

Ministry of Long-Term Care

Long-Term Care Operations Division
Long-Term Care Inspections Branch

London District

130 Dufferin Avenue, 4th Floor
London, ON, N6A 5R2
Telephone: (800) 663-3775

Public Report

Report Issue Date: November 24, 2025

Inspection Number: 2025-1357-0003

Inspection Type:

Critical Incident
Follow up

Licensee: S & R Nursing Homes Ltd.

Long Term Care Home and City: Afton Park Place Long Term Care Community,
Sarnia

INSPECTION SUMMARY

The inspection occurred onsite on the following dates: November 17 to 19, 21 and 24, 2025

The following intakes were inspected:

1. Intake #00160011/Critical Incident System (CIS) #2872-000038-25 related to allegations of neglect of a resident
2. Intake #00160124/CIS #2872-000039-25 related to allegations of resident to resident abuse
3. Intake: #00161497/CI #2872-000041-25 related to fall prevention and management
4. Follow-up #1 O. Reg. 246/22 - s. 55 (2) (b) (iv)

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Previously Issued Compliance Order(s)

The following previously issued Compliance Order(s) were found to be in compliance:

Order #001 from Inspection #2025-1357-0002 related to O. Reg. 246/22, s. 55 (2) (b) (iv)

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

- Skin and Wound Prevention and Management
- Prevention of Abuse and Neglect
- Responsive Behaviours
- Falls Prevention and Management

INSPECTION RESULTS

WRITTEN NOTIFICATION: Fall Prevention and Management

NC #001 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.

Staff #101 and staff #103 verified that a situation-specific assessment using a clinically appropriate assessment instrument related to the situation was not

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completed on a resident in October 2025.

Sources: a resident's electronic medical records review; Interview with staff #101 and staff #103