

**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**

<b>Report Issue Date:</b> December 16, 2025
<b>Inspection Number:</b> 2025-1459-0008
<b>Inspection Type:</b> Complaint Critical Incident
<b>Licensee:</b> St. Joseph's Health System
<b>Long Term Care Home and City:</b> St. Joseph's Lifecare Centre, Brantford

**INSPECTION SUMMARY**

The inspection occurred onsite on the following date(s): December 2, 3, 4, 8, 9, 11, 15, 16, 2025

The inspection occurred offsite on the following date(s): December 10, 2025

The following intake(s) were inspected:

Intake #00159001/ Critical Incident System (CIS) #2025-0003312/2976-000027-25 related to fall of a resident.

Intake #00162379/ CIS #2976-000030-25 related to fall of a resident.

Intake #00162731 - complaint about medication administration.

Intake #00162871 - complaint about medication administration and resident care.

Intake #00162873 - complaint about medication administration.

Intake #00162996 - complaint about medication administration and alleged resident neglect.

Intake #00163304 - complaint about resident fall.

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

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Resident Care and Support Services  
Medication Management  
Staffing, Training and Care Standards  
Falls Prevention and Management

## INSPECTION RESULTS

### WRITTEN NOTIFICATION: Required programs

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

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

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:

1. A falls prevention and management program to reduce the incidence of falls and the risk of injury.

A resident had many falls within a two week period in September 2025 requiring a multi-disciplinary fall prevention and management intervention based on the home's Fall Prevention and Management Policy, but was not done.

**Sources:** Resident clinical records, home's Fall Prevention and Management Policy, and interview with Staff.

### WRITTEN NOTIFICATION: Medication management system

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

**Non-compliance with: O. Reg. 246/22, s. 123 (3) (a)**

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Medication management system

s. 123 (3) The written policies and protocols must be,

(a) developed, implemented, evaluated and updated in accordance with evidence-based practices and, if there are none, in accordance with prevailing practices; and

A Registered Practical Nurse (RPN) on multiple instances in November and December 2025 did not follow the home's policies for medication administration which resulted in situations where residents may not have received their full dose of medications or the medication cart was left unattended and unlocked, providing unauthorized access.

**Sources:** Home's Medication Cart and Medication Administration Policies, Disciplinary Action Letter for RPN, resident's clinical records, and staff interview.

## COMPLIANCE ORDER CO #001 Skin and wound care

NC #003 Compliance Order pursuant to FLTCA, 2021, s. 154 (1) 2.

**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,

**The inspector is ordering the licensee to comply with a Compliance Order [FLTCA, 2021, s. 155 (1) (a)]:**

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The licensee shall:

- A.** Retrain all registered nursing staff on Blue Bird and Canary Path home areas on the requirement to use the home's skin and wound evaluation tool in assessing residents skin injuries and wounds when they are admitted or readmitted into the home. Emphasize the need to assess residents' surgical wounds on the same day of admission or readmission from hospital, and requirement for weekly wound assessments when residents return from hospital with a wound. Keep records of materials used for training, the trainer, dates, and staff trained.
  
- B.** Audit all residents being readmitted from the hospital with surgical wounds into the home for required skin and wound assessment using the home's appropriate tools per home's policy. Keep records of all audits completed and any interventions taken, until this order is complied by an inspector.

**Grounds**

- A.** A resident returned from hospital with a wound. A Skin and Wound care assessment was not completed for the resident using a clinically appropriate assessment tool as required by the home's policy.
  
- B.** Another resident returned from the hospital with a wound. The resident did not immediately receive Skin and Wound assessment using the home's clinically approved assessment tool until 11 days after their return from the hospital.

The home's policy required that any resident who returned from the hospital with a wound should receive a skin assessment by a member of the registered nursing staff using an appropriate assessment tool such as the 'Skin and Wound Evaluation' assessment tool in the skin and wound app.

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**Sources:** Residents clinical records, home's Skin & Wound Management Program Policy, and interview with staff.

This **order must be complied** with by January 23, 2026

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## REVIEW/APPEAL INFORMATION

**TAKE NOTICE** The Licensee has the right to request a review by the Director of this (these) Order(s) and/or this Notice of Administrative Penalty (AMP) in accordance with section 169 of the Fixing Long-Term Care Act, 2021 (Act). The licensee can request that the Director stay this (these) Order(s) pending the review. If a licensee requests a review of an AMP, the requirement to pay is stayed until the disposition of the review.

Note: Under the Act, a re-inspection fee is not subject to a review by the Director or an appeal to the Health Services Appeal and Review Board (HSARB). The request for review by the Director must be made in writing and be served on the Director within 28 days from the day the order or AMP was served on the licensee.

The written request for review must include:

- (a) the portions of the order or AMP in respect of which the review is requested;
- (b) any submissions that the licensee wishes the Director to consider; and
- (c) an address for service for the licensee.

The written request for review must be served personally, by registered mail, email or commercial courier upon:

**Director**

c/o Appeals Coordinator  
Long-Term Care Inspections Branch  
Ministry of Long-Term Care  
438 University Avenue, 8<sup>th</sup> floor  
Toronto, ON, M7A 1N3

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e-mail: [MLTC.AppealsCoordinator@ontario.ca](mailto:MLTC.AppealsCoordinator@ontario.ca)

If service is made by:

- (a) registered mail, is deemed to be made on the fifth day after the day of mailing
- (b) email, is deemed to be made on the following day, if the document was served after 4 p.m.
- (c) commercial courier, is deemed to be made on the second business day after the commercial courier received the document

If the licensee is not served with a copy of the Director's decision within 28 days of receipt of the licensee's request for review, this(these) Order(s) is(are) and/or this AMP is deemed to be confirmed by the Director and, for the purposes of an appeal to HSARB, the Director is deemed to have served the licensee with a copy of that decision on the expiry of the 28-day period.

Pursuant to s. 170 of the Act, the licensee has the right to appeal any of the following to HSARB:

- (a) An order made by the Director under sections 155 to 159 of the Act.
- (b) An AMP issued by the Director under section 158 of the Act.
- (c) The Director's review decision, issued under section 169 of the Act, with respect to an inspector's compliance order (s. 155) or AMP (s. 158).

HSARB is an independent tribunal not connected with the Ministry. They are established by legislation to review matters concerning health care services. If the licensee decides to request an appeal, the licensee must give a written notice of appeal within 28 days from the day the licensee was served with a copy of the order, AMP or Director's decision that is being appealed from. The appeal notice must be given to both HSARB and the Director:

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**Health Services Appeal and Review Board**

Attention Registrar  
151 Bloor Street West, 9<sup>th</sup> Floor  
Toronto, ON, M5S 1S4

**Director**

c/o Appeals Coordinator  
Long-Term Care Inspections Branch  
Ministry of Long-Term Care  
438 University Avenue, 8<sup>th</sup> Floor  
Toronto, ON, M7A 1N3  
e-mail: [MLTC.AppealsCoordinator@ontario.ca](mailto:MLTC.AppealsCoordinator@ontario.ca)

Upon receipt, the HSARB will acknowledge your notice of appeal and will provide instructions regarding the appeal and hearing process. A licensee may learn more about the HSARB on the website [www.hsarb.on.ca](http://www.hsarb.on.ca).