

Ministry of Long-Term Care

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

Ottawa District

347 Preston Street, Suite 410
Ottawa, ON, K1S 3J4
Telephone: (877) 779-5559

Public Report

Report Issue Date: November 7, 2025

Inspection Number: 2025-1497-0007

Inspection Type:

Critical Incident
Follow up

Licensee: Maxville Manor

Long Term Care Home and City: Maxville Manor, Maxville

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): October 27, 28, 29, 30, 31, 2025 and November 3, 4, 5, 6, and 7, 2025

The following intake(s) were inspected:

- Intake: #00157026 - Follow-up #: 1 - CO #02/2025-1497-0005, O. Reg. 246/22 - s. 18 (1) (a) - bed rails (bed system evaluations), CDD October 31, 2025.
- Intake: #00157027 - Follow-up #: 1 - CO #01/2025-1497-0005, O. Reg. 246/22 - s. 12 (1) 1. iii - doors in a home - audible door alarms, CDD October 14, 2025.
- Intake: #00157028 - Follow-up #: 1 - CO #04/2025-1497-0005, O. Reg. 246/22 - s. 24 (3) - Air temperatures, CDD October 14, 2025.
- Intake: #00157029 - Follow-up #: 1 - CO #03/2025-1497-0005, O. Reg. 246/22 - s. 24 (1) - Air temperatures, CDD October 14, 2025.
- Intake: #00157030 - Follow-up #: 1 - CO #005/2025-1497-0005, O. Reg. 246/22 - s. 93 (2) (b) (i) - housekeeping, cleaning and disinfection of resident care equipment, CDD October 14, 2025.

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- Intake: #00157438 - 3000-000032-25- related to a fall of a resident resulting in an injury.
- Intake: #00157886 - 3000-000033-25- related to a fall of a resident resulting in an injury.
- Intake: #00160827 - 3000-000034-25 - related to a fall of a resident resulting in an injury.

Previously Issued Compliance Order(s)

The following previously issued Compliance Order(s) were found to be in compliance:

Order #002 from Inspection #2025-1497-0005 related to O. Reg. 246/22, s. 18 (1) (a)

Order #001 from Inspection #2025-1497-0005 related to O. Reg. 246/22, s. 12 (1) 1.
iii.

Order #005 from Inspection #2025-1497-0005 related to O. Reg. 246/22, s. 93 (2)
(b) (i)

The following previously issued Compliance Order(s) were found **NOT** to be in compliance:

Order #004 from Inspection #2025-1497-0005 related to O. Reg. 246/22, s. 24 (3)

Order #003 from Inspection #2025-1497-0005 related to O. Reg. 246/22, s. 24 (1)

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

Housekeeping, Laundry and Maintenance Services
Safe and Secure Home
Falls Prevention and Management

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INSPECTION RESULTS

WRITTEN NOTIFICATION: Conditions of Licence

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

Non-compliance with: FLTCA, 2021, s. 104 (4)

Conditions of licence

s. 104 (4) Every licensee shall comply with the conditions to which the licence is subject.

The licensee did not meet the requirements outlined in Compliance Order #004, from inspection 2025-1497-0005, related to Ontario Regulation (O.Reg.) 246/22, s.24(3), served on September 4, 2025, with a Compliance Due Date (CDD) of October 14, 2025.

Specifically, the licensee did not comply with:

- 1) Implement a procedure, within seven days of receiving the licensee report, for ensuring that air temperatures are measured and documented during all required legislative times. (once every morning, once between 12-5pm and once every evening or night).
- 2) Educate all staff who will be monitoring and measuring air temperatures during the times mentioned above.
- 3) Document the education provided including a description of the education provided, the name of the staff member receiving the education, the date the education was provided and who provided the education.
- 4) Conduct weekly audits of air temperature logs for three consecutive weeks to ensure compliance with the procedure.
- 5) Take immediate corrective action if deviations from the procedure are identified.

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Maintain a written record of everything required under this compliance order from 1-5, until the Ministry of Long-Term Care has deemed that the licensee has complied with this order.

During the inspection the inspector found:

- The procedure for air temperature is not clear as staff are unaware of when to manually take air temperatures. As well, staff are not clear on what actions to take when the air temperature is identified to be below 22 degrees Celsius.
- Not all staff, who monitor and measure air temperatures in the home, were provided education on the procedure of monitoring and documenting the air temperatures, and the required actions if the air temperatures in the home fall below 22 degrees Celsius.
- There is no clear evidence of what education was provided to identified staff.
- There are no records of weekly audits of air temperature logs completed.
- Corrective action was not consistently taken when deviation from the procedure was identified by the licensee.

