

### Inspection Report Under the Fixing Long-Term Care Act, 2021

#### **Ministry of Long-Term Care**

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

#### **Central East District**

33 King Street West, 4th Floor Oshawa, ON, L1H 1A1 Telephone: (844) 231-5702

### **Public Report**

Report Issue Date: August 15, 2025 Inspection Number: 2025-1200-0005

**Inspection Type:** 

Complaint Critical Incident

Licensee: Caressant-Care Nursing and Retirement Homes Limited

Long Term Care Home and City: Caressant Care Lindsay Nursing Home, Lindsay

### **INSPECTION SUMMARY**

The inspection occurred onsite on the following date(s): August 11, 12, 13, 14, 15, 2025

The following intake(s) were inspected:

■ Intake: #00150280 -2701-000015-25 - Fall of resident

Intake: #00150895 -2701-000016-25 - Fall of resident with injury

Intake: #00153515 -2701-000018-25: Unwitnessed fall of resident

Intake: #00154250 - Public Complainant - Improper care of resident

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

Prevention of Abuse and Neglect Falls Prevention and Management

### **INSPECTION RESULTS**

#### WRITTEN NOTIFICATION: PASDs that limit or inhibit movement

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

Non-compliance with: FLTCA, 2021, s. 36 (4) 1.

PASDs that limit or inhibit movement

s. 36 (4) The use of a PASD under ion (3) to assist a resident with a routine activity of living may be included in a resident's plan of care only if all of the following are satisfied:



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1. Alternatives to the use of a PASD have been considered, and tried where appropriate, but would not be, or have not been, effective to assist the resident with the routine activity of living.

The licensee failed to consider alternatives to the use of a Personal Assistive Safety Devices (PASDs) for a resident, when the home did not complete the Assessment for PASD Intervention detailing alternatives were trialed prior to the PASD application.

**Sources:** Resident clinical records, home's Personal Assistive Safety Devices Policy and Procedure (LTC-NURSS7-50.0) Interviews with DOC and RPN

# WRITTEN NOTIFICATION: Requirements relating to restraining by a physical device

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

Non-compliance with: O. Reg. 246/22, s. 119 (2)

Requirements relating to restraining by a physical device

- s. 119 (2) Every licensee shall ensure that the following requirements are met where a resident is being restrained by a physical device under section 35 of the Act:
- 1. That staff only apply the physical device that has been ordered or approved by a physician or registered nurse in the extended class.
- 2. That staff apply the physical device in accordance with any instructions specified by the physician or registered nurse in the extended class.
- 3. That the resident is monitored while restrained at least every hour by a member of the registered nursing staff or by another member of staff as authorized by a member of the registered nursing staff for that purpose.
- 4. That the resident is released from the physical device and repositioned at least once every two hours. (This requirement does not apply when bed rails are being used if the resident is able to reposition themself.)
- 5. That the resident is released and repositioned any other time when necessary based on the resident's condition or circumstances.
- 6. That the resident's condition is reassessed and the effectiveness of the restraining evaluated only by a physician, a registered nurse in the extended class attending the resident or a member of the registered nursing staff, at least every eight hours, and at



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any other time when necessary based on the resident's condition or circumstances.

The licensee failed to ensure legislative requirements were met when a resident attempted to exit a Personal Assistive Safety Device (PASD) and was restrained as staff altered the position of the device. The PASD was being used as a restraint rather than a PASD.

**Sources:** Observations of resident, resident's clinical records, Consent form for use of restraint or PASD, interviews with RPN and PSW



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