

Ministry of Long-Term Care

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

Ottawa District

347 Preston Street, Suite 410
Ottawa, ON, K1S 3J4
Telephone: (877) 779-5559

Public Report

Report Issue Date: September 17, 2025

Inspection Number: 2025-1297-0003

Inspection Type:

Critical Incident

Licensee: Arch Long Term Care LP by its General Partner, Arch Long Term Care MGP, by its partners, Arch Long Term Care GP Inc. and Arch Capital Management Corporation

Long Term Care Home and City: Wellington House Nursing Home, Prescott

INSPECTION SUMMARY

The inspection occurred onsite on the following dates: September 10, 11, 12, 15, 16, 2025

The following intake was completed in this Critical Incident (CI) inspection:

Intake #00155000/CI#2807-000024-25 related to allegations of abuse by staff towards a resident.

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

Prevention of Abuse and Neglect

Restraints/Personal Assistance Services Devices (PASD) Management

INSPECTION RESULTS

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COMPLIANCE ORDER CO #001 Duty to protect

NC #001 Compliance Order pursuant to FLTCA, 2021, s. 154 (1) 2.

Non-compliance with: FLTCA, 2021, s. 24 (1)

Duty to protect

s. 24 (1) Every licensee of a long-term care home shall protect residents from abuse by anyone and shall ensure that residents are not neglected by the licensee or staff.

The inspector is ordering the licensee to comply with a Compliance Order

[FLTCA, 2021, s. 155 (1) (a)]:

The licensee shall:

1. Provide training to all Personal Support Workers (PSW's) including three specific PSW staff, and one specific RPN on emotional abuse as per legislative definition and actions to be taken, such as immediate interventions to protect residents when information is known that meets the definition.
2. Provide training to all registered staff and PSW staff on the home's policy and procedures related to consent to treatment.
3. Keep a written record of all training that shall include a copy of the training provided to all registered and PSW staff, the date and time of the training, the name of the person who provided the training and must be kept until the Ministry of Long-Term Care has deemed that the licensee has complied with this order.

Grounds

The licensee failed to protect a specific resident from emotional abuse by a specific RN, and three specific PSWs, on a specific date.

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O. Reg 246/22 s. 2 (1) (a) defines emotional abuse as any threatening, insulting, intimidating, or humiliating gestures, actions, behaviors, or remarks, including imposed social isolation, shunning, ignoring, lack of acknowledgment, or infantilization, committed by anyone other than the resident.

On a specific date a specific resident refused the administration of a specific medication. Despite the resident's refusal, the RN, with assistance from the PSW staff, proceeded to administer the medication. This caused the resident to experience emotional distress.

Sources: Interviews with DOC, three PSWs, Two RPNs, ACSS, Impact Assessment Scale (IAS) on August 13, 2025, Policy_C45_Consent to Treatment, Investigation Report, Policy_P-10-Resident Abuse and Neglect, Resident clinical records

This order must be complied with by October 27, 2025

**COMPLIANCE ORDER CO #002 Reporting certain matters to
Director**

NC #002 Compliance Order pursuant to FLTCA, 2021, s. 154 (1) 2.

Non-compliance with: FLTCA, 2021, s. 28 (1) 2.

Reporting certain matters to Director

s. 28 (1) A person who has reasonable grounds to suspect that any of the following has occurred or may occur shall immediately report the suspicion and the information upon which it is based to the Director:

2. Abuse of a resident by anyone or neglect of a resident by the licensee or staff that resulted in harm or a risk of harm to the resident.

The inspector is ordering the licensee to comply with a Compliance Order

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[FLTCA, 2021, s. 155 (1) (a)]:

The licensee shall:

1. Provide training to all Personal Support Workers (PSW's), including Three specific PSWs and a specific RPN, on the legislative requirement under FLTCA, 2021 s. 28 (1) related to the reporting of allegations of abuse of a resident by anyone or neglect of a resident by the licensee or staff that resulted in harm or a risk of harm to the resident.
2. Keep a written record of all training that shall include a copy of the training provided to all Registered and PSW staff, the date and time of the training, the name of the person who provided the training and must be kept until the Ministry of Long-Term Care has deemed that the licensee has complied with this order.

Grounds

This licensee has failed to immediately report to the Director an allegation of emotional abuse towards as specific resident on a specific date by specific staff members.

Sources: Interviews with Director of Care (DOC), Two RPNs, Three Personal Support Worker (PSW), Policy: Resident Rights Abuse and Neglect (reviewed March 4, 2025)

This order must be complied with by October 27, 2025

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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, 8th floor
Toronto, ON, M7A 1N3

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e-mail: 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, 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
e-mail: 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.