

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

North District  
159 Cedar St, Suite 403  
Sudbury, ON, P3E 6A5  
Telephone: (800) 663-6965

## Public Report

**Report Issue Date:** February 5, 2026

**Inspection Number:** 2026-1843-0002

**Inspection Type:**  
Critical Incident

**Licensee:** 2063414 Investment LP, by its general partner, 2063414 Ontario Limited

**Long Term Care Home and City:** Northern Heights Community, North Bay

## INSPECTION SUMMARY

The inspection occurred onsite on the following dates: February 3-5, 2026

The following intake was inspected:

- One intake related to and environmental hazard-breakdown of door access system.

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

Safe and Secure Home

## INSPECTION RESULTS

### COMPLIANCE ORDER CO #001 Home to be safe, secure environment

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

**Non-compliance with: FLTCA, 2021, s. 5**

Home to be safe, secure environment

s. 5. Every licensee of a long-term care home shall ensure that the home is a safe and secure environment for its residents.

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

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- 1) Conduct and document a full review of all internal and external doors in the home to verify that the appropriate locking mechanisms and access systems, (including the fob-access system) are installed and functioning properly.
- 2) Implement corrective actions to address any gaps identified during the review, and maintain documentation of all actions taken.
- 3) Establish a plan for conducting regular audits to ensure doors, where required, remain locked and that all access systems remain in proper working order.

### Grounds

The home did not ensure that all external doors were equipped with appropriate locks and that access systems were functioning properly at all times.

**Sources:** Observations; review the licensee's policy on door safety and security, and the home's environmental scan report and preventative maintenance reports; and interviews with the Executive Director and other staff

**This order must be complied with by** February 27, 2026

### COMPLIANCE ORDER CO #002 Doors in a home

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

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

Doors in a home

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

1. All doors leading to stairways and the outside of the home other than doors leading to secure outside areas that preclude exit by a resident, including balconies and terraces, or doors that residents do not have access to must be,

iii. equipped with an audible door alarm that allows calls to be cancelled only at the point of activation and,

A. is connected to the resident-staff communication and response system, or

B. is connected to an audio visual enunciator that is connected to the nurses' station nearest to the door and has a manual reset switch at each door.

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

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

- 1) Ensure all doors leading to stairways and to the exterior exits, except doors to secure outside areas, balconies and terraces, or doors that residents do not have access to, are equipped with audible door alarms that can only be cancelled at the point of activation.
- 2) Ensure these doors alarms are connected to the resident-staff communication and response system or to the closest audio visual enunciator panel located at a nursing station.
- 3) Test all required doors and alarms to verify proper functioning, and maintain written records documenting the date(s) of each test, the person(s) who performed the test, and the results for each door.

**Grounds**

The audible alarm on the main exit door leading to an unsecured outdoor area, as well as the stairwells within the resident home areas, were not connected to the resident-staff communication and response system or to an audio-visual enunciator at the nearest nursing station.

**Sources:** Observations; review of the licensee's policy on door safety & security, and the home's environmental scan report; and interviews with the Executive Director and other staff.

**This order must be complied with by** February 27, 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  
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

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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:

**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).



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**Inspection Report Under the  
Fixing Long-Term Care Act, 2021**

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