

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:** August 26, 2025

**Inspection Number:** 2025-1542-0004

**Inspection Type:**  
Critical Incident

**Licensee:** The Board of Management for the District of Parry Sound East

**Long Term Care Home and City:** Eastholme Home for the Aged, Powassan

## INSPECTION SUMMARY

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

The following intake(s) were inspected:

- One intake related to an improper care of a resident by staff members.
- One intake related to a care neglect of a resident by a staff.

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

Safe and Secure Home  
Prevention of Abuse and Neglect  
Falls Prevention and Management

## INSPECTION RESULTS

### WRITTEN NOTIFICATION: Documentation

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

**Non-compliance with: FLTCA, 2021, s. 6 (9) 3.**

Plan of care

s. 6 (9) The licensee shall ensure that the following are documented:

3. The effectiveness of the plan of care.

The licensee has failed to ensure that the effectiveness of the plan of care a resident

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

was accurately documented by a staff member on a specified date.

**Sources:** A Critical Incident (CI) report; resident observations; review of resident clinical records; review of the home's internal investigation; review of the home's policy titled, "Bedtime and Rest Routines" reviewed date March 2012, and interview with a PSW staff and the Director of Care (DOC).

### **WRITTEN NOTIFICATION: Reporting certain matters to Director**

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

**Non-compliance with: FLTCA, 2021, s. 28 (1) 2.**

Reporting certain matters to Director

s. 28 (1) A person who has reasonable grounds to suspect that any of the following has occurred or may occur shall immediately report the suspicion and the information upon which it is based to the Director:

2. Abuse of a resident by anyone or neglect of a resident by the licensee or staff that resulted in harm or a risk of harm to the resident.

1) The licensee has failed to ensure that an incident of an alleged care neglect of a resident was reported immediately to the Director. This incident was reported two (2) days later.

**Sources:** A CI report; review of the home's policy titled "Zero Tolerance of Abuse and Neglect" reviewed date October 2024, and an interview with a Registered Nurse (RN) staff and the DOC.

2) The licensee has failed to ensure that an incident of an alleged improper care of another resident was reported immediately to the Director. This incident was reported one (1) day later.

**Sources:** A CI report; review of the home's policy titled "Zero Tolerance of Abuse and Neglect" reviewed date October 2024, and interview with a RN staff and the DOC.

### **WRITTEN NOTIFICATION: Communication and response system**

NC #004 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

**Non-compliance with: O. Reg. 246/22, s. 20 (a)**

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

Communication and response system

s. 20. Every licensee of a long-term care home shall ensure that the home is equipped with a resident-staff communication and response system that,  
(a) can be easily seen, accessed and used by residents, staff and visitors at all times;

The licensee has failed to ensure that a resident had access to the home's resident to staff communication and response system on a specified date and time.

**Sources:** A CI report; resident observations; resident clinical records review; review of the home's policy titled, "Fall Prevention and Management Program" reviewed date February 2024, and interview with a PSW staff and the DOC.

### WRITTEN NOTIFICATION: Bedtime and rest routines

NC #005 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

**Non-compliance with: O. Reg. 246/22, s. 45**

Bedtime and rest routines

s. 45. Every licensee of a long-term care home shall ensure that each resident of the home has the resident's desired bedtime and rest routines supported and individualized to promote comfort, rest and sleep.

The licensee has failed to ensure that a resident had the desired bedtime and rest routines in their care plan to promote comfort, rest and sleep on a specified date.

**Sources:** A CI report, resident observations; review of resident clinical records; review of the home's policy titled, "Bedtime and Rest Routines," reviewed date March 2012, and interview with a PSW staff and the DOC.

### WRITTEN NOTIFICATION: Falls prevention and management

NC #006 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

**Non-compliance with: O. Reg. 246/22, s. 54 (2)**

Falls prevention and management

s. 54 (2) Every licensee of a long-term care home shall ensure that when a resident has fallen, the resident is assessed and that a post-fall assessment is conducted using a clinically appropriate assessment instrument that is specifically designed for falls. O. Reg. 246/22, s. 54 (2); O. Reg. 66/23, s. 11.

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

The licensee has failed to ensure that when a resident fell on a specified date, the resident was assessed, and a post-fall assessment was conducted using a clinically appropriate assessment instrument that was specifically designed for falls.

**Sources:** A CI report; resident clinical records review, review of the home's policy titled, "Fall Prevention and Management Program, last updated February 2024", and interview with a Registered Practical Nurse (RPN) and the DOC.

### **WRITTEN NOTIFICATION: Continence care and bowel management**

NC #007 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 has failed to ensure that a resident who requires continence care assistance on a specified date, received the required assistance from staff members.

Sources: A CI report; resident observation; review of resident's clinical records; review of the home's policy titled, "Continence Care, effective date August 2011, and interview with a PSW staff and the DOC.



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

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

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