

Ministry of Long-Term Care

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

Ottawa District

347 Preston Street, Suite 410
Ottawa, ON, K1S 3J4
Telephone: (877) 779-5559

Public Report

Report Issue Date: January 22, 2026
Inspection Number: 2026-1519-0001
Inspection Type: Critical Incident
Licensee: The Perley and Rideau Veterans' Health Centre
Long Term Care Home and City: The Perley and Rideau Veterans' Health Centre, Ottawa

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): January 9, 12, 13, 14, 16, 19, 20, 21 and 22, 2026
The inspection occurred offsite on the following date(s): January 15, 2026

The following intake(s) were inspected:
-Intake: #00163718 - related to a resident's fall resulting in a significant change in the resident's condition.
-Intake: #00164548 - related to a resident's fall resulting in a significant change in the resident's condition.
-Intake: #00166183 - relate to an outbreak.

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

- Skin and Wound Prevention and Management
- Infection Prevention and Control
- Falls Prevention and Management
- Restraints/Personal Assistance Services Devices (PASD) Management

Ministry of Long-Term Care

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

Ottawa District

347 Preston Street, Suite 410
Ottawa, ON, K1S 3J4
Telephone: (877) 779-5559

INSPECTION RESULTS

WRITTEN NOTIFICATION: Documentation

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

Non-compliance with: FLTCA, 2021, s. 6 (9) 1.

Plan of care

s. 6 (9) The licensee shall ensure that the following are documented:

1. The provision of the care set out in the plan of care.

Provision of a resident's care set out in their plan of care was not consistently documented by staff. Specifically, there was no documentation completed for the intervention/task pertaining to the resident's Personal Assistance Services Device for specific dates and time periods.

Sources: Point of Care Documentation Survey Report and interview with PSW Supervisor.

WRITTEN NOTIFICATION: Required programs

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

Non-compliance with: O. Reg. 246/22, s. 53 (1) 1.

Required programs

s. 53 (1) Every licensee of a long-term care home shall ensure that the following interdisciplinary programs are developed and implemented in the home:

1. A falls prevention and management program to reduce the incidence of falls and the risk of injury.

Ministry of Long-Term Care

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

Ottawa District

347 Preston Street, Suite 410
Ottawa, ON, K1S 3J4
Telephone: (877) 779-5559

Staff did not comply with the home's Fall prevention policy, last reviewed in January 2026, which was included in the licensee's Fall prevention program. The Fall prevention policy states "All residents will be rounded on hourly using comfort care rounding to proactively meet the needs of the resident". On a specific date, a Personal Support Worker did not complete the required hourly rounding for a resident.

Sources: Critical Incident Report, Fall Prevention policy and interview with Manager of Resident Care.