

Public Report

Report Issue Date: September 26, 2025

Inspection Number: 2025-1407-0004

Inspection Type:

Complaint

Critical Incident

Licensee: St. Joseph's Care Group

Long Term Care Home and City: Hogarth Riverview Manor, Thunder Bay

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): September 22 - 26, 2025

The following intake(s) were inspected:

- One intake related to a missing resident less than 3 hours;
- One intake related to an injury of a resident of an unknown cause;
- One intake related to improper/incompetent care of resident by staff;
- One intake related to complainant concerns re: alleged neglect and improper care of a resident; and
- Two intakes related to the fall of a resident resulting in injury.

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

Resident Care and Support Services
Continence Care
Recreational and Social Activities
Falls Prevention and Management

INSPECTION RESULTS

WRITTEN NOTIFICATION: Policies to be followed

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

Non-compliance with: O. Reg. 246/22, s. 11 (1) (b)

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

Policies, etc., to be followed, and records

s. 11 (1) Where the Act or this Regulation requires the licensee of a long-term care home to have, institute or otherwise put in place any plan, policy, protocol, program, procedure, strategy, initiative or system, the licensee is required to ensure that the plan, policy, protocol, program, procedure, strategy, initiative or system,
(b) is complied with.

The license has failed to ensure that when a policy was required by the act or the regulations, that the policy was complied with.

Sources: A resident's health records; Long-Term Care Home (LTCH) investigation file; LTCH policy titled "Care and Comfort Rounds", last updated October 2024; LTCH policy titled "Resident Outings", last updated November 2024; and interviews with staff and DOC.

WRITTEN NOTIFICATION: Continence care and bowel management

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

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

Continence care and bowel management

s. 56 (2) Every licensee of a long-term care home shall ensure that,
(c) each resident who is unable to toilet independently some or all of the time receives assistance from staff to manage and maintain continence;

The licensee has failed to ensure that a resident who was unable to toilet independently received assistance from staff to manage continence.

Sources: A resident's health records; Home's Policy: Continence Management Program, last updated October 2024; Home's internal investigation file; and interviews with a resident and staff.



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

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