

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: December 10, 2025

Inspection Number: 2025-1133-0006

Inspection Type:

Complaint
Critical Incident

Licensee: Extendicare (Canada) Inc.

Long Term Care Home and City: Summit Place, Owen Sound

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): December 1-5, and 9-10, 2025

The following intake(s) were inspected in this Critical Incident (CI) inspection:
-Intake #00160933 was related to falls prevention and management.

The following intake(s) were completed in this complaint inspection:
-Intake #00159223 was related to a complaint related to resident care and safe and secure home.

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

- Resident Care and Support Services
- Safe and Secure Home
- Falls Prevention and Management

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INSPECTION RESULTS

WRITTEN NOTIFICATION: Falls Prevention and Management

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

Non-compliance with: O. Reg. 246/22, s. 54 (2)

Falls prevention and management

s. 54 (2) Every licensee of a long-term care home shall ensure that when a resident has fallen, the resident is assessed and that a post-fall assessment is conducted using a clinically appropriate assessment instrument that is specifically designed for falls. O. Reg. 246/22, s. 54 (2); O. Reg. 66/23, s. 11.

A resident had an unwitnessed fall in their room. The head injury routine (HIR) was initiated, however, some of the assessments were not completed as per the home's policy to monitor the resident for a possible head injury.

Sources: Clinical records, the home's Post-Fall policy #CARE9-P10.02, and interviews with staff

WRITTEN NOTIFICATION: Pain Management

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

Non-compliance with: O. Reg. 246/22, s. 57 (1) 3.

Pain management

s. 57 (1) The pain management program must, at a minimum, provide for the following:

3. Comfort care measures.

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A resident was not assessed for pain during the night after returning to the home from being hospitalized.

Source: Clinical records, interview with staff, and the home's Pain Management policy #CARE9-P10.02.

WRITTEN NOTIFICATION: Complaints Procedure

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

Non-compliance with: O. Reg. 246/22, s. 108 (1) 3. i.

Dealing with complaints

s. 108 (1) Every licensee shall ensure that every written or verbal complaint made to the licensee or a staff member concerning the care of a resident or operation of the home is dealt with as follows:

3. The response provided to a person who made a complaint shall include,
 - i. the Ministry's toll-free telephone number for making complaints about homes and its hours of service and contact information for the patient ombudsman under the Excellent Care for All Act, 2010,

The home received a written complaint about resident care. The response provided to the person who made the complaint did not include the contact information for the Ministry of Long-Term Care (MLTC) and the Patient Ombudsman as per their policy on written concerns/complaints.

Sources: Complaints binder, the home's Written Concern or Complaint policy #CARE19-P30.03, and interview with staff

WRITTEN NOTIFICATION: Complaints Procedure

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

Non-compliance with: O. Reg. 246/22, s. 109 (1)

Additional requirements, s. 26 of the Act

s. 109 (1) A complaint that a licensee is required to immediately forward to the Director under clause 26 (1) (c) of the Act is a complaint that alleges harm or risk of harm, including, but not limited to, physical harm, to one or more residents.

The home did not immediately forward a complaint to the Director that alleged harm or risk of harm to residents.

Sources: The home's Written Concern or Complaint policy #CARE19-P30.03, and interview with staff