

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

<b>Report Issue Date:</b> March 6, 2026
<b>Inspection Number:</b> 2026-1524-0001
<b>Inspection Type:</b> Proactive Compliance Inspection
<b>Licensee:</b> Haliburton Highlands Health Services Corporation
<b>Long Term Care Home and City:</b> Highland Wood, Haliburton

## INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): March 2-5, 2026.

The following intake(s) were inspected:

- one intake related to a Proactive Compliance Inspection.

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

Resident Care and Support Services  
Housekeeping, Laundry and Maintenance Services

## 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: FLTCA, 2021, s. 19 (2) (c)**

Accommodation services

s. 19 (2) Every licensee of a long-term care home shall ensure that,

(c) the home, furnishings and equipment are maintained in a safe condition and in a

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good state of repair.

Upon entering a resident's room, it was observed that there was remedial maintenance that needed to be completed.

On March 4, 2026, after being made aware, the home ensured that the maintenance was completed.

**Sources:** Inspector observations; interview with the resident; and, interviews with staff.

Date Remedy Implemented: March 4, 2026

### **WRITTEN NOTIFICATION: Plan of Care**

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

**Non-compliance with: FLTCA, 2021, s. 6 (1) (c)**

Plan of care

s. 6 (1) Every licensee of a long-term care home shall ensure that there is a written plan of care for each resident that sets out,

(c) clear directions to staff and others who provide direct care to the resident.

The resident's plan of care did not provide clear direction to staff as it reflected multiple care instructions for the resident related to their care needs.

**Sources:** Inspector observations; the resident's care plan, and progress notes; and, interviews with staff.

### **WRITTEN NOTIFICATION: Maintenance Evaluation**

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

**Non-compliance with: O. Reg. 246/22, s. 34 (1) 3.**

General requirements

s. 34 (1) Every licensee of a long-term care home shall ensure that the following is complied with in respect of each of the organized programs required under sections 11 to 20 of the Act and each of the interdisciplinary programs required under section 53 of

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this Regulation:

3. The program must be evaluated and updated at least annually in accordance with evidence-based practices and, if there are none, in accordance with prevailing practices.

The home had not completed an annual evaluation for their maintenance program.

**Sources:** Interviews with staff.



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

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