

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

Public Report

Report Issue Date: January 8, 2026

Inspection Number: 2025-1558-0010

Inspection Type:

Complaint
Critical Incident

Licensee: The Corporation of the County of Hastings

Long Term Care Home and City: Hastings Manor Home for the Aged, Belleville

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): December 19, 22, 23, 30, 31, 2025 and January 5-8, 2026

The inspection occurred offsite on the following date(s): December 24, 2025

The following intake(s) were inspected:

- Intake: #00162886 - CI #M538-000077-25; Intake: #00163092 - CI #M538-000078-25; Intake: #00164344 - CI #M538-000081-25 - Outbreaks declared.
- Intake: #00163296 - CI #M538-000079-25; Intake: #00164533 - CI #M538-000082-25 - Fall of resident resulting in injury.
- Intake: #00163553 - CI #M538-000080-25 - Unexpected death of a resident.
- Intake: #00163634 - Complaint related to communication with Power of Attorney (POA).

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

- Resident Care and Support Services
- Infection Prevention and Control
- Falls Prevention and Management

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INSPECTION RESULTS

WRITTEN NOTIFICATION: When reassessment, revision is required

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

Non-compliance with: FLTCA, 2021, s. 6 (10) (b)

Plan of care

s. 6 (10) The licensee shall ensure that the resident is reassessed and the plan of care reviewed and revised at least every six months and at any other time when,
(b) the resident's care needs change or care set out in the plan is no longer necessary; or

A specified resident's written plan of care and bedside logo indicated the resident required a device for mobility. On December 30, 2025, inspector observed resident seated within the dining room, but could not locate the mobility aid. Interviews with staff confirmed that the resident no longer required the mobility aid.

Sources: Review of resident's written plan of care; Inspector Observations on December 30, 2025; Interviews with PSWs.

WRITTEN NOTIFICATION: CMOH and MOH

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

Non-compliance with: O. Reg. 246/22, s. 272

CMOH and MOH

s. 272. Every licensee of a long-term care home shall ensure that all applicable directives, orders, guidance, advice or recommendations issued by the Chief

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Medical Officer of Health or a medical officer of health appointed under the Health Protection and Promotion Act are followed in the home.

In accordance with the Recommendations for Outbreak Prevention and Control in Institutions and Congregate Living Settings (February 2025), Section 3.1, Alcohol-based hand rubs (ABHR) must not be expired. During inspector's observations on December 19, 2025, there was a hand pump ABHR located in the Maple Villa dining room, with an expiry date of September 18, 2024. There were six hand pumps noted throughout various areas of the home, that did not have expiry dates visible on the product.

Sources: Inspector observations on December 19, 2025