

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

Hamilton District
119 King Street West, 11th Floor
Hamilton, ON, L8P 4Y7
Telephone: (800) 461-7137

Public Report

Report Issue Date: March 31, 2026

Inspection Number: 2026-1331-0002

Inspection Type:

Complaint
Critical Incident

Licensee: Unger Nursing Homes Limited

Long Term Care Home and City: Hampton Terrace Care Centre, Burlington

INSPECTION SUMMARY

The inspection occurred onsite on the following dates: March 20, 23-27, and 30-31, 2026.

The following intakes were inspected:

- Intake: #00170901- Complaint related to resident care and support services, continence care, skin and wound care, prevention of abuse and neglect, laundry services, and complaints process.
- Intake: #00171071- Critical Incident (CI) related to falls prevention and management.

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

Resident Care and Support Services
Skin and Wound Prevention and Management
Continence Care
Housekeeping, Laundry and Maintenance Services
Prevention of Abuse and Neglect
Reporting and Complaints
Falls Prevention and Management

INSPECTION RESULTS

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Non-Compliance Remedied

Non-compliance was found during this inspection and was **remedied** by the licensee prior to the conclusion of the inspection. The inspector was satisfied that the non-compliance met the intent of section 154 (2) and requires no further action.

NC #001 remedied pursuant to FLTCA, 2021, s. 154 (2)

Non-compliance with: O. Reg. 246/22, s. 274 (b)

Resident records

s. 274. Every licensee of a long-term care home shall ensure that,
(b) the resident's written record is kept up to date at all times.

A resident had a possible identified medical condition but was not indicated in their electronic clinical records. The Director of Nursing (DON) acknowledged that the condition should have been clarified and updated. DON updated the resident's electronic records on March 27, 2026.

Sources: A resident's clinical records and interview with DON.

Date Remedy Implemented: March 27, 2026

WRITTEN NOTIFICATION: Contenance care

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

Non-compliance with: O. Reg. 246/22, s. 56 (2) (b)

Contenance care and bowel management

s. 56 (2) Every licensee of a long-term care home shall ensure that,
(b) each resident who is incontinent has an individualized plan, as part of their plan of care, to promote and manage bowel and bladder continence based on the assessment and that the plan is implemented;

A resident had a specific intervention plan to promote their bladder continence. Observations on an identified date demonstrated that the resident was not provided the care according to the plan.

Sources: Observations, a resident's clinical records, and interview with staff.

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WRITTEN NOTIFICATION: Nutritional care and hydration programs

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

Non-compliance with: O. Reg. 246/22, s. 74 (2) (c)

Nutritional care and hydration programs

s. 74 (2) Every licensee of a long-term care home shall ensure that the programs include,

(c) the implementation of interventions to mitigate and manage those risks;

Observations of on an identified date demonstrated that a resident's specified nutritional interventions were not implemented.

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

WRITTEN NOTIFICATION: Laundry service

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

Non-compliance with: O. Reg. 246/22, s. 95 (1) (a) (iv)

Laundry service

s. 95 (1) As part of the organized program of laundry services under clause 19 (1) (b) of the Act, every licensee of a long-term care home shall ensure that,

(a) procedures are developed and implemented to ensure that,

(iv) there is a process to report and locate residents' lost clothing and personal items;

The home's Lost and Found Program was not complied with. Specifically, ensuring the home maintained records of all lost and found items belonging to a resident. Staff acknowledged that a resident had a reported missing item and was not found. They had reported the missing item but the home's lost and found records did not indicate the missing item.

Sources: Lost and Found Program, Lost and Found Binder, 24 hours shift report, a resident's progress notes, and interviews with staff.

WRITTEN NOTIFICATION: Medication management system

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

Non-compliance with: O. Reg. 246/22, s. 123 (3) (a)

Medication management system

s. 123 (3) The written policies and protocols must be,

(a) developed, implemented, evaluated and updated in accordance with evidence-based practices and, if there are none, in accordance with prevailing practices; and

The home's Medication Administration policy was not complied with. Specifically, ensuring that a resident's medications were administered within one hour before and after the scheduled time. A resident's Medication Administration Record (MAR) Audits from identified dates indicated multiple days of a specified medication administered more than one hour of their scheduled time order.

Sources: A resident's clinical records, Medication Administration- General Guideline Policy, and interview with the DON.