(s) and/or this Notice of Administrative Penalty (AMP) in accordance with section 169 of the Fixing Long-Term Care Act, 2021 (Act). The licensee can request that the Director stay this (these) Order(s) pending the review. If a licensee requests a review of an AMP, the requirement to pay is stayed until the disposition of the review.

Note: Under the Act, a re-inspection fee is not subject to a review by the Director or an appeal to the Health Services Appeal and Review Board (HSARB). The request for review by the Director must be made in writing and be served on the Director within 28 days from the day the order or AMP was served on the licensee.

The written request for review must include:

- (a) the portions of the order or AMP in respect of which the review is requested;
- (b) any submissions that the licensee wishes the Director to consider; and
- (c) an address for service for the licensee.

The written request for review must be served personally, by registered mail, email or commercial courier upon:

Director

c/o Appeals Coordinator
Long-Term Care Inspections Branch
Ministry of Long-Term Care
438 University Avenue, 8th floor
Toronto, ON, M7A 1N3
e-mail: MLTC.AppealsCoordinator@ontario.ca

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If service is made by:

- (a) registered mail, is deemed to be made on the fifth day after the day of mailing
- (b) email, is deemed to be made on the following day, if the document was served after 4 p.m.
- (c) commercial courier, is deemed to be made on the second business day after the commercial courier received the document

If the licensee is not served with a copy of the Director's decision within 28 days of receipt of the licensee's request for review, this(these) Order(s) is(are) and/or this AMP is deemed to be confirmed by the Director and, for the purposes of an appeal to HSARB, the Director is deemed to have served the licensee with a copy of that decision on the expiry of the 28-day period.

Pursuant to s. 170 of the Act, the licensee has the right to appeal any of the following to HSARB:

- (a) An order made by the Director under sections 155 to 159 of the Act.
- (b) An AMP issued by the Director under section 158 of the Act.
- (c) The Director's review decision, issued under section 169 of the Act, with respect to an inspector's compliance order (s. 155) or AMP (s. 158).

HSARB is an independent tribunal not connected with the Ministry. They are established by legislation to review matters concerning health care services. If the licensee decides to request an appeal, the licensee must give a written notice of appeal within 28 days from the day the licensee was served with a copy of the order, AMP or Director's decision that is being appealed from. The appeal notice must be given to both HSARB and the Director:

Health Services Appeal and Review Board

Attention Registrar
151 Bloor Street West, 9th Floor
Toronto, ON, M5S 1S4

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Upon receipt, the HSARB will acknowledge your notice of appeal and will provide instructions regarding the appeal and hearing process. A licensee may learn more about the HSARB on the website www.hsarb.on.ca.

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**Immediate Compliance
Order**

Public Report

Report Issue Date: May 5, 2025

Inspection Number: 2025-1349-0003

Inspection Type:

Critical Incident

Follow up

Licensee: Chapleau Health Services

Long Term Care Home and City: The Bignucolo Residence, Chapleau

INSPECTION REPORT SUMMARY

The inspection occurred on the following date(s): April 23-24, 2025.

The following intake was inspected:

- Intake: related to a fall of a resident resulting in an injury.

**COMPLIANCE ORDER[ICO #901] Safe and Secure
Home**

NC# 001 Compliance Order pursuant to FLTCA, 2021, s. 154 (1) 2.

Non-compliance with: FLTCA, 2021, s. 5

Home to be safe, secure environment s. 5. Every licensee of a long-term care home shall ensure that the home is a safe and secure environment for its residents.

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The Inspector is ordering the licensee to:

FLTCA, 2021, s.155 (1) (a) do anything, or refrain from doing anything, to achieve compliance with a requirement under this Act

Compliance Order: [FLTCA 2021, s. 155 (1)]

The Licensee has failed to comply with FLTCA, 2021, s. 5

Remove specific items from a specific room, and re-place with alternative safe items.

Grounds

The licensee has failed to ensure the home was a safe and secure environment for a resident.

On a specific day, a resident was using a specific item, that was not considered safe.

Sources: observations on specific days; a resident progress notes, and assessments; interviews with Registered Nurse (RN), and Registered Practical Nurse (RPN), and other staff.

This order must be complied with by: April 25, 2025

REVIEW/APPEAL INFORMATION

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