

**Order of the Director
Public Report
Cover Sheet****Date of the Order:** September 4, 2025**Director Order Number:** DO #001**Order Type:** Compliance Order s. 155 (1) (a)**Licensee:** Partners Community Health**Long Term Care Home and City:** Wellbrook Place West, Mississauga**ORDER OF THE DIRECTOR SUMMARY**

Compliance Orders (CO) #002, #005 and #006 were issued in inspection report #2025-1708-0003 for the licensee's non-compliance with s. 55(2)(b)(i), (ii) and (iv) of O. Reg. 246/22 (Regulation) under the Fixing Long-Term Care Act, 2021 (FLTCA).

Following the Director's review of CO #002, #005 and #006 pursuant to s. 169 of the FLTCA, CO #002, #005 and #006 are altered and substituted by the Director's Order below.

Order of the Director Public Report

Date of the Order: September 4, 2025

Director Order Number: DO #001

Order Type: Compliance Order s. 155 (1) (a)

Licensee: Partners Community Health

Long Term Care Home and City: Wellbrook Place West, Mississauga

ORDER OF THE DIRECTOR SUMMARY

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Following the Director's review of CO #002, #005 and #006 pursuant to s. 169 of the FLTCA, CO #002, #005 and #006 are altered and substituted by the Director's Order below.

Background

Compliance Orders (CO) #002, #005 and #006 were issued in inspection report #2025-1708-0003 for the licensee's non-compliance with s. 55(2)(b)(i), (ii) and (iv) of O. Reg. 246/22 (Regulation) under the Fixing Long-Term Care Act, 2021 (FLTCA).

Following the Director's review of CO #002, #005 and #006 pursuant to s. 169 of the FLTCA, CO #002, #005 and #006 are altered and substituted by the Director's Order below.

Order: DO #001

To Partners Community Health, you are hereby required to comply with the following order by the date(s) set out below:

Pursuant to

Order pursuant to FLTCA, 2021,

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

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,

(ii) receives immediate treatment and interventions to reduce or relieve pain, promote healing, and prevent infection, as required,

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

Order

Partners Community Health, ('the licensee') is ordered to:

1. Complete a full review of the home's skin and wound care program and revise applicable policies and procedures as necessary, to ensure the following:
 - a. Identification and documentation of all residents exhibiting altered skin integrity, including skin breakdown, pressure injuries, skin tears or wounds on head-to-toe assessments on admission and return of residents to the home.

- b. Skin assessments are completed in full, by an authorized person described in subsection 55(2.1) of O. Reg. 246/22, for all residents exhibiting altered skin integrity, including skin breakdown, pressure injuries, skin tears or wounds. Sufficient skin and wound care staffing to complete all weekly skin assessments, or any other required or necessary skin assessments, and a back-up plan for when scheduled assessments cannot be completed on a particular shift.
 - c. A process to ensure that when skin and wound assessments indicate signs of infection or deterioration, immediate treatment and interventions are provided to the affected resident.
 - d. A regular auditing process to ensure staff adhere to the skin and wound care program, including a documented record of audits and corrective actions taken as a result.
2. Keep a documented record of the review and any changes made to the skin and wound care program as a result.
3. If changes are made to the skin and wound care program as a result of the review, ensure staff who are involved and deliver the skin and wound care program are educated on these changes and keep a record of who receives the education and the date(s) it was received.

Grounds

S. 55(2)(b)(i) of O. Reg. 246/22

1) The licensee has failed to ensure that identified residents, when exhibiting altered skin integrity, received a skin assessment by an authorized person described in subsection 55(2.1), using a clinically appropriate assessment instrument that is specifically designed for skin and wound assessment.

S. 55(2)(b)(ii) of O. Reg. 246/22

2) The licensee failed to ensure that the identified resident, when exhibiting altered skin integrity, received immediate treatment and interventions to reduce or relieve pain, promote healing, and prevent infection, as required.

S. 55(2)(b)(iv) of O. Reg. 246/22

3) The licensee failed to ensure that the identified residents, when exhibiting altered skin integrity, were reassessed at least weekly by an authorized person described in subsection 55(2.1), when clinically indicated.

This order must be complied with by: October 15, 2025

REVIEW/APPEAL INFORMATION

TAKE NOTICE

Pursuant to s. 170 of the Fixing Long-term Care Act, 2021 the licensee has the right to appeal any of the following to Health Service Appeal Review Board (HSARB):

Ministry of Long-Term Care

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

Order of the Director

Long-Term Care Inspections Branch
Ministry of Long-Term Care
438 University Avenue, 8th floor
Toronto, ON, M7A 1N3

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:

Health Services Appeal and Review Board

Attention Registrar
151 Bloor Street West, 9th Floor
Toronto, ON M5S 1S4

Director

c/o Appeals Coordinator
Long-Term Care Inspections Branch
Ministry of Long-Term Care
438 University Avenue, 8th Floor
Toronto, ON M7A 1N3
email:
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.