

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: March 3, 2026

Inspection Number: 2026-1391-0001

Inspection Type:
Proactive Compliance Inspection

Licensee: 2063414 Investment LP, by its general partner, 2063414 Ontario Limited

Long Term Care Home and City: Langstaff Square Community, Richmond Hill

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): February 19-20, 24-27, 2026, and March 2-3, 2026

The following intake(s) were inspected:

- Intake: #00170924 - Customized Proactive Compliance Inspection

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

Food, Nutrition and Hydration
Medication Management
Infection Prevention and Control

INSPECTION RESULTS

WRITTEN NOTIFICATION: Plan of care

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

Non-compliance with: O. Reg. 246/22, s. 29 (3) 13.

Plan of care

s. 29 (3) A plan of care must be based on, at a minimum, interdisciplinary assessment of the following with respect to the resident:

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13. Nutritional status, including height, weight and any risks relating to nutritional care.

Instructions in a resident's care plan outlined that the resident required total assistance in eating and that they utilized an assistive device when drinking but the diet list did not indicate that any assistive devices were required.

The home's Registered Dietitian (RD) indicated that the resident does not require the use of an assistive device for drinking and that the staff are to dispense the thickened fluids to the resident by using a teaspoon, yet there are no instructions in the plan of care.

Sources: Observations of meal and snack service, clinical Records for the resident, and interviews with staff.

WRITTEN NOTIFICATION: Menu planning

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

Non-compliance with: O. Reg. 246/22, s. 77 (2) (a)

Menu planning

s. 77 (2) The licensee shall ensure that, prior to being in effect, each menu cycle, (a) is reviewed by the Residents' Council for the home;

The fall-winter menu cycle was not reviewed by the Residents' Council for the home prior to the menu cycle being in effect. A town hall meeting was organized by the home's management and conducted as a "Food Committee" meeting. Although some residents participated in the town hall meeting, there was no opportunity for the Residents' Council for the home to formally and independently review the proposed menu cycle and provide input or approval.

Sources: The home's Menu Evaluation and Approval Record, Corporate Menu Cycle Approval Letter, Residents' Council Meeting Minutes, and interviews with a staff.

WRITTEN NOTIFICATION: Menu planning

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

Non-compliance with: O. Reg. 246/22, s. 77 (4) (c)

Menu planning

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s. 77 (4) The licensee shall ensure that each resident is offered a minimum of,
(c) a snack in the afternoon and evening. O. Reg. 246/22, s. 390 (1).

A resident was not offered a snack during a snack service. Resident noted to be intermittently sleepy during the snack, thus was not offered a snack. The home's RD that it is the home's expectation that staff should attempt to arouse the resident to offer snack.

Sources: Observations, clinical Records for resident, and interview with the home's RD.

WRITTEN NOTIFICATION: Menu planning

NC #004 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 77 (5)

Menu planning

s. 77 (5) The licensee shall ensure that the planned menu items are offered and available at each meal and snack. O. Reg. 246/22, s. 390 (1).

The planned snack menu included a certain snack, however, this item was not available and a different snack was served to the residents.

Sources: Observations, snack menu cycle, and interview with the home's staff.

WRITTEN NOTIFICATION: Dining and snack service

NC #005 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 79 (1) 4.

Dining and snack service

s. 79 (1) Every licensee of a long-term care home shall ensure that the home has a dining and snack service that includes, at a minimum, the following elements:

4. A process to ensure that food service workers and other staff assisting residents are aware of the residents' diets, special needs and preferences.

PSW staff did not refer to the dietary list before serving morning and afternoon snacks. The home's RD confirmed that the expected process would be for staff to consult the diet list prior to serving to a resident, as there may have been a change to the diet list.

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Sources: Observations, diet list on the snack cart, and interviews with staff.

WRITTEN NOTIFICATION: Dining and snack service

NC #006 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 79 (2) (b)

Dining and snack service

s. 79 (2) The licensee shall ensure that,

(b) no resident who requires assistance with eating or drinking is served a meal until someone is available to provide the assistance required by the resident.

Instructions in a resident's plan of care outlined that they required total assistance. During a meal service, resident was served the meal but did not receive assistance from staff later. PSW reported that the expectation is that residents are not served their meal until a staff member is present to provide assistance.

Sources: Observation, clinical Records for resident, and interview with staff.

WRITTEN NOTIFICATION: Safe storage of drugs

NC #007 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 138 (1) (b)

Safe storage of drugs

s. 138 (1) Every licensee of a long-term care home shall ensure that,

(b) controlled substances are stored in a separate, double-locked stationary cupboard in the locked area or stored in a separate locked area within the locked medication cart.

The narcotic storage bin for controlled substances within the medication cart was observed to be left unlocked after medication was retrieved, while the cart remained unattended by a Nurse .

Sources: Observation of the medication cart and interview with RPN.

WRITTEN NOTIFICATION: Administration of drugs

NC #008 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

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Non-compliance with: O. Reg. 246/22, s. 140 (2)

Administration of drugs

s. 140 (2) The licensee shall ensure that drugs are administered to residents in accordance with the directions for use specified by the prescriber. O. Reg. 246/22, s. 140 (2).

During a medication pass, a resident was administered a medication. However, the resident did not receive the entire dose of medication. A staff confirmed that the certain steps must be followed after medication administration to ensure the resident receives the full prescribed dosage.

Sources: Observation of the medication pass, resident's record review, and interview with staff.



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

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