

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:** April 14, 2026

**Inspection Number:** 2026-1007-0003

**Inspection Type:**  
Proactive Compliance Inspection

**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 dates: April 8-10, 13 and 14, 2026

The following intake(s) were inspected:

- Intake: #00174877 - Customized Proactive Compliance Inspection

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

Staffing, Training and Care Standards  
Pain Management

## INSPECTION RESULTS

### WRITTEN NOTIFICATION: Police Record Checks

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

**Non-compliance with: FLTCA, 2021, s. 81 (2)**

Screening measures

s. 81 (2) The screening measures shall include police record checks, unless the person being screened is under 18 years of age.

A Registered Nurse (RN) did not have a valid police record check at the time of their hire.

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**Sources:** RN's records; Interview with the Executive Director.

## WRITTEN NOTIFICATION: Pain Management

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

**Non-compliance with: O. Reg. 246/22, s. 57 (1) 4.**

Pain management

s. 57 (1) The pain management program must, at a minimum, provide for the following:

4. Monitoring of residents' responses to, and the effectiveness of, the pain management strategies.

The home's Pain and Symptom Management Policy directed staff to monitor and evaluate the effectiveness of pain medications in relieving residents pain using the pain scale in the vitals section of the electronic documentation system.

i) A review of a resident's clinical records revealed that staff had not completed a follow-up pain assessment on multiple dates when it was indicated.

**Sources:** Resident's clinical records; the home's policy for Pain and Symptom Management; and interview with the Associate Director of Care (ADOC).

ii) A review of a resident's clinical records revealed that staff had not completed a follow-up pain assessment on multiple dates when it was indicated.

**Sources:** Resident's clinical records, the home's policy for Pain and Symptom Management; and interview with the ADOC.



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

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