

**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:** March 14, 2025

**Inspection Number:** 2025-1388-0003

**Inspection Type:**

Proactive Compliance Inspection

**Licensee:** Extendicare (Canada) Inc.

**Long Term Care Home and City:** Extendicare Tecumseh, Tecumseh

## INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): March 10-14, 2025

The inspection occurred offsite on the following date(s): March 12-14, 2025

The following intake(s) were inspected:

- Intake: #00141688 - Proactive Compliance Inspection

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

Skin and Wound Prevention and Management  
Resident Care and Support Services  
Food, Nutrition and Hydration  
Medication Management  
Residents' and Family Councils  
Infection Prevention and Control  
Safe and Secure Home  
Prevention of Abuse and Neglect  
Quality Improvement  
Staffing, Training and Care Standards  
Residents' Rights and Choices  
Pain Management

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## INSPECTION RESULTS

### Non-Compliance Remedied

**Non-compliance** was found during this inspection and was **remedied** by the licensee prior to the conclusion of the inspection. The inspector was satisfied that the non-compliance met the intent of section 154 (2) and requires no further action.

NC #001 remedied pursuant to FLTCA, 2021, s. 154 (2)

**Non-compliance with: O. Reg. 246/22, s. 265 (1) 10.**

Posting of information

s. 265 (1) For the purposes of clause 85 (3) (s) of the Act, every licensee of a long-term care home shall ensure that the information required to be posted in the home and communicated to residents under section 85 of the Act includes the following:

10. The current version of the visitor policy made under section 267.

The licensee failed to ensure the current Visitor's Policy was posted.

The Visitor's Policy was posted.

**Sources:** Observation and staff interview.

Date Remedy Implemented: March 10, 2025

### WRITTEN NOTIFICATION: Windows

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

**Non-compliance with: O. Reg. 246/22, s. 19**

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Windows

s. 19. Every licensee of a long-term care home shall ensure that every window in the home that opens to the outdoors and is accessible to residents has a screen and cannot be opened more than 15 centimetres.

The licensee failed to ensure that a large sliding window, which was accessible to residents, could not have been opened more than 15 centimeters (cm) when the emergency stop was not functioning, and the door could have been opened to the full span of 89 cm.

**Sources:** Observation and staff interview.