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Public Report

Report Issue Date: March 13, 2026
Inspection Number: 2026-1427-0002
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 Westbury, Etobicoke

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): March 3-5, 9, 11-13, 2026

The following intakes were inspected on this Critical Incident (CI) inspection:
-Intake: #00168280 - CI: 2943-000001-26 - related to an injury of unknown cause, and continence care
-Intake: #00168900 - CI: 2943-000002-26 - related to prevention of abuse and neglect

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

Resident Care and Support Services
Skin and Wound Prevention and Management
Reporting and Complaints

INSPECTION RESULTS

WRITTEN NOTIFICATION: Reporting Certain Matters To Director

NC #001 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.
Non-compliance with: FLTCA, 2021, s. 28 (1) 2.
Reporting certain matters to Director
s. 28 (1) A person who has reasonable grounds to suspect that any of the following has occurred or may occur shall immediately report the suspicion and the information upon

which it is based to the Director:
2. Abuse of a resident by anyone or neglect of a resident by the licensee or staff that resulted in harm or a risk of harm to the resident.

The substitute decision maker of a resident informed the nursing staff of suspected abuse due to altered skin integrity. The Long Term Care Home (LTCH) did not immediately report suspicion of abuse to the Director.

Sources: CI: 2943-000002-26; Resident's clinical records; Abuse Allegation and Follow-up policy, LTC-ON-100-05-02, revised on November 2025; interview with the Director of Care (DOC).

WRITTEN NOTIFICATION: Skin and Wound Care

NC #002 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.
Non-compliance with: O. Reg. 246/22, s. 55 (2) (b) (i)
Skin and wound care
s. 55 (2) Every licensee of a long-term care home shall ensure that,
(b) a resident exhibiting altered skin integrity, including skin breakdown, pressure injuries, skin tears or wounds,
(i) receives a skin assessment by an authorized person described in subsection (2.1), using a clinically appropriate assessment instrument that is specifically designed for skin and wound assessment,

A resident's skin issue was brought to a Registered Practical Nurse's (RPN) attention by the resident’s substitute decision maker. The resident did not receive a skin assessment when the altered skin integrity was first noted by the staff prior to the discovery by the substitute decision maker.

Sources: Resident’s clinical records; Critical Incident (CI) 2943-000002-26; home’s investigation notes; Skin and Wound Care Program policy, LTC-ON-200-05-02, revised November 2025; interviews with the Personal Support Worker (PSW), RPN, and DOC.

WRITTEN NOTIFICATION: Dealing With Complaints

NC #003 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.
Non-compliance with: O. Reg. 246/22, s. 108 (2) (c)

Dealing with complaints
s. 108 (2) The licensee shall ensure that a documented record is kept in the home that includes,
(c) the type of action taken to resolve the complaint, including the date of the action, time frames for actions to be taken and any follow-up action required;

The LTCH received a verbal complaint regarding the care of a resident. No documentation record was kept in the home that included the type of action taken to resolve the complaint, including the date of the action, time frames for actions to be taken and any follow-up action required.

Sources: Resident’s clinical records; CI: 2943-000002-26; home's investigation notes; interviews with the RPN and DOC.

WRITTEN NOTIFICATION: Dealing With Complaints

NC #004 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.
Non-compliance with: O. Reg. 246/22, s. 108 (2) (d)
Dealing with complaints
s. 108 (2) The licensee shall ensure that a documented record is kept in the home that includes,
(d) the final resolution, if any;

The LTCH received a verbal complaint regarding the care of a resident. No documentation record was kept in the home that included the final resolution.

Sources: Resident’s clinical records; CI: 2943-000002-26; home's investigation notes; interviews with the RPN and DOC.