

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: February 23, 2026
Inspection Number: 2026-1407-0002
Inspection Type: Complaint Critical Incident
Licensee: St. Joseph's Care Group
Long Term Care Home and City: Hogarth Riverview Manor, Thunder Bay

INSPECTION SUMMARY

This is a modified inspection report to correct an error associated with NC #004.

The inspection occurred onsite on the following date(s): February 9-13, 17-20, 23, 2026

The inspection occurred offsite on the following date(s): February 18-20, 2026

The following intake(s) were inspected:

- An intake related to alleged improper/incompetent care of a resident by staff.
- An intake related to a fall of a resident resulting in injury.
- An intake related to alleged improper/incompetent care of a resident by staff.
- An intake related to a fall of a resident resulting in injury.
- An intake related to a fall of a resident resulting in injury.
- An intake related to an allegation of physical abuse of a resident by a resident.
- Complainant related to an allegation of resident abuse.

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

Contenance Care
Prevention of Abuse and Neglect
Falls Prevention and Management

INSPECTION RESULTS

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WRITTEN NOTIFICATION: When PASD may be used

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

Non-compliance with: FLTCA, 2021, s. 36 (3)

PASDs that limit or inhibit movement

s. 36 (3) Every licensee of a long-term care home shall ensure that a PASD described in subsection (1) is used to assist a resident with a routine activity of living only if the use of the PASD is included in the resident's plan of care.

The licensee had not ensured that a Personal Assistance Services Device (PASD) used to assist a resident with a routine activity had been included in the resident's plan of care.

Sources: A review of an identified resident's plan of care; A review of an identified critical incident and the home's investigation of the incident; and Interviews with a Personal Support Worker (PSW), a Registered Practical Nurse (RPN), and a Clinical Manager (CM).

WRITTEN NOTIFICATION: Falls prevention and management

NC #002 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.

The licensee had not ensured that when a resident had fallen, the resident was assessed post fall in accordance with the home's required policy.

Sources: A review of the home's policy titled *Falls Management and Prevention Program*; A review of an identified resident's progress notes; A review of an identified CI report and home's investigation; and interviews with a RPN, a PSW, and a CM.

WRITTEN NOTIFICATION: Continence care

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

Non-compliance with: O. Reg. 246/22, s. 56 (2) (b)

Continence care and bowel management

s. 56 (2) Every licensee of a long-term care home shall ensure that,

(b) each resident who is incontinent has an individualized plan, as part of their plan of care, to promote and manage bowel and bladder continence based on the assessment and that the plan is implemented;

A RPN did not perform continence care for a resident as identified in the resident's plan of care.

Sources: A CI; A resident's health records; Long-Term Care Home investigation file; and interviews with staff.

COMPLIANCE ORDER CO #001 Responsive behaviours

NC #004 Compliance Order pursuant to FLTCA, 2021, s. 154 (1) 2.

Non-compliance with: O. Reg. 246/22, s. 58 (4) (a)

Responsive behaviours

s. 58 (4) The licensee shall ensure that, for each resident demonstrating responsive behaviours,

(a) the behavioural triggers for the resident are identified, where possible;

The inspector is ordering the licensee to comply with a Compliance Order [FLTCA, 2021, s. 155 (1) (a)]:

The licensee shall:

1) Conduct a documented interdisciplinary review of an identified resident's responsive behaviours and update their plan of care.

2) Conduct a documented review of the home's process for identifying behavioural triggers in residents with responsive behaviours and the process for incorporating these triggers in the resident's plan of care. Identify any gaps that may exist and implement corrective action as indicated. Complete, and document any re-education with staff as required.

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Grounds

The triggers for two residents exhibiting responsive behaviours were not documented in the residents' plans of care.

Sources: A CI; two identified resident's health records; LTCH investigation file; a LTCH policy titled "Responsive Behaviours"; and interviews with staff.

This order must be complied with by April 10, 2026

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REVIEW/APPEAL INFORMATION

TAKE NOTICE The Licensee has the right to request a review by the Director of this (these) Order(s) and/or this Notice of Administrative Penalty (AMP) in accordance with section 169 of the Fixing Long-Term Care Act, 2021 (Act). The licensee can request that the Director stay this (these) Order(s) pending the review. If a licensee requests a review of an AMP, the requirement to pay is stayed until the disposition of the review.

Note: Under the Act, a re-inspection fee is not subject to a review by the Director or an appeal to the Health Services Appeal and Review Board (HSARB). The request for review by the Director must be made in writing and be served on the Director within 28 days from the day the order or AMP was served on the licensee.

The written request for review must include:

- (a) the portions of the order or AMP in respect of which the review is requested;
- (b) any submissions that the licensee wishes the Director to consider; and
- (c) an address for service for the licensee.

The written request for review must be served personally, by registered mail, email or commercial courier upon:

Director
c/o Appeals Coordinator
Long-Term Care Inspections Branch
Ministry of Long-Term Care
438 University Avenue, 8th floor
Toronto, ON, M7A 1N3
e-mail: MLTC.AppealsCoordinator@ontario.ca

If service is made by:

- (a) registered mail, is deemed to be made on the fifth day after the day of mailing
- (b) email, is deemed to be made on the following day, if the document was served after 4 p.m.
- (c) commercial courier, is deemed to be made on the second business day after the commercial courier received the document

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If the licensee is not served with a copy of the Director's decision within 28 days of receipt of the licensee's request for review, this(these) Order(s) is(are) and/or this AMP is deemed to be confirmed by the Director and, for the purposes of an appeal to HSARB, the Director is deemed to have served the licensee with a copy of that decision on the expiry of the 28-day period.

Pursuant to s. 170 of the Act, the licensee has the right to appeal any of the following to HSARB:

- (a) An order made by the Director under sections 155 to 159 of the Act.
- (b) An AMP issued by the Director under section 158 of the Act.
- (c) The Director's review decision, issued under section 169 of the Act, with respect to an inspector's compliance order (s. 155) or AMP (s. 158).

HSARB is an independent tribunal not connected with the Ministry. They are established by legislation to review matters concerning health care services. If the licensee decides to request an appeal, the licensee must give a written notice of appeal within 28 days from the day the licensee was served with a copy of the order, AMP or Director's decision that is being appealed from. The appeal notice must be given to both HSARB and the Director:

Health Services Appeal and Review Board

Attention Registrar
151 Bloor Street West, 9th Floor
Toronto, ON, M5S 1S4

Director

c/o Appeals Coordinator
Long-Term Care Inspections Branch
Ministry of Long-Term Care
438 University Avenue, 8th Floor
Toronto, ON, M7A 1N3
e-mail: MLTC.AppealsCoordinator@ontario.ca

Upon receipt, the HSARB will acknowledge your notice of appeal and will provide instructions regarding the appeal and hearing process. A licensee may learn more about the HSARB on the website www.hsarb.on.ca.



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

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