

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

Central East District
33 King Street West, 4th Floor
Oshawa, ON, L1H 1A1
Telephone: (844) 231-5702

Public Report

Report Issue Date: February 26, 2026

Inspection Number: 2026-1451-0002

Inspection Type:
Proactive Compliance Inspection

Licensee: The Mennonite Home Association of York County

Long Term Care Home and City: Parkview Home Long-Term Care, Stouffville

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): February 23 - 26, 2026.

The following intake(s) were inspected:
An intake was related to a Proactive Compliance Inspection.

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

Housekeeping, Laundry and Maintenance Services
Infection Prevention and Control
Falls Prevention and Management

INSPECTION RESULTS

WRITTEN NOTIFICATION: Falls prevention and management

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

Non-compliance with: O. Reg. 246/22, s. 54 (2)

Falls prevention and management

s. 54 (2) Every licensee of a long-term care home shall ensure that when a resident has fallen, the resident is assessed and that a post-fall assessment is conducted using a clinically appropriate assessment instrument that is specifically designed for falls. O. Reg. 246/22, s. 54 (2); O. Reg. 66/23, s. 11.

A post-fall assessment tool was not completed for a shift when the resident had experienced a fall

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on an identified date.

Sources: the resident's electronic health records, and interview with the Director of Clinical Operations (DOCO).

WRITTEN NOTIFICATION: CMOH and MOH

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

Non-compliance with: O. Reg. 246/22, s. 272

CMOH and MOH

s. 272. Every licensee of a long-term care home shall ensure that all applicable directives, orders, guidance, advice or recommendations issued by the Chief Medical Officer of Health or a medical officer of health appointed under the Health Protection and Promotion Act are followed in the home.

The Chief Medical Officer of Health's recommendations for Outbreak Prevention and Control in Institutions and Congregate Living Settings were not followed when expired alcohol-based hand rub (ABHR) was observed on February 23, 2026. Expired ABHR was found in three personal protective equipment (PPE) caddies for a resident in isolation. The expired ABHR was removed and replaced.

Sources: Observations, Recommendations for Outbreak Prevention and Control in Institutions and Congregate Living Settings.



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

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