

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: January 13, 2026

Inspection Number: 2026-1048-0001

Inspection Type:
Critical Incident

Licensee: Poranganel Holdings Limited

Long Term Care Home and City: King City Lodge Nursing Home, King City

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): January 7 - 9, 12 - 13, 2026.

The following intake(s) were inspected:

- Two intakes and two Critical Incident Reports (CIR) related to resident care and services.
- Two intakes and two CIRs related to missing controlled substances.

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

Resident Care and Support Services
Medication Management

INSPECTION RESULTS

WRITTEN NOTIFICATION: Pain management.

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

Non-compliance with: O. Reg. 246/22, s. 57 (2)

Pain management

s. 57 (2) Every licensee of a long-term care home shall ensure that when a resident's pain is not relieved by initial interventions, the resident is assessed using a clinically appropriate assessment instrument specifically designed for this purpose.

The resident was identified to have a new condition with pain during a shift. Interventions were

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applied but the pain remained. The required pain assessment tool was not completed at that time.

Sources: Critical Incident Report (CIR), the resident's electronic health records, and staff interview with the nurse manager.

WRITTEN NOTIFICATION: Medication Incidents and Adverse Reactions

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

Non-compliance with: O. Reg. 246/22, s. 147 (2)

Medication incidents and adverse drug reactions

s. 147 (2) In addition to the requirement under clause (1) (a), the licensee shall ensure that,

(a) all medication incidents, incidents of severe hypoglycemia, incidents of unresponsive hypoglycemia, adverse drug reactions and every use of glucagon are documented, reviewed and analyzed;

(b) corrective action is taken as necessary; and

(c) a written record is kept of everything required under clauses (a) and (b). O. Reg. 66/23, s. 30.

A medication incident had occurred on an identified date. The medication incident form had not been completed to include the root cause of the incident, corrective action to prevent recurrence, or the summary of the incident.

Additionally, another medication incident had occurred on another date for another resident. The medication incident form had not been completed to include causative factors, the root cause of the incident, corrective action to prevent recurrence, corrective action implementation dates, or the evaluation of the incident.

Sources: Critical Incident Report (CIRs) for the residents, Residents' plan of care related to controlled substances, progress notes, assessments, medication incident forms for both residents, controlled substance audits, interviews with Director of Care (DOC) #102 and the Registered Nurse (RN).



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

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