

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

Central West District
609 Kumpf Drive, Suite 105
Waterloo, ON, N2V 1K8
Telephone: (888) 432-7901

Public Report

Report Issue Date: March 12, 2026

Inspection Number: 2026-1324-0002

Inspection Type:
Proactive Compliance Inspection

Licensee: Barrie Long Term Care Centre Inc.

Long Term Care Home and City: Roberta Place, Barrie

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): March 3 - 5 and March 9 - 12, 2026

The following intake(s) were inspected:

- Intake: #00171824 - Proactive Compliance Inspection

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

Skin and Wound Prevention and Management
Food, Nutrition and Hydration

INSPECTION RESULTS

WRITTEN NOTIFICATION: General requirements for programs

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

Non-compliance with: O. Reg. 246/22, s. 34 (2)

General requirements

s. 34 (2) The licensee shall ensure that any actions taken with respect to a resident under a program, including assessments, reassessments, interventions and the resident's responses to interventions are documented.

During a specified period of time, on six occasions, when a resident's treatment of a

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wound was not completed as prescribed, there was no documentation of the reassessment, interventions and the resident's response to the interventions provided.

Sources: resident's progress notes, electronic medication administration record (eMAR), and an interview with the Director of Care (DOC).

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) 2.

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:

2. A skin and wound care program to promote skin integrity, prevent the development of wounds and pressure injuries, and provide effective skin and wound care interventions.

A) The home's skin and wound care program policy indicated that the registered staff would reassess a resident's wounds weekly using Skin and Wound Module through Point Click Care (PCC). The registered nursing staff were required to complete all documentation outlined in the assessment which would serve as the referral to the Skin and Wound Lead for the resident's change in skin integrity and/or treatment.

i) During a specified period of time, multiple weekly skin and wound assessments of a resident's wound were missing documentation outlined in the assessment.

Sources: resident progress notes, weekly skin and wound assessments, the home's skin and wound care program, and interviews with a Registered Practical Nurse (RPN), the home's Skin and Wound Lead and the DOC.

ii) During a specified period of time, the skin and wound assessments of a resident's wound were missing documentation outlined in the assessment. Additionally, there were times that the skin and wound assessments were not completed accurately.

Sources: resident's progress notes, skin and wound assessments, the home's skin and wound care program, and interviews with a RPN and the DOC.

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B) The home's skin and wound care program policy indicated that complex wounds would be treated according to the Physician/Nurse Practitioner's orders.

On one occasion, the specific wound treatment was not provided to a resident as prescribed.

Sources: resident's progress notes, electronic medication administration record (eMAR), the home's skin and wound care program, the physician/nurse practitioner's orders, and interviews with a RPN and the DOC.

WRITTEN NOTIFICATION: Skin and wound care

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

Non-compliance with: O. Reg. 246/22, s. 55 (2) (b) (ii)

Skin and wound care

s. 55 (2) Every licensee of a long-term care home shall ensure that,
(b) a resident exhibiting altered skin integrity, including skin breakdown, pressure injuries, skin tears or wounds,
(ii) receives immediate treatment and interventions to reduce or relieve pain, promote healing, and prevent infection, as required,

A resident's wound was noted to have signs of an infection. The home's Nurse Practitioner was not informed until a week later and ordered treatment to promote wound healing.

Sources: resident's progress notes, dietary referrals, skin and wound assessments, and an interview with the DOC.

WRITTEN NOTIFICATION: Nutritional care and hydration programs

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

Non-compliance with: O. Reg. 246/22, s. 74 (2) (a)

Nutritional care and hydration programs

s. 74 (2) Every licensee of a long-term care home shall ensure that the programs include,

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(a) the development and implementation, in consultation with a registered dietitian who is a member of the staff of the home, of policies and procedures relating to nutritional care and dietary services and hydration;

On multiple days a resident's fluid intake was recorded to be less than 750 millilitres per day. The licensee's policy titled LTC Hydration Assessment and Monitoring was not implemented. Supplements administered during medication passes were not recorded into the additional fluid tab in Point of Care, progress notes, dehydration assessments and referrals to the Registered Dietitian were not completed as outlined in the policy.

Sources: review of resident's clinical records, Point Click Care Look Back Report for fluids in 24 hours, LTC Hydration Assessment and Monitoring Policy; interviews with Personal Support Worker (PSW), RPN, Registered Dietitian and DOC.



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

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