

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: February 6, 2026

Inspection Number: 2026-1014-0001

Inspection Type:

Complaint
Critical Incident
Follow up

Licensee: Arch Long Term Care LP by its General Partner, Arch Long Term Care MGP, by its partners, Arch Long Term Care GP Inc. and Arch Capital Management Corporation

Long Term Care Home and City: Perth Community Care Centre, Perth

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): January 22, 26, 27, 29, 30, 2026, and February 2 - 6, 2026.

The following Follow-Up Inspection (FUI) intake(s) were inspected:

-Intake: #00163293 related to Follow-up #: 1 - FLTCA, 2021 - s. 19 (2) (c)- Accommodation Services with a compliance due date (CDD) of January 23, 2026.

The following Critical Incident (CI) intake(s) were inspected:

-Intakes: #00166813 / CI 0962-000001-26 and #00166841 / CI 0962-000002-26 related to infectious disease outbreaks.

-Intake: #00167728 / CI 0962-000004-26 related to alleged verbal abuse between residents.

-Intake: #00167970 / CI 0962-000005-26 related to the fall of a resident resulting in injury.

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The following complaint intake(s) were inspected:

-Intake: #00160826 related to a complaint with concerns regarding resident care, staffing, restorative and nutritional care.

Previously Issued Compliance Order(s)

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

Order #001 from Inspection #2025-1014-0008 related to FLTCA, 2021, s. 19 (2) (c)

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

- Resident Care and Support Services
- Skin and Wound Prevention and Management
- Food, Nutrition and Hydration
- Housekeeping, Laundry and Maintenance Services
- Infection Prevention and Control
- Responsive Behaviours
- Staffing, Training and Care Standards
- Falls Prevention and Management

INSPECTION RESULTS

WRITTEN NOTIFICATION: Plan of care.

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

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

Plan of care

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s. 6 (1) Every licensee of a long-term care home shall ensure that there is a written plan of care for each resident that sets out,

(a) the planned care for the resident;

On a specific date in January 2026, a resident had a fall with injury and on the same day fall interventions were implemented. The written plan of care was not updated to include the use of these interventions until a specific date in February 2026.

Sources: Resident's care plan, Kardex, and progress notes, observations of resident's room, and interviews with staff.

WRITTEN NOTIFICATION: Skin and wound care

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

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

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,

(i) receives a skin assessment by an authorized person described in subsection (2.1), using a clinically appropriate assessment instrument that is specifically designed for skin and wound assessment,

On a specific date in January 2026, a resident exhibited alterations in skin integrity as a result of an incident that resulted in an injury. A skin assessment was not completed at the time of the incident.

Sources: Resident's progress notes and assessments, licensee's Skin and Wound Care Interdisciplinary Team policy and procedure, and interviews with staff.

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WRITTEN NOTIFICATION: Administration of drugs

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

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).

On a specific date in December 2025, skin and wound treatments were prescribed by a provider for treatment of a resident's altered skin integrity. The resident's health records indicated that they did not receive the treatments as ordered by the provider until a specific date in January 2026, resulting in multiple missed treatment occurrences.

Sources: Interview with staff, prescriber's orders, resident's electronic treatment record, progress notes.