

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

Central East District
33 King Street West, 4th Floor
Oshawa, ON, L1H 1A1
Telephone: (844) 231-5702

Public Report

Report Issue Date: April 14, 2026

Inspection Number: 2026-1544-0002

Inspection Type:

Complaint
Critical Incident
Follow up

Licensee: The Corporation of the City of Peterborough and The Corporation of the County of Peterborough

Long Term Care Home and City: Fairhaven, Peterborough

INSPECTION SUMMARY

The inspection occurred onsite on the following dates: April 9, 10, 13, & 14, 2026.

The following intakes were inspected:

- Follow-up #: 1 - Compliance Order (CO) #002/2025-1544-0007-O. Reg. 246/22 - s. 55 (2) (b) (i) Skin and Wound Care, Compliance Due Date (CDD) February 28, 2026.
- Follow-up #: 1 - CO #003/2025-1544-0007-O. Reg. 246/22 - s. 55 (2) (b) (ii) Skin and Wound Care, CDD February 28, 2026.
- A complaint regarding allegations of improper care of a resident.
- A complaint regarding allegations of improper care of a resident.
- An intake regarding an allegation of abuse.

Previously Issued Compliance Order(s)

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

- Order #002 from Inspection #2025-1544-0007 related to O. Reg. 246/22, s. 55 (2) (b) (i)
- Order #003 from Inspection #2025-1544-0007 related to O. Reg. 246/22, s. 55 (2) (b) (ii)

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

- Skin and Wound Prevention and Management
- Housekeeping, Laundry and Maintenance Services
- Prevention of Abuse and Neglect

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Residents' Rights and Choices
Reporting and Complaints

INSPECTION RESULTS

WRITTEN NOTIFICATION: Duty to protect

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

Non-compliance with: FLTCA, 2021, s. 24 (1)

Duty to protect

s. 24 (1) Every licensee of a long-term care home shall protect residents from abuse by anyone and shall ensure that residents are not neglected by the licensee or staff.

Ontario Regulation 246/22 s. 2(b) defines physical abuse as: the use of physical force by anyone other than a resident that causes physical injury or pain.

A staff member was alleged to have provided care in a manner that resulted in a change in the resident's skin integrity.

Sources: A Critical Incident Report, a resident's clinical records, the home's investigation files, and an interview with staff.

WRITTEN NOTIFICATION: Policy to promote zero tolerance

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

Non-compliance with: FLTCA, 2021, s. 25 (1)

Policy to promote zero tolerance

s. 25 (1) Without in any way restricting the generality of the duty provided for in section 24, every licensee shall ensure that there is in place a written policy to promote zero tolerance of abuse and neglect of residents, and shall ensure that the policy is complied with.

An allegation of abuse was not immediately reported by staff.



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

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Sources: A Critical Incident Report, the home's Zero Tolerance of Abuse policy, and an interview with staff.



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