Sources: record review of air temperature policy and procedure, air temperature logs, education records, and interview with staff.

An Administrative Monetary Penalty (AMP) is being issued on this written notification AMP #001

NOTICE OF ADMINISTRATIVE MONETARY PENALTY (AMP)

The Licensee has failed to comply with FLTCA, 2021

Notice of Administrative Monetary Penalty AMP #001

Related to Written Notification NC #001

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Pursuant to section 158 of the Fixing Long-Term Care Act, 2021, the licensee is required to pay an administrative penalty of \$1100.00, to be paid within 30 days from the date of the invoice.

In accordance with s. 349 (6) and (7) of O. Reg. 246/22, this administrative penalty is being issued for the licensee's failure to comply with an order under s. 155 of the Act.

Compliance History:

In the past 36 months, a CO was issued under O. Reg 246/22 s.24(1) was issued, #2025-1497-0005 on September 4, 2025.

This is the first AMP that has been issued to the licensee for failing to comply with this requirement.

Invoice with payment information will be provided under a separate mailing after service of this notice.

Licensees must not pay an AMP from a resident-care funding envelope provided by the Ministry [i.e., Nursing and Personal Care (NPC); Program and Support Services (PSS); and Raw Food (RF)]. By submitting a payment to the Minister of Finance, the licensee is attesting to using funds outside a resident-care funding envelope to pay the AMP.

WRITTEN NOTIFICATION: Conditions of Licence

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

Non-compliance with: FLTCA, 2021, s. 104 (4)

Conditions of licence

s. 104 (4) Every licensee shall comply with the conditions to which the licence is subject.

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The licensee did not meet the requirements outlined in Compliance Order #003, from inspection 2025-1497-0005, related to Ontario Regulation (O.Reg.) 246/22, s.24(1), served on September 4, 2025, with a Compliance Due Date (CDD) of October 14, 2025.

Specifically, the licensee did not comply with:

- 1) Educate all staff, who monitor and measure air temperatures in the home, within seven days of receiving this report, on the procedure of monitoring and documenting the air temperatures and the required actions if the air temperatures in the home fall below 22 degrees Celsius.
- 2) Document the education provided including a description of the education provided, the name of the staff member receiving the education, the date the education was provided and who provided the education.
- 3) Conduct weekly audits of air temperature logs for three consecutive weeks to ensure compliance with the procedure.
- 4) Take immediate corrective action if deviations from the procedure are identified.
- 5) Maintain a written record of everything required under this compliance order, until the Ministry of Long-Term Care has deemed that the licensee has complied with this

During the inspection the inspector found:

- Not all staff, who monitor and measure air temperatures in the home, were provided education on the procedure of monitoring and documenting the air temperatures, and the required actions if the air temperatures in the home fall below 22 degrees Celsius.
- There is no clear evidence of what education was provided to identified staff.
- There are no records of weekly audits of air temperature logs completed.

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- Corrective action was not consistently taken when deviation from the procedure was identified by the licensee.
- Records were not maintained.

Sources: record review of air temperature logs, education records, and interviews with staff.

An Administrative Monetary Penalty (AMP) is being issued on this written notification AMP #002

NOTICE OF ADMINISTRATIVE MONETARY PENALTY (AMP)

The Licensee has failed to comply with FLTCA, 2021

Notice of Administrative Monetary Penalty AMP #002

Related to Written Notification NC #002

Pursuant to section 158 of the Fixing Long-Term Care Act, 2021, the licensee is required to pay an administrative penalty of \$1100.00, to be paid within 30 days from the date of the invoice.

In accordance with s. 349 (6) and (7) of O. Reg. 246/22, this administrative penalty is being issued for the licensee's failure to comply with an order under s. 155 of the Act.

Compliance History:

In the past 36 months, a CO was issued under O. Reg 246/22 s.24(1) was issued, #2025-1497-0005 on September 4, 2025.

This is the first AMP that has been issued to the licensee for failing to comply with this requirement.

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Licensees must not pay an AMP from a resident-care funding envelope provided by the Ministry [i.e., Nursing and Personal Care (NPC); Program and Support Services (PSS); and Raw Food (RF)]. By submitting a payment to the Minister of Finance, the licensee is attesting to using funds outside a resident-care funding envelope to pay the AMP.