Ontario

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 22, 2025
Inspection Number: 2025-1293-0004
Inspection Type: Complaint
Licensee: CVH (No. 6) LP by its general partner, Southbridge Care Homes (a limited partnership, by its general partner, Southbridge Health Care GP Inc.)
Long Term Care Home and City: Warkworth Place, Warkworth

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): August 18, 20 -22, 2025.

The following intake(s) were inspected:
An intake regarding a complaint related to multiple care concerns for a resident.

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

Resident Care and Support Services
Continence Care
Housekeeping, Laundry and Maintenance Services
Food, Nutrition and Hydration
Infection Prevention and Control
Responsive Behaviours

INSPECTION RESULTS

WRITTEN NOTIFICATION: Continence care and bowel management

NC #001 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.
Non-compliance with: O. Reg. 246/22, s. 56 (2) (c)
Continence care and bowel management

s. 56 (2) Every licensee of a long-term care home shall ensure that,
(c) each resident who is unable to toilet independently some or all of the time receives assistance from staff to manage and maintain continence;

The licensee failed to ensure that a resident received assistance from staff to manage continence. An interview with a staff member indicated that a resident was frequently incontinent of urine. A staff member reported that the resident's care needs should be communicated to registered staff and that appropriate measures should be implemented.
Sources: A resident's clinical records, the licensee's Continence Policy, an interview with a resident and with staff.

WRITTEN NOTIFICATION: Housekeeping

NC #002 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.
Non-compliance with: O. Reg. 246/22, s. 93 (2) (d)
Housekeeping
s. 93 (2) As part of the organized program of housekeeping under clause 19 (1) (a) of the Act, the licensee shall ensure that procedures are developed and implemented for,
(d) addressing incidents of lingering offensive odours.

The licensee failed to ensure that procedures were developed and implemented to address lingering offensive odours. The inspector observed a persistent offensive odour. An interview with a resident and staff confirmed that the odour had been ongoing and noticeable. The home has since completed a repair, and the offensive odour was no longer present.
Sources: Observation and an interview with a resident and with staff.

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