

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: October 24, 2025

Inspection Number: 2025-1459-0007

Inspection Type:

Complaint

Licensee: St. Joseph's Health System

Long Term Care Home and City: St. Joseph's Lifecare Centre, Brantford

INSPECTION SUMMARY

The inspection occurred onsite on the following dates: October 14-17, and 21-24, 2025.

The following intakes were inspected:

- Intake: #00159397 - a complaint regarding care of a resident.

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

- Resident Care and Support Services
- Skin and Wound Prevention and Management
- Continence Care
- Food, Nutrition and Hydration
- Medication Management
- Safe and Secure Home
- Prevention of Abuse and Neglect
- Reporting and Complaints
- Falls Prevention and Management

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

INSPECTION RESULTS

WRITTEN NOTIFICATION: Plan of care

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

Non-compliance with: FLTCA, 2021, s. 6 (1) (c)

Plan of care

s. 6 (1) Every licensee of a long-term care home shall ensure that there is a written plan of care for each resident that sets out,

(c) clear directions to staff and others who provide direct care to the resident

The licensee has failed to ensure a resident's written plan of care provided clear direction to staff who provided direct care to the resident. The resident's care plan contradicted other clinical records for the amount of support the direct care staff were to provide the resident with an activity of daily living.

Sources: review of the resident's health care records and care plan, and staff interviews.

WRITTEN NOTIFICATION: Plan of care

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

Non-compliance with: FLTCA, 2021, s. 6 (7)

Plan of care

s. 6 (7) The licensee shall ensure that the care set out in the plan of care is provided to the resident as specified in the plan.

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

The licensee has failed to ensure care set out in a resident's plan of care was provided to the resident as specified in the plan, on multiple occasions.

Sources: review of complainant records, and staff interviews.

WRITTEN NOTIFICATION: Air temperature

NC #003 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 24 (3)

Air temperature

s. 24 (3) The temperature required to be measured under subsection (2) shall be documented at least once every morning, once every afternoon between 12 p.m. and 5 p.m. and once every evening or night.

The licensee has failed to ensure the temperature in two resident rooms in different parts of the home and a common area on every floor of the home was documented at least once every evening or night.

Sources: review of the home's air temperature logs, and staff interviews.

WRITTEN NOTIFICATION: Plan of care

NC #004 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 29 (3) 3.

Plan of care

s. 29 (3) A plan of care must be based on, at a minimum, interdisciplinary assessment of the following with respect to the resident:

3. Communication abilities, including hearing and language.

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

The licensee has failed to ensure a resident's plan of care was based on an interdisciplinary assessment of the resident's communication abilities. The resident's plan of care included the resident's communication ability, but interventions from the interdisciplinary assessment were not included in the resident's plan of care.

Sources: review of the resident's health care records and the home's care plan policy, and staff interviews.

WRITTEN NOTIFICATION: Skin and wound care

NC #005 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 55 (2) (b) (iv)

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,

(iv) is reassessed at least weekly by an authorized person described in subsection (2.1), if clinically indicated;

The licensee has failed to ensure a resident, who was exhibiting areas of altered skin integrity, was reassessed at least weekly when a reassessment was clinically indicated.

Sources: review of the resident's health care records, and staff interviews.

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

WRITTEN NOTIFICATION: Continence care and bowel management

NC #006 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 56 (2) (a)

Continence care and bowel management

s. 56 (2) Every licensee of a long-term care home shall ensure that,

(a) each resident who is incontinent receives an assessment that includes identification of causal factors, patterns, type of incontinence and potential to restore function with specific interventions, and that where the condition or circumstances of the resident require, an assessment is conducted using a clinically appropriate assessment instrument that is specifically designed for assessment of incontinence;

The licensee has failed to ensure a resident who was incontinent received an assessment specifically designed for the assessment of incontinence.

Sources: review of the resident's health care records and the home's continence care policy, and staff interviews.