

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

<b>Report Issue Date:</b> February 18, 2026
<b>Inspection Number:</b> 2026-1611-0001
<b>Inspection Type:</b> Complaint Critical Incident
<b>Licensee:</b> The Regional Municipality of Peel
<b>Long Term Care Home and City:</b> Tall Pines Long Term Care Centre, Brampton

## INSPECTION SUMMARY

**The inspection occurred onsite on the following date(s):** February 2-6, 10-13, 17, 2026

**The following critical incident intake(s) were inspected:**

- Intake: #00165786, #00166106 - related to Resident Care and Support Services
- Intake: #00165306 - related to Infection Prevention and Control

**The following complaint intake(s) were inspected:**

- Intake: #00166125 - related to Resident Care and Support Services

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

- Resident Care and Support Services
- Infection Prevention and Control

## 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 (9) 2.**

Plan of care

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- s. 6 (9) The licensee shall ensure that the following are documented:
2. The outcomes of the care set out in the plan of care.

Personal Support Workers (PSW) did not report resident care refusals to the nurse, and document the refusals in Point of Care (POC) for a resident.

Nursing staff did not document assessments and other pertinent information related to a resident for several days.

**Sources:** Resident Clinical Records, Camera Footage, interviews with Supervisor of Care (SOC) and other staff.

## WRITTEN NOTIFICATION: Infection Prevention and Control

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

**Non-compliance with: O. Reg. 246/22, s. 102 (2) (b)**

Infection prevention and control program

s. 102 (2) The licensee shall implement,

(b) any standard or protocol issued by the Director with respect to infection prevention and control. O. Reg. 246/22, s. 102 (2).

PSW's did not perform hand hygiene before and after donning and doffing gloves used for resident care. They also did not immediately remove and discard their gloves into a waste receptacle after the activity for which they were used and before exiting several resident rooms.

**Sources:** Camera Footage, IPAC Standard for Long-Term Care Homes (April 2022, revised September 2023), Public Health Ontario Routine Practices and Additional Precautions in All Health Care Settings (June 2025), interview with the SOC and other staff.

## COMPLIANCE ORDER CO #001 Transferring and Positioning Techniques

NC #003 Compliance Order pursuant to FLTCA, 2021, s. 154 (1) 2.

**Non-compliance with: O. Reg. 246/22, s. 40**

Transferring and positioning techniques

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s. 40. Every licensee of a long-term care home shall ensure that staff use safe transferring and positioning devices or techniques when assisting residents.

**The inspector is ordering the licensee to comply with a Compliance Order [FLTCA, 2021, s. 155 (1) (a)]:**

1) Ensure all Personal Support Workers on a specific unit receive in-person training and education on the home's safe lift and transfer policy and procedures, including two-person mechanical lifts, and ensuring the appropriate equipment is selected for the transfer.

a) Maintain a document in the home that includes the name and signature of staff who receive the education and who provided the education, a description of the education topics, and the date the education was provided.

2) Ensure all resident's on a specific unit who require a two-person mechanical lift transfer are audited to ensure they have the following requirements:

a) a current lift and transfer assessment documented in Point Click Care, which identifies the type of equipment the resident requires;

b) the lift and transfer assessment results are included in the resident's plan of care, including the type of equipment they require;

c) maintain a document in the home of the resident's who were audited, the results of the audit, the date of the audit, who it was conducted by, and the corrective actions taken, if any.

**Grounds**

A resident's transfer status had changed and there was no Lift and Transfer Assessment to determine the type of equipment they required for safe transfers, nor was this information included in their plan of care.

Staff was using equipment to transfer the resident against the manufactures instructions for use.

The resident was diagnosed with a significant injury and there was no documented trauma or incidents proceeding the diagnosis of the resident's injury.

**Sources:** Residents clinical records, the home's Lift and Transfer Policy and Procedure, Arjo Huntleigh Instructions for Use, the home's internal investigation, camera footage,



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interviews with staff.

**This order must be complied with by March 20, 2026**

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## REVIEW/APPEAL INFORMATION

**TAKE NOTICE** The Licensee has the right to request a review by the Director of this (these) Order(s) and/or this Notice of Administrative Penalty (AMP) in accordance with section 169 of the Fixing Long-Term Care Act, 2021 (Act). The licensee can request that the Director stay this (these) Order(s) pending the review. If a licensee requests a review of an AMP, the requirement to pay is stayed until the disposition of the review.

Note: Under the Act, a re-inspection fee is not subject to a review by the Director or an appeal to the Health Services Appeal and Review Board (HSARB). The request for review by the Director must be made in writing and be served on the Director within 28 days from the day the order or AMP was served on the licensee.

The written request for review must include:

- (a) the portions of the order or AMP in respect of which the review is requested;
- (b) any submissions that the licensee wishes the Director to consider; and
- (c) an address for service for the licensee.

The written request for review must be served personally, by registered mail, email or commercial courier upon:

**Director**

c/o Appeals Coordinator  
Long-Term Care Inspections Branch  
Ministry of Long-Term Care  
438 University Avenue, 8<sup>th</sup> floor  
Toronto, ON, M7A 1N3  
e-mail: [MLTC.AppealsCoordinator@ontario.ca](mailto:MLTC.AppealsCoordinator@ontario.ca)

If service is made by:

- (a) registered mail, is deemed to be made on the fifth day after the day of mailing
- (b) email, is deemed to be made on the following day, if the document was served after 4 p.m.
- (c) commercial courier, is deemed to be made on the second business day after the commercial courier received the document

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If the licensee is not served with a copy of the Director's decision within 28 days of receipt of the licensee's request for review, this(these) Order(s) is(are) and/or this AMP is deemed to be confirmed by the Director and, for the purposes of an appeal to HSARB, the Director is deemed to have served the licensee with a copy of that decision on the expiry of the 28-day period.

Pursuant to s. 170 of the Act, the licensee has the right to appeal any of the following to HSARB:

- (a) An order made by the Director under sections 155 to 159 of the Act.
- (b) An AMP issued by the Director under section 158 of the Act.
- (c) The Director's review decision, issued under section 169 of the Act, with respect to an inspector's compliance order (s. 155) or AMP (s. 158).

HSARB is an independent tribunal not connected with the Ministry. They are established by legislation to review matters concerning health care services. If the licensee decides to request an appeal, the licensee must give a written notice of appeal within 28 days from the day the licensee was served with a copy of the order, AMP or Director's decision that is being appealed from. The appeal notice must be given to both HSARB and the Director:

**Health Services Appeal and Review Board**

Attention Registrar  
151 Bloor Street West, 9<sup>th</sup> Floor  
Toronto, ON, M5S 1S4

**Director**

c/o Appeals Coordinator  
Long-Term Care Inspections Branch  
Ministry of Long-Term Care  
438 University Avenue, 8<sup>th</sup> Floor  
Toronto, ON, M7A 1N3  
e-mail: [MLTC.AppealsCoordinator@ontario.ca](mailto:MLTC.AppealsCoordinator@ontario.ca)

Upon receipt, the HSARB will acknowledge your notice of appeal and will provide instructions regarding the appeal and hearing process. A licensee may learn more about the HSARB on the website [www.hsarb.on.ca](http://www.hsarb.on.ca).



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