

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: March 2, 2026

Inspection Number: 2026-1047-0001

Inspection Type:

Proactive Compliance Inspection

Licensee: Caessant-Care Nursing and Retirement Homes Limited

Long Term Care Home and City: The Maples Home for Seniors, Tavistock

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): February 23, 24, 25, 2026 and March 2, 2026

The following intake(s) were inspected:

- Intake #00169330 - Proactive Compliance Inspection

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

Resident Care and Support Services
Infection Prevention and Control
Safe and Secure Home
Recreational and Social Activities

INSPECTION RESULTS

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WRITTEN NOTIFICATION: Documentation

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

Non-compliance with: FLTCA, 2021, s. 6 (9) 1.

Plan of care

s. 6 (9) The licensee shall ensure that the following are documented:

1. The provision of the care set out in the plan of care.

Record reviewed during inspection indicated that there was no documentation of baths provided for two residents. There was no documentations if the baths were missed or provided, and if missed why the baths were missed.

Sources: Resident clinical records, and staff interview.

WRITTEN NOTIFICATION: Doors in a home

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

Non-compliance with: O. Reg. 246/22, s. 12 (1) 3.

Doors in a home

s. 12 (1) Every licensee of a long-term care home shall ensure that the following rules are complied with:

3. All doors leading to non-residential areas must be equipped with locks to restrict unsupervised access to those areas by residents, and those doors must be kept closed and locked when they are not being supervised by staff.

The Barber and Beauty Salon door was observed to be open with no resident or staff in the room or close by during inspection. There were items on the counter that posed a risk to residents.

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Sources: Observation and staff interview.

**WRITTEN NOTIFICATION: Infection prevention and control
program**

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

Non-compliance with: O. Reg. 246/22, s. 102 (2) (b)

Infection prevention and control program

s. 102 (2) The licensee shall implement,

(b) any standard or protocol issued by the Director with respect to infection prevention and control. O. Reg. 246/22, s. 102 (2).

Two residents on additional precautions were found without signage at the entrances of their rooms during inspection.

Sources: Observations, and staff interviews.