

Ministry of Long-Term Care

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

London District

130 Dufferin Avenue, 4th Floor
London, ON, N6A 5R2
Telephone: (800) 663-3775

Public Report

Report Issue Date: September 24, 2025

Inspection Number: 2025-1586-0004

Inspection Type:

Complaint
Critical Incident

Licensee: The Corporation of the County of Essex

Long Term Care Home and City: Sun Parlor Home for Senior Citizens, Leamington

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): September 18, 22, 23, and 24, 2025

The following intake(s) were inspected:

-Intake: #00157104 - Complaint - relating to allegations of neglect/ incompetent care and treatment.

-Intake: #00156848 -Critical Incident M579-000033-25 relating to allegations of neglect/ incompetent care and treatment.

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

Skin and Wound Prevention and Management

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INSPECTION RESULTS

WRITTEN NOTIFICATION: Duty of licensee to comply with plan

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

Non-compliance with: FLTCA, 2021, s. 6 (7)

Plan of care

s. 6 (7) The licensee shall ensure that the care set out in the plan of care is provided to the resident as specified in the plan.

The licensee failed to ensure that a resident's care was provided as specified in their plan of care. As a result of not following the plan of care the resident sustained an injury.

Sources: Resident records, Long-Term Care Home's (LTCH) investigation file and staff interviews.

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.

In accordance with Ontario Regulation 246/22, section 11 (1) (b), the licensee failed

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to ensure that the written policy titled, "Skin and Wound Care Management Protocol" was complied with when, a resident sustained a skin injury. The procedure in place was to ensure residents who had sustained a skin injury were assessed using the skin and wound assessment which included a pain assessment, the treatment orders were to be added to the Electronic Treatment Administration Record (ETAR) and treatments were to be signed off. When the resident had sustained a skin injury the procedure had not been followed.

Sources: Resident records, LTCH's internal investigation, LTCH's Policy and procedures and staff interviews.