

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:** November 20, 2025

**Inspection Number:** 2025-1479-0002

**Inspection Type:**  
Critical Incident

**Licensee:** The West Nipissing General Hospital

**Long Term Care Home and City:** The West Nipissing General Hospital, Sturgeon Falls

## INSPECTION SUMMARY

The inspection occurred onsite on the following dates: November 18-20, 2025

The following intake was inspected:

- One intake related to allegations of improper/incompetent care of a resident.

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

Resident Care and Support Services  
Reporting and Complaints

## INSPECTION RESULTS

### WRITTEN NOTIFICATION: Complaints Procedure

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

#### Non-compliance with: FLTCA, 2021, s. 26 (1) (a)

Complaints procedure — licensee

s. 26 (1) Every licensee of a long-term care home shall,

(a) ensure that there are written procedures that comply with the regulations for initiating complaints to the licensee and for how the licensee deals with complaints;

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At the time of the inspection, the home did not have a written policy or procedure for the management of complaints.

**Sources:** Interviews with home staff.

### **WRITTEN NOTIFICATION: Transferring techniques**

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

**Non-compliance with: O. Reg. 246/22, s. 40**

Transferring and positioning techniques

s. 40. Every licensee of a long-term care home shall ensure that staff use safe transferring and positioning devices or techniques when assisting residents.

A resident was not being transferred correctly, as per the resident's plan of care.

**Sources:** Resident health records, interviews with home staff, the home's investigation notes, and the home's policies.

### **WRITTEN NOTIFICATION: Dealing with complaints**

NC #003 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

**Non-compliance with: O. Reg. 246/22, s. 108 (2)**

Dealing with complaints

s. 108 (2) The licensee shall ensure that a documented record is kept in the home that includes,

- (a) the nature of each verbal or written complaint;
- (b) the date the complaint was received;
- (c) the type of action taken to resolve the complaint, including the date of the action, time frames for actions to be taken and any follow-up action required;
- (d) the final resolution, if any;
- (e) every date on which any response was provided to the complainant and a description of the response; and
- (f) any response made in turn by the complainant.

When the home received a complaint related to an allegation of improper care, the nature of the complaint, actions taken and follow-up were not documented and retained by the home.



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**Sources:** resident health records, interviews with home staff.



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