



**Ministry of Health and  
Long-Term Care**

**Inspection Report under  
the Long-Term Care  
Homes Act, 2007**

**Long-Term Care Homes Division  
Long-Term Care Inspections Branch**  
**Division des foyers de soins de  
longue durée**  
**Inspection de soins de longue durée**

Ottawa Service Area Office  
347 Preston St Suite 420  
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**Ministère de la Santé et des  
Soins de longue durée**

**Rapport d'inspection sous la  
Loi de 2007 sur les foyers de  
soins de longue durée**

Bureau régional de services d'Ottawa  
347 rue Preston bureau 420  
OTTAWA ON K1S 3J4  
Téléphone: (613) 569-5602  
Télécopieur: (613) 569-9670

**Public Copy/Copie du public**

<b>Report Date(s) / Date(s) du apport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / Registre no</b>	<b>Type of Inspection / Genre d'inspection</b>
Sep 23, 2016	2016_389601_0024	013484-16	Resident Quality Inspection

**Licensee/Titulaire de permis**

THE CORPORATION OF THE COUNTY OF HASTINGS  
1M Manor Lane Box #758 BANCROFT ON K0L 1C0

**Long-Term Care Home/Foyer de soins de longue durée**

HASTINGS CENTENNIAL MANOR  
1 MANOR LANE P.O. BOX 758 BANCROFT ON K0L 1C0

**Name of Inspector(s)/Nom de l'inspecteur ou des inspecteurs**

KARYN WOOD (601), CATHI KERR (641)

**Inspection Summary/Résumé de l'inspection**



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**The purpose of this inspection was to conduct a Resident Quality Inspection inspection.**

**This inspection was conducted on the following date(s): September 19, 20, 21, 22, and 23, 2016.**

**Critical incident log #026291-16 was inspected related to allegations of resident abuse/neglect.**

**During the course of the inspection, the inspector(s) spoke with the Administrator, the Director of Nursing (DON), Assistant Director of Nursing (ADON), Registered Nurses (RN), Registered Practical Nurses (RPN), Personal Support Workers, President of the Resident and Family Council, Family members and Residents.**

**Also included during the inspection, was an initial walk through tour of all resident care areas, observed resident activities, staff to resident interaction with provision of resident care, infection control practices in the home, medication administration including medication storage areas, and reviewed resident health care records.**

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

**Continence Care and Bowel Management**

**Family Council**

**Infection Prevention and Control**

**Medication**

**Minimizing of Restraining**

**Prevention of Abuse, Neglect and Retaliation**

**Residents' Council**

**Skin and Wound Care**

**During the course of this inspection, Non-Compliances were not issued.**

**0 WN(s)**

**0 VPC(s)**

**0 CO(s)**

**0 DR(s)**

**0 WAO(s)**



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**NON-COMPLIANCE / NON - RESPECT DES EXIGENCES**

**Legend**

WN – Written Notification  
VPC – Voluntary Plan of Correction  
DR – Director Referral  
CO – Compliance Order  
WAO – Work and Activity Order

**Legendé**

WN – Avis écrit  
VPC – Plan de redressement volontaire  
DR – Aiguillage au directeur  
CO – Ordre de conformité  
WAO – Ordres : travaux et activités

Non-compliance with requirements under the Long-Term Care Homes Act, 2007 (LTCHA) was found. (a requirement under the LTCHA includes the requirements contained in the items listed in the definition of "requirement under this Act" in subsection 2(1) of the LTCHA).

The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.

Le non-respect des exigences de la Loi de 2007 sur les foyers de soins de longue durée (LFSLD) a été constaté. (une exigence de la loi comprend les exigences qui font partie des éléments énumérés dans la définition de « exigence prévue par la présente loi », au paragraphe 2(1) de la LFSLD.

Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.

**Issued on this 23rd day of September, 2016**

**Signature of Inspector(s)/Signature de l'inspecteur ou des inspecteurs**

**Original report signed by the inspector.**