

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

North District
159 Cedar St, Suite 403
Sudbury, ON, P3E 6A5
Telephone: (800) 663-6965

Public Report

Report Issue Date: October 23, 2025

Inspection Number: 2025-1524-0002

Inspection Type:
Critical Incident

Licensee: Haliburton Highlands Health Services Corporation

Long Term Care Home and City: Highland Wood, Haliburton

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): October 20 to 23, 2025.

The following intake(s) were inspected:

- One intake related to an outbreak in the home;
- One intake related to a fall incident of a resident that resulted in injuries;
- One intake related to an alleged physical abuse of a resident by a staff member, and
- One intake related to an improper/incompetent care of a resident by a staff member.

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

Resident Care and Support Services
Infection Prevention and Control
Prevention of Abuse and Neglect
Falls Prevention and Management

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

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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.

The licensee has failed to ensure that a resident was protected from abuse by a staff member, when they were witnessed by another staff member to display inappropriate behaviour towards the resident.

Sources: Critical Incident (CI) report; internal investigation notes; licensee policy; and, interviews 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.

The licensee has failed to ensure that the home's prevention of abuse policy was complied with, when there was an allegation of staff to resident abuse, and that the home's abuse checklist procedure was followed.

Sources: Resident's progress notes; internal investigation; licensee policy; and interviews with staff.

WRITTEN NOTIFICATION: Reporting Certain Matters to Director

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

Non-compliance with: FLTCA, 2021, s. 28 (1) 2.

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:

2. Abuse of a resident by anyone or neglect of a resident by the licensee or staff that resulted in harm or a risk of harm to the resident.

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The licensee has failed to ensure that when a staff member interact with a resident in a specific way, that the allegation was immediately reported to the Director, but it was not.

Sources: CI report; internal investigation notes; licensee policy; and, interviews with staff.



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

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