

**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:** March 6, 2026

**Inspection Number:** 2026-1519-0003

**Inspection Type:**

Critical Incident  
Follow up

**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): February 25 - 27, 2026  
and March 2 - 5, 2026

The following intake(s) were inspected:

- Intake: #00164767 - Follow-up #: 1 to CO #001 issued in 2025-1519-0012, related to O. Reg 246/22, s. 58 (4) (b), responsive behaviours, with a CDD of February 16, 2026.
- Intake: #00168856 - related to a fall of a resident resulting in injury.
- Intake: #00168902 - related to allegation of physical abuse of residents by staff.
- Intake: #00168911 - related to a fall of a resident resulting in injury.
- Intake: #00169579 - related to a fall of a resident resulting in injury.
- Intake: #00170513 - related to an outbreak.

## Previously Issued Compliance Order(s)

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The following previously issued Compliance Order(s) were found to be in compliance:

Order #001 from Inspection #2025-1519-0012 related to O. Reg. 246/22, s. 58 (4) (b)

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

- Infection Prevention and Control
- Responsive Behaviours
- Prevention of Abuse and Neglect
- Falls Prevention and Management

## INSPECTION RESULTS

### WRITTEN NOTIFICATION: Policy to promote zero tolerance

NC #001 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.

A registered staff member did not follow the licensee's policy: Resident Abuse and Neglect. Specifically related to reporting an incident of abuse, the supervisory staff member will notify the manager on call immediately. The unit manager confirmed that a registered staff did not notify the manager on call immediately when they were informed of an allegation of abuse toward a resident by a Personal Support

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Worker (PSW).

Sources: a Critical Incident report, investigation notes, Resident Abuse and Neglect Policy, the resident's health records, interview with a registered staff and unit manager.