

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: October 27, 2025

Inspection Number: 2025-1261-0003

Inspection Type:

Complaint
Critical Incident

Licensee: Hanover Nursing Home Limited

Long Term Care Home and City: Hanover Care Centre, Hanover

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): October 23, 24, 2025

The following intakes were inspected:

- Intake: #00160375 - Concerns raised with evacuation procedures
- Intake: #00161141 - Critical Incident re: Unplanned Evacuation

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

Safe and Secure Home
Reporting and Complaints

INSPECTION RESULTS

WRITTEN NOTIFICATION: Reports re critical incidents

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

Non-compliance with: O. Reg. 246/22, s. 115 (1) 1.

Reports re critical incidents

s. 115 (1) Every licensee of a long-term care home shall ensure that the Director is immediately informed, in as much detail as is possible in the circumstances, of each of the following incidents in the home, followed by the report required under subsection (5):

1. An emergency within the meaning of section 268, including fire, unplanned evacuation or intake of evacuees.

The licensee has failed to ensure that the Director was immediately informed, in as much detail as is possible in the circumstances, of an emergency or unplanned evacuation followed by the report required under subsection (5).

In October 2025, an electrical incident causing smoke occurred in the electrical room, triggering the fire alarm. Residents were evacuated to a neighbouring facility for a period of three and a half hours. Emergency services attended the site to assess the incident and to assist with clearing out the smoke.

Sources: Interview with an external contractor, the Administrator.

WRITTEN NOTIFICATION: Emergency Plans

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

Non-compliance with: O. Reg. 246/22, s. 268 (5) 4.

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Emergency plans

s. 268 (5) The licensee shall ensure that the emergency plans address the following components:

4. Specific staff roles and responsibilities.

The licensee failed to ensure that the emergency plans, specifically Code Grey (Loss of essential services) addressed specific staff roles and responsibilities.

A complaint was received in October 2025, that an unexpected electrical incident occurred, causing smoke, and a loss of power for over three hours. A full evacuation of the residents to a neighbouring facility occurred whereby residents remained for an additional three and a half hours until the power was restored. Some discrepancies with respect to the evacuation protocol were raised during the incident. Prior to the incident, the power was shut down for three hours in preparation for the installation of a new generator. Some staff and families were not informed in advance of the planned power interruption, to allow for certain preparations to take place.

The emergency plan included the role of the incident commander, which is normally assigned to the Registered Nurse (RN) on site. The plan did not include adequate information for the RN to manage a Code Grey. The plan did not include other specific staff roles and responsibilities for a Code Grey in the various departments, such as dietary, nursing, activation, and accommodation services (housekeeping, laundry and maintenance).

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Sources: Interviews with an external contractor, management staff, care staff, registered staff, residents, dietary staff, review of Emergency Preparedness Plan (May 12, 2022), written statement of events, Fire Safety Manual (August 2022).