

Ministry of Long-Term Care

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

Central West District

609 Kumpf Drive, Suite 105
Waterloo, ON, N2V 1K8
Telephone: (888) 432-7901

Public Report

Report Issue Date: January 28, 2026

Inspection Number: 2026-1075-0001

Inspection Type:

Complaint
Critical Incident

Licensee: Iris L.P., by its general partners, Iris GP Inc. and AgeCare Iris Management Ltd.

Long Term Care Home and City: AgeCare Elmira, Elmira

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): January 19- 23, 27, 28, 2026

The inspection occurred offsite on the following date(s): January 26, 2026

The following intake(s) were inspected:

-Intake: #00165096 and Intake: #00166577: Related to Infection Prevention and Control.

-Intake: #00166056 and Intake: #00166325: Related to a complaint regarding multiple care concerns.

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

- Skin and Wound Prevention and Management
- Housekeeping, Laundry and Maintenance Services
- Medication Management
- Infection Prevention and Control

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Prevention of Abuse and Neglect

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 (9) 2.

Plan of care

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

2. The outcomes of the care set out in the plan of care.

Staff did not accurately document a resident's refusal of care on one occasion, when they documented in the resident's record that the care was completed.

Sources: An observation, a resident's clinical records, and interviews with staff.

WRITTEN NOTIFICATION: Required programs

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

Non-compliance with: O. Reg. 246/22, s. 53 (1) 2.

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:

2. A skin and wound care program to promote skin integrity, prevent the development of wounds and pressure injuries, and provide effective skin and wound care interventions.

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The home's skin and wound policy required staff to ensure a total body assessment was completed when a resident returned from hospital. This did not occur for a resident.

Sources: Home's skin and wound policy, and interviews with staff.

WRITTEN NOTIFICATION: Skin and wound care

NC #003 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;

A resident's weekly skin assessments were not completed within seven days, on two occasions.

Sources: A resident's clinical records, the home's skin and wound policy, and interviews with staff.

WRITTEN NOTIFICATION: Medication management system

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

Non-compliance with: O. Reg. 246/22, s. 123 (2)

Medication management system

s. 123 (2) The licensee shall ensure that written policies and protocols are developed

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for the medication management system to ensure the accurate acquisition, dispensing, receipt, storage, administration, and destruction and disposal of all drugs used in the home.

The home's drug handling and waste removal policy required staff to ensure incontinence products from residents on specific precautions be put in a separate plastic bag before being disposed of. This did not occur on one occasion.

Sources: An observation, the home's drug handling and waste removal policy, and interviews with staff.

WRITTEN NOTIFICATION: CMOH and MOH

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

Non-compliance with: O. Reg. 246/22, s. 272

CMOH and MOH

s. 272. Every licensee of a long-term care home shall ensure that all applicable directives, orders, guidance, advice or recommendations issued by the Chief Medical Officer of Health or a medical officer of health appointed under the Health Protection and Promotion Act are followed in the home.

The home should increase cleaning and disinfection to twice daily in suspect or confirmed outbreaks. High-touch surface cleaning was not documented as being cleaned or disinfected as least twice per day during two days of an outbreak.

Sources: Cleaning checklists, interviews with staff.