

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: February 2, 2026
Inspection Number: 2026-1426-0001
Inspection Type: Critical Incident
Licensee: Holland Christian Homes Inc.
Long Term Care Home and City: Grace Manor, Brampton

INSPECTION SUMMARY

The inspection occurred onsite on the following dates: January 28-30, 2026, and February 2, 2026

The following Critical Incident (CI) intake was inspected:
-Intake #00164096, related to a respiratory outbreak

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

Infection Prevention and Control

INSPECTION RESULTS

Non-Compliance Remedied

Non-compliance was found during this inspection and was **remedied** by the licensee prior to the conclusion of the inspection. The inspector was satisfied that the non-compliance met the intent of section 154 (2) and requires no further action.

NC #001 remedied pursuant to FLTCA, 2021, s. 154 (2)

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

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and control. O. Reg. 246/22, s. 102 (2).

The signage listing the signs and symptoms of infectious diseases for self-monitoring, as well as steps that must be taken if an infectious disease is suspected or confirmed in any individual, was not posted throughout the home.

On January 30, 2026, the signage was observed to be posted in various locations throughout the home.

Sources: Long-Term Care Homes (LTCH) Inspector's observations, IPAC Standard, April 2022, Revised September 2023, and an interview with staff.

Date Remedy Implemented: January 30, 2026

WRITTEN NOTIFICATION: Infection prevention and control program

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

Non-compliance with: O. Reg. 246/22, s. 102 (9) (b)

Infection prevention and control program

s. 102 (9) The licensee shall ensure that on every shift,

(b) the symptoms are recorded and that immediate action is taken to reduce transmission and isolate residents and place them in cohorts as required. O. Reg. 246/22, s. 102 (9).

When three residents had symptoms consistent with an infection, immediate actions to reduce transmission were not implemented as required. Additionally, a resident's symptoms were not recorded during a shift.

Sources: three residents' clinical records, Daily 24-hour symptom surveillance form, and interviews with staff.



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

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