

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

Ministry of Long-Term Care

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

Hamilton District

119 King Street West, 11th Floor Hamilton, ON, L8P 4Y7 Telephone: (800) 461-7137

Public Report

Report Issue Date: August 7, 2025 Inspection Number: 2025-1392-0004

Inspection Type:Critical Incident

Licensee: Regency LTC Operating Limited Partnership, by it general partners,

Regency Operator GP Inc. and AgeCare Iris Management Ltd.

Long Term Care Home and City: AgeCare Glen Oaks, Oakville

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): July 15- 18 and 22- 24, 2025

The following intake(s) were inspected:

- Intake: #00147542 Critical Incident(CI) # 2908-000020-25 Related to Prevention of Abuse and Neglect
- Intake: #00149925 Critical Incident(CI) # 2908-000023-25 Related to Prevention of Abuse and Neglect

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

Prevention of Abuse and Neglect Responsive Behaviours

INSPECTION RESULTS

WRITTEN NOTIFICATION: Altercations and Other Interactions Between Residents

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

Non-compliance with: O. Reg. 246/22, s. 59 (b)

Altercations and other interactions between residents

s. 59. Every licensee of a long-term care home shall ensure that steps are taken to



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minimize the risk of altercations and potentially harmful interactions between and among residents, including,

(b) identifying and implementing interventions.

The licensee has failed to implement interventions to minimize the risk of potentially harmful interactions between two residents.

While attending a large group activity resident's were not monitored closely while seated close together, which resulted in a physical altercation causing injury to both residents.

Sources: Resident Progress Notes, Care Plans, AgeCare Glen Oaks Internal Investigation Notes, Critical Incident (CI) Report, and Staff Interviews.