

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

London District  
130 Dufferin Avenue, 4th Floor  
London, ON, N6A 5R2  
Telephone: (800) 663-3775

## Public Report

**Report Issue Date:** February 19, 2026

**Inspection Number:** 2026-1526-0001

**Inspection Type:**  
Proactive Compliance Inspection

**Licensee:** The Leamington United Mennonite Home and Apartments

**Long Term Care Home and City:** Leamington Mennonite Home Long Term Care Residence, Leamington

## INSPECTION SUMMARY

The inspection occurred onsite on the following dates: February 10-13, 18-19, 2026  
The inspection occurred offsite on the following date: February 12, 2026

The following intake was inspected:  
- Intake: #00169626 - Proactive Compliance Inspection

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

Resident Care and Support Services  
Continence Care  
Infection Prevention and Control

## INSPECTION RESULTS

### WRITTEN NOTIFICATION: Oral care

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

**Non-compliance with: O. Reg. 246/22, s. 38 (1) (a)**

Oral care

s. 38 (1) Every licensee of a long-term care home shall ensure that each resident of the home receives oral care to maintain the integrity of the oral tissue that includes,

(a) mouth care in the morning and evening, including the cleaning of dentures;

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A resident did not receive mouth care in the morning and evening on three specified dates. The resident received oral care in the morning, however, it was documented that the resident did not receive oral care in the evening.

Sources: resident's clinical records, and interview staff #110

### **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).

A resident had tested positive for an infectious disease and was placed in isolation. A review of their clinical records indicated that the resident was not monitored for the presence of symptoms every shift as required during their isolation period.

Sources: resident clinical records, Facility Outbreak Line List, and an interview with staff #110.



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

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