

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: January 12, 2026

Inspection Number: 2026-1447-0001

Inspection Type:

Critical Incident
Follow up

Licensee: Axium Extendicare LTC II LP, by its general partners Extendicare LTC Managing II GP Inc. and Axium Extendicare LTC II GP Inc.

Long Term Care Home and City: McGarrell Place, London

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): January 6, 7, 8, 9, 12, 2026
The inspection occurred offsite on the following date(s): January 7, 2026

The following intake(s) were inspected:

- Intake: #00161177 - Follow-up #1 - CO #001 from inspection 2025-1447-0008 related to O. Reg. 246/22 - s. 102 (2) (b) IPAC Standards
- Critical Incident System (CIS) #2964-000036-25, intake: #00163689 concerning a resident fall with injury
- CIS #2964-000038-25, intake: #00164841 concerning resident injuries of unknown cause
- CIS #2964-000039-25, intake #00165597 concerning a resident fall with injury
- CIS #2964-000042-26, intake: #00166451 concerning a resident with a medical episode

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Previously Issued Compliance Order(s)

The following previously issued Compliance Order(s) were found to be in compliance:

Order #001 from Inspection #2025-1447-0008 related to O. Reg. 246/22, s. 102 (2) (b)

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

- Medication Management
- Infection Prevention and Control
- Pain Management
- Falls Prevention and Management

INSPECTION RESULTS

WRITTEN NOTIFICATION: Pain Management

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

Non-compliance with: O. Reg. 246/22, s. 53 (1) 4.

Required programs

s. 53 (1) Every licensee of a long-term care home shall ensure that the following interdisciplinary programs are developed and implemented in the home:

4. A pain management program to identify pain in residents and manage pain. O. Reg. 246/22, s. 53 (1); O. Reg. 66/23, s. 10.

Staff had not followed the home's pain management program by not initiating specific assessments and not notifying the Physician or NP of a resident's condition,

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which delayed interventions.

Sources: review of a CIS report, review of a resident's electronic medical records, home's policy "Pain Assessment and Evaluation" and interviews with the ADOC and the DOC.

WRITTEN NOTIFICATION: Pain Management

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

Non-compliance with: O. Reg. 246/22, s. 140 (2)

Administration of drugs

s. 140 (2) The licensee shall ensure that drugs are administered to residents in accordance with the directions for use specified by the prescriber. O. Reg. 246/22, s. 140 (2).

During an interview with Director of Care (DOC) they advised that staff should have administered pain medication when a resident had expressed pain.

Sources: review of a CIS report, review of the home's policy , review of a resident's electronic medical records and physician orders, interviews with the ADOC and DOC.