

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

Ministry of Long-Term Care

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

Central East District

33 King Street West, 4th Floor Oshawa, ON, L1H 1A1 Telephone: (844) 231-5702

Public Report

Report Issue Date: October 1, 2025 Inspection Number: 2025-1088-0005

Inspection Type:

Complaint Critical Incident

Licensee: Extendicare (Canada) Inc.

Long Term Care Home and City: Extendicare Peterborough, Peterborough

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): September 23-26, 29 and October 1, 2025.

The following intake(s) were inspected:

- -An intake regarding a fall with in injury.
- -An intake regarding a complaint related to the medication management and fall prevention for a resident.

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

Medication Management Infection Prevention and Control Responsive Behaviours Falls Prevention and Management

INSPECTION RESULTS

WRITTEN NOTIFICATION: Falls prevention and management

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

Non-compliance with: O. Reg. 246/22, s. 54 (1)

Falls prevention and management

s. 54 (1) The falls prevention and management program must, at a minimum, provide



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for strategies to reduce or mitigate falls, including the monitoring of residents, the review of residents' drug regimes, the implementation of restorative care approaches and the use of equipment, supplies, devices and assistive aids. O. Reg. 246/22, s. 54 (1).

The licensee has failed to ensure that staff complied with the home's falls prevention and management program when a resident did not have access to their assistive devices and fell and sustained an injury.

In accordance with O. Reg. 246/22, s. 11 (1) (b), the licensee is required to ensure that written policies developed for the falls prevention and management program were complied with.

A resident was identified as high risk for falls. An interview with staff confirmed that the resident's assistive device was not within reach at the time of the fall.

Sources: The licensee's Fall Prevention and Management policy, a resident's clinical records; and interview with staff.



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