



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

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

**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**

**Health System Accountability and  
Performance Division  
Performance Improvement and  
Compliance Branch**

**Division de la responsabilisation et de la  
performance du système de santé  
Direction de l'amélioration de la  
performance et de la conformité**

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159 Cedar Street Suite 403  
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Bureau régional de services de  
Sudbury  
159 rue Cedar Bureau 403  
SUDBURY ON P3E 6A5  
Téléphone: (705) 564-3130  
Télécopieur: (705) 564-3133

## **Public Copy/Copie du public**

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<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>
Nov 27, 2015	2015_283544_0027	016534-15	Follow up

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### **Licensee/Titulaire de permis**

BOARD OF MANAGEMENT OF THE DISTRICT OF NIPISSING EAST  
400 Olive St. NORTH BAY ON P1B 6J4

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

CASELLHOLME  
400 OLIVE STREET NORTH BAY ON P1B 6J4

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

FRANCA MCMILLAN (544)

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

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**The purpose of this inspection was to conduct a Follow up inspection.**

**This inspection was conducted on the following date(s): November 9, 10, 11, 2015  
in relation to bed rails and Personal Assistance Service Devices (PASDs).**

**Log # 016534-15**

**During the course of the inspection, the inspector(s) spoke with Administrator,  
Director of Care, Registered Staff, Maintenance Personnel, Personal Support  
Workers, Residents and Families.**

**The inspector also toured the home, observed staff to resident interactions, staff  
providing care and services to residents, beds, mattresses and bed rail documents,  
reviewed the home's Restraint and Personal Assistance Service Devices policy,  
staff education and the staff attendance records regarding this policy, records of  
new beds, mattress keepers and mattresses purchased and reviewed residents'  
health care records.**

**The following Inspection Protocols were used during this inspection:  
Minimizing of Restraining**

**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)**

**The following previously issued Order(s) were found to be in compliance at the  
time of this inspection:**

**Les Ordre(s) suivants émis antérieurement ont été trouvés en conformité lors de  
cette inspection:**



REQUIREMENT/ EXIGENCE	TYPE OF ACTION/ GENRE DE MESURE	INSPECTION # / DE L'INSPECTION	NO	INSPECTOR ID #/ NO DE L'INSPECTEUR
O.Reg 79/10 s. 15. (1)	CO #002	2015_281542_0007		544
LTCHA, 2007 S.O. 2007, c.8 s. 29. (1)	CO #001	2015_281542_0007		544

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

Legend	Legendé
<p>WN – Written Notification  VPC – Voluntary Plan of Correction  DR – Director Referral  CO – Compliance Order  WAO – Work and Activity Order</p>	<p>WN – Avis écrit  VPC – Plan de redressement volontaire  DR – Aiguillage au directeur  CO – Ordre de conformité  WAO – Ordres : travaux et activités</p>
<p>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).</p> <p>The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.</p>	<p>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.</p> <p>Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.</p>



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**Issued on this 27th day of November, 2015**

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

**Original report signed by the inspector.**