

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: December 19, 2025

Inspection Number: 2025-1393-0007

Inspection Type:

Complaint
Critical Incident

Licensee: Henley House Limited

Long Term Care Home and City: The Henley House, St Catharines

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): December 8-12, 15-16, 18-19, 2025

The following intake(s) were inspected:

- Intake: #00161418, Critical Incident (CI) #2909-000077-25 related to responsive behaviours;
- Intake: #00161830, CI #2909-000080-25 related to pain management and skin and wound care; and
- Intake: #00162028, complaint related to food, nutrition and hydration and staffing, training and care standards.

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

- Skin and Wound Prevention and Management
- Food, Nutrition and Hydration
- Responsive Behaviours
- Staffing, Training and Care Standards

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Pain Management

INSPECTION RESULTS

WRITTEN NOTIFICATION: Doors in a home

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

Non-compliance with: O. Reg. 246/22, s. 12 (1) 3.

Doors in a home

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

3. All doors leading to non-residential areas must be equipped with locks to restrict unsupervised access to those areas by residents, and those doors must be kept closed and locked when they are not being supervised by staff.

The door leading to the servery on a resident home area was observed propped open and was not supervised by staff. The area included dishwashing chemicals and a steam table which was turned on.

Sources: Observations; staff interviews.

WRITTEN NOTIFICATION: Dietary services

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

Non-compliance with: O. Reg. 246/22, s. 76 (d)

Dietary services

s. 76. Every licensee of a long-term care home shall ensure that the dietary services component of the nutritional care and dietary services program includes,

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(d) availability of supplies and equipment for food production and dining and snack service.

Whole wheat and white toast were on the menu for breakfast, but were substituted with other bread due to a delay in bread delivery. Staff reported that the home was consistently short on bread and were regularly waiting for the bread delivery to arrive. As per the home's internal audits, the home was not ordering enough bread according to their needs.

Sources: Observations; Temporary Menu Replacements report; staff interviews.

WRITTEN NOTIFICATION: Food production

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

Non-compliance with: O. Reg. 246/22, s. 78 (2) (e)

Food production

s. 78 (2) The food production system must, at a minimum, provide for,
(e) menu substitutions that have similar nutritional value;

A menu substitution was made for an item that was not of similar nutritional value.

Sources: Staff interviews

WRITTEN NOTIFICATION: Food production

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

Non-compliance with: O. Reg. 246/22, s. 78 (2) (f)

Food production

s. 78 (2) The food production system must, at a minimum, provide for,

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(f) communication to residents and staff of any menu substitutions; and

A menu substitution was made and there was no communication of the substitution to residents.

Sources: Observations; menu substitution documentation; staff interviews.

WRITTEN NOTIFICATION: Food production

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

Non-compliance with: O. Reg. 246/22, s. 78 (2) (g)

Food production

s. 78 (2) The food production system must, at a minimum, provide for,
(g) documentation on the production sheet of any menu substitutions. O. Reg. 246/22, s. 78 (2).

A menu substitution was made and there was no documentation of the substitution.

Sources: Temporary menu replacements report; staff interviews.

WRITTEN NOTIFICATION: Food production

NC #006 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 78 (3) (b)

Food production

s. 78 (3) The licensee shall ensure that all food and fluids in the food production system are prepared, stored, and served using methods to,
(b) prevent adulteration, contamination and food borne illness. O. Reg. 246/22, s. 78 (3).

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Two staff members were observed in the servery without a hairnet. The Food and Nutrition Manager acknowledged that it was the expectation that all staff in the serveries wore a hair net.

Sources: Observations; staff interviews.

WRITTEN NOTIFICATION: Food service workers, minimums

NC #007 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 83 (1) (a)

Food service workers, minimums

s. 83 (1) Every licensee of a long-term care home shall ensure that there are sufficient food service workers for the home to meet the minimum staffing hours as calculated under subsection (2) for,

(a) the preparation of resident meals and snacks;

On two days, the home did not have a cook for a portion of the shift. Food Service Workers (FSWs) reported that they were not trained on preparing the planned menu items. They were directed to serve alternative menu items as per the home's contingency plan. On one day, one of the pureed options was not available and the other pureed option was not available until after meal service was complete.

On another day, the home's cook was not available for part of their shift. As a result, only one of the planned entrees was available for the meal and meal service was late. Residents, staff and visitors expressed concerns regarding meal service on this date.

The home's contingency plan was not up to date with basic staffing levels and was

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not in alignment with staff roles and skillsets.

In accordance with O. Reg. 246/22 s. 83 (2), and the home's licensed bed capacity of 160 residents, the home was required to have a minimum of 504 FSW hours each week. The home's schedule did not provide enough hours to meet the minimum requirement.

Sources: Observations; schedules; home's emergency menu; home's contingency plan; staff interviews.

WRITTEN NOTIFICATION: Food service workers, minimums

NC #008 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 83 (1) (b)

Food service workers, minimums

s. 83 (1) Every licensee of a long-term care home shall ensure that there are sufficient food service workers for the home to meet the minimum staffing hours as calculated under subsection (2) for,

(b) the distribution and service of resident meals;

On a day where the home had a full complement of dietary staff, breakfast did not start on time as the FSW was not available to serve the meal. A Personal Support Worker (PSW) served the meal until the FSW arrived on the home area. Staff reported the breakfast meal was consistently late because the FSW had other duties to complete first.

Nursing staff and a visitor reported that it was a routine practice for PSWs to help serve meals when the home was short dietary staff, or when the dietary staff were behind. The home's contingency plan was not up to date and the Food and Nutrition

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Manager acknowledged that the home was not following the plan with regards to coverage of morning FSW shifts.

A review of staff schedules identified that the home did not have a full FSW staffing compliment on 17 dates during a period of seven weeks.

In accordance with O. Reg. 246/22 s. 83 (2), and the home's licensed bed capacity of 160 residents, the home was required to have a minimum of 504 FSW hours each week. The home's schedule did not provide enough hours to meet the minimum requirement.

Sources: Observations; staff schedules; e-mail records; home's contingency plan; staff interviews.