

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:** November 7, 2025

**Inspection Number:** 2025-1051-0007

**Inspection Type:**

Critical Incident

Follow up

**Licensee:** Axiom Extendicare LTC II LP, by its general partners Extendicare LTC Managing II GP Inc. and Axiom Extendicare LTC II GP Inc.

**Long Term Care Home and City:** Iler Lodge, Essex

## INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): November 4, 5, 6, and 7, 2025.

The following intake(s) were inspected:

-Intake #00154237/Follow-up #1- CO #001 from inspection #2025\_1051\_0004 related to posting of the daily menus.

-Intake: #00154238/Follow-up #02- CO #002 from inspection #2025-1051-0002 related to safe storage of medications.

-Intake #00160296/CI #2129-000039-25 related to alleged improper/Incompetent treatment or care of a resident.

-Intake #00161430/CI #2129-000040-25 related to falls prevention and management.

## Previously Issued Compliance Order(s)

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

Order #001 from Inspection #2025-1051-0004 related to O. Reg. 246/22, s. 79 (1) 1.

Order #002 from Inspection #2025-1051-0002 related to O. Reg. 246/22, s. 138 (1) (a) (ii)

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

Resident Care and Support Services  
Skin and Wound Prevention and Management

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Food, Nutrition and Hydration  
Staffing, Training and Care Standards  
Pain Management  
Falls Prevention and Management

## INSPECTION RESULTS

### WRITTEN NOTIFICATION: Required Programs

NC #001 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.

A resident required the use of a mechanical lift for all transfers. The home's fall prevention program included safe use of the lift as well as actions that should have been taken after the fall. The staff did not follow the home's fall prevention program during or after the fall which resulted in the resident sustaining injury and not receiving immediate assessment by a nurse.

Sources: The resident's clinical chart, the home's fall prevention and management program, and staff interviews.

### NOTICE OF RE-INSPECTION FEE

Pursuant to section 348 of O. Reg. 246/22 of the Fixing Long-Term Care Act, 2021, the licensee is subject to a re-inspection fee of \$500.00 to be paid within 30 days from the date of the invoice.

A re-inspection fee applies since this is, at minimum, the second follow-up inspection to determine compliance with the following Compliance Order(s) under s. 155 of the FLTCA, 2021, and/or s. 153 of the LTCHA, 2007.

Intake #00154238 relating to Follow-up #02 for CO #002 from Inspection # 2025-1051-0002.

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Licensees must not pay a Re-Inspection Fee from a resident-care funding envelope provided by the Ministry [i.e., Nursing and Personal Care (NPC); Program and Support Services (PSS); and Raw Food (RF)]. By submitting a payment to the Minister of Finance, the licensee is attesting to using funds outside a resident-care funding envelope to pay the Re-Inspection Fee.