

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

Toronto District  
5700 Yonge Street, 5th Floor  
Toronto, ON, M2M 4K5  
Telephone: (866) 311-8002

## Public Report

**Report Issue Date:** August 6, 2025

**Inspection Number:** 2025-1007-0007

**Inspection Type:**  
Critical Incident

**Licensee:** Vigour Limited Partnership on behalf of Vigour General Partner Inc.

**Long Term Care Home and City:** Cheltenham Community, North York

## INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): July 30 - 31, 2025, and August 1, 5 - 6, 2025.

The following intake(s) were inspected:

- Intake: #00153929 / Critical Incident (CI) #0922-000024-25 was related to an unregistered practitioner.

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

Medication Management  
Staffing, Training and Care Standards

## INSPECTION RESULTS

### WRITTEN NOTIFICATION: Reporting Certain Matters To Director

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

**Non-compliance with: FLTCA, 2021, s. 28 (1) 3.**

Reporting certain matters to Director

s. 28 (1) A person who has reasonable grounds to suspect that any of the following has occurred or may occur shall immediately report the suspicion and the information upon which it is based to the Director:

3. Unlawful conduct that resulted in harm or a risk of harm to a resident.

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The licensee failed to report to the Director immediately when the home was informed that Registered Practical Nurse (RPN) had no current registration with the College of Nurses of Ontario (CNO) for a period of nearly five months. Executive Director (ED) was informed that an RPN who was employed in the home was not registered with the CNO, but the Director was informed after three days.

**Sources:** Review of CI, interview with Assistant Director Of Care (DOC) and Acting DOC and (ED).

### **WRITTEN NOTIFICATION: Security Of Drug Supply**

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

**Non-compliance with: O. Reg. 246/22, s. 139 2. i.**

Security of drug supply

s. 139. Every licensee of a long-term care home shall ensure that steps are taken to ensure the security of the drug supply, including the following:

2. Access to these areas shall be restricted to,

i. persons, other than personal support workers, who may dispense, prescribe or administer drugs in the home, and

The licensee has failed to ensure the security of the drug supply, when an RPN had access to areas where drugs were stored at a time when they were not registered with the CNO to dispense or administer drugs. The RPN was not registered with CNO for a period of nearly five months, and had access to drugs including controlled substances.

**Sources:** Review of CNO registration for RPN, medication administration audit report, internal investigation and interview with ADOC and Acting DOC and ED.

### **WRITTEN NOTIFICATION: Administration Of Drugs**

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

**Non-compliance with: O. Reg. 246/22, s. 140 (3) (b) (i)**

Administration of drugs

s. 140 (3) Subject to subsections (4) and (6), the licensee shall ensure that no person administers a drug to a resident in the home unless,

(b) where the administration does not involve the performance of a controlled act under

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subsection 27 (2) of the Regulated Health Professions Act, 1991, the person is,  
(i) a member of a regulated health profession and is acting within their scope of practice,

The licensee has failed to ensure that when an RPN administered drugs to residents in the home they were a member of a regulated health profession and acting within their scope of practice. The RPN was not registered with CNO for a period of nearly five months, while working as an RPN and administered drugs including controlled substances to residents in the home.

**Sources:** Review of CNO registration for RPN, medication administration audit report, internal investigation and interview with ADOC and ED.

## COMPLIANCE ORDER CO #001 Certification Of Nurses

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

**Non-compliance with: O. Reg. 246/22, s. 51**

Certification of nurses

s. 51. Every licensee of a long-term care home shall ensure that every member of the staff who performs duties in the capacity of registered nurse, registered practical nurse or registered nurse in the extended class has the appropriate current certificate of registration with the College of Nurses of Ontario or, in the case of an out of province nurse, a current certificate of registration with the governing body of their health profession. O. Reg. 246/22, s. 51; O. Reg. 202/23, s. 4.

**The Inspector is ordering the licensee to prepare, submit and implement a plan to ensure compliance with O. Reg. 246/22, s. 51 [FLTCA, 2021, s. 155 (1) (b)]:**

The plan must include:

- (a) Immediate auditing of the CNO registration of all registered nursing staff working in the home.
- (b) A policy or procedure to verify all registered nursing staff have the appropriate current certification of registration with the CNO, upon hire and remain entitled to practice on an annual basis and,
- (c) Education for all hiring managers and talent acquisition staff responsible for recruitment of registered nursing staff on the policy or procedure outlined in item (b),
- (d) individual(s) and their designation(s), responsible for implementing items (a), (b) and (c),

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(e) Maintain records of audits and education completed, to include, content of the education, registered staff names and designations audited, dates of audit(s) and education, person(s) completing the audit(s) and education, outcome and actions taken as a result of any deficiencies identified through auditing.

Please submit the written plan for achieving compliance for inspection #2025-1007-0007 to the LTC Homes Inspector, MLTC, by email, by August 20, 2025.

Please ensure that the submitted written plan does not contain any personal information or personal health information.

This plan shall be implemented by the compliance due date identified below.

### Grounds

The licensee has failed to ensure that an RPN who performed duties in the capacity of RPN, had the appropriate current certificate of registration with the College of Nurses of Ontario.

An individual was employed in the home for a period of nearly five months as a RPN, while they were not registered with the CNO. Assistant DOC and Acting DOC, ED, Team Member Experience Coordinator (TMED) and Director of Talent Acquisition acknowledged that the individual performed duties as RPN in identified time frame, without a certificate of registration with the CNO, as certificate of registration was never checked.

Failure to ensure that the individual who performed duties in the capacity of RPN had the appropriate current certificate of registration with the CNO, posed a risk of harm to the residents in the home.

**Sources:** Review of CI, internal investigation notes, employee file; interview with Assistant DOC and Acting DOC, ED, TMED and Director of Talent Acquisition.

**This order must be complied with by** October 10, 2025

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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, 8<sup>th</sup> floor  
Toronto, ON, M7A 1N3  
e-mail: [MLTC.AppealsCoordinator@ontario.ca](mailto: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, 9<sup>th</sup> Floor  
Toronto, ON, M5S 1S4

**Director**

c/o Appeals Coordinator  
Long-Term Care Inspections Branch  
Ministry of Long-Term Care  
438 University Avenue, 8<sup>th</sup> Floor  
Toronto, ON, M7A 1N3  
e-mail: [MLTC.AppealsCoordinator@ontario.ca](mailto: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](http://www.hsarb.on.ca).



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

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