

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

Ottawa District
347 Preston Street, Suite 410
Ottawa, ON, K1S 3J4
Telephone: (877) 779-5559

Original Public Report

Report Issue Date: August 22, 2024

Inspection Number: 2024-1312-0003

Inspection Type:

Complaint

Critical Incident

Licensee: Caessant-Care Nursing and Retirement Homes Limited

Long Term Care Home and City: Caessant Care Cobden, Cobden

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): August 19, 20, 21, 22, 2024

The following intake(s) were inspected:

- Intake: #00113874-Fall of resident resulting in significant injury.
- Intake: #00121530- Fall of resident resulting in significant injury
- Intake: #00123428- Anonymous complaint about possible financial abuse and neglect of a resident and not respecting their rights.

The following Inspection Protocols were used during this inspection:

Infection Prevention and Control
Prevention of Abuse and Neglect
Residents' Rights and Choices
Falls Prevention and Management
Resident Charges and Trust Accounts

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INSPECTION RESULTS

WRITTEN NOTIFICATION: Plan of Care

NC #001 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: FLTCA, 2021, s. 6 (7)

Plan of care

s. 6 (7) The licensee shall ensure that the care set out in the plan of care is provided to the resident as specified in the plan.

The licensee has failed to ensure that a resident's transferring requirements are provided as set out in their plan of care.

Sources: Inspector observations, a resident written plan of care and kardex, and interview with a PSW

WRITTEN NOTIFICATION: Hand Hygiene

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

Non-compliance with: O. Reg. 246/22, s. 102 (2) (b)

Infection prevention and control program

s. 102 (2) The licensee shall implement,

(b) any standard or protocol issued by the Director with respect to infection prevention and control. O. Reg. 246/22, s. 102 (2).

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The licensee has failed to ensure that staff perform hand hygiene prior to entering and exiting residents rooms, as per the IPAC standard 9.1 (b) regarding the four moments of hand hygiene.

Sources: Inspector observations, interview with a PSW.