

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 18, 2025

Inspection Number: 2025-1233-0004

Inspection Type:
Complaint

Licensee: Kindera Living Care Centres LP by its general partners, Kindera Living Care Centres GP Inc. and Kindera Living Management Inc.

Long Term Care Home and City: Dundurn Place Care Centre, Hamilton

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): December 3, 4, 5, 8, 9, 10, 11, 12, 15, 16 and 18, 2025.

The following intake(s) were inspected:

-Complaint intake #00163746 related to Prevention of Abuse and Neglect, Medication Management and Food, Nutrition and Hydration.

-Complaint intake #00162792 related to Housekeeping, Laundry and Maintenance Services, Resident Care and Support Services and Food, Nutrition and Hydration.

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

- Resident Care and Support Services
- Housekeeping, Laundry and Maintenance Services
- Food, Nutrition and Hydration
- Medication Management
- Prevention of Abuse and Neglect

INSPECTION RESULTS

WRITTEN NOTIFICATION: Pest Control

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

Non-compliance with: O. Reg. 246/22, s. 94 (1)

Pest control

s. 94 (1) As part of organized programs of housekeeping and maintenance services under clauses 19 (1) (a) and (c) of the Act, every licensee of a long-term care home shall ensure that an organized preventive pest control program using the services of a licensed pest controller is in place at the home, including records indicating the dates of visits and actions taken.

The home did not have an organized pest control program.

The home's pest control policy did not identify home specific measures that were to be taken related to their preventative pest control program. There was not clear direction as to what actions were to be taken and who was responsible. Additional methods were not implemented beyond the service of the licensed pest controller to manage the pest infestation in the home.

Sources: Observations of resident rooms, interviews with staff and the homes licensed pest controller and review of the Infection Control-Pest Control Policy.

WRITTEN NOTIFICATION: Drug destruction and disposal

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

Non-compliance with: O. Reg. 246/22, s. 148 (2) 3.

Drug destruction and disposal

s. 148 (2) The drug destruction and disposal policy must also provide for the following:
3. That drugs are destroyed and disposed of in a safe and environmentally appropriate manner in accordance with evidence-based practices and, if there are none, in accordance with prevailing practices.

Drugs were not destroyed and disposed of in a safe and environmentally appropriate manner in accordance with evidence-based practices when two different RPNs stated their process for disposing of wasted injectable controlled substances included placing vials containing medication in a sharps container.

Sources: Interviews with RPNs and Clinical Director of Care (DOC) and the MediSystem Policies and Procedures Manual, Section F.

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COMPLIANCE ORDER CO #001 Accommodation services

NC #003 Compliance Order pursuant to FLTCA, 2021, s. 154 (1) 2.

Non-compliance with: FLTCA, 2021, s. 19 (2) (a)

Accommodation services

s. 19 (2) Every licensee of a long-term care home shall ensure that,
(a) the home, furnishings and equipment are kept clean and sanitary;

The Inspector is ordering the licensee to prepare, submit and implement a plan to ensure compliance with FLTCA, 2021, s. 19 (2) (a) [FLTCA, 2021, s. 155 (1) (b)]:

The plan must include but is not limited to: The Licensee shall prepare, submit, and implement a plan to ensure the home is kept clean and sanitary related to the ongoing pest infestation.

- 1) How the home will assess the extent of the infestation (initial assessment of all locations).
- 2) How the home will ensure staff have knowledge of how to identify pests and report them.
- 3) How the home will ensure that pests are monitored and treated.
- 4) What additional measures can be considered and implemented in circumstances where high frequencies of pests remain present.
- 5) How the home will ensure cleaning procedures for resident rooms are adequate and implemented to keep resident rooms clean and sanitary.
- 6) How they will ensure staff who have responsibilities related to the ongoing pest infestation have clear direction related to their role and responsibilities.
- 7) What actions will be taken in an identified room to address the pests.

The plan is to be implemented by the compliance due date.

Grounds

The home was not kept clean and sanitary.

In November 2025, there was an increase of pests in the home. The home's licensed pest controller visited the home weekly and treated resident bedrooms on different floors, as well as resident common areas and the kitchen where pests were identified by staff.

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On the pest control report a few weeks prior to the inspection an identified resident room was noted to be infested with pests. During the inspection it was observed that the room remained infested and action was not taken when staff were notified as pests remained in same locations on the residents' floor.

The floors on two residents units were observed to be dirty with debris. Observations were completed in six resident rooms where a higher frequency of pests had been reported in the pest control reports and pests were present.

Each resident area had a pest control log book where sightings of pests were to be documented by staff and the external pest controller treated areas based on the information in the books. Pests observed in a number of areas in the home were not identified in the homes log books. During a weekly visit rooms were treated on an identified floor that required treatment as the book could not be located. The pest controller identified ongoing concerns with missing log books.

As part of the organized program of housekeeping, resident bedside tables and drawers were to be emptied and cleaned on a rotating schedule. It was identified this task is not always completed related to staff coordination of the task of emptying and cleaning the drawers.

While additional pest monitoring and control measures were discussed by the environmental manager, such as the use of glue board monitors and insecticidal spray, it was determined that there was no process in place to use the monitors and that there was no available stock of the spray in the home.

Despite the recent increase in pest activity, there were no enhanced measures put into place to ensure that the residents' environment was kept clean and sanitary.

Sources: observations, pest control reports, pest control log books, Infection Control-Pest Control Policy, and interviews with housekeeping staff, nursing and personal support staff, the environmental manager and the home's licensed pest controller.

This order must be complied with by February 27, 2026

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REVIEW/APPEAL INFORMATION

TAKE NOTICE The Licensee has the right to request a review by the Director of this (these) Order(s) and/or this Notice of Administrative Penalty (AMP) in accordance with section 169 of the Fixing Long-Term Care Act, 2021 (Act). The licensee can request that the Director stay this (these) Order(s) pending the review. If a licensee requests a review of an AMP, the requirement to pay is stayed until the disposition of the review.

Note: Under the Act, a re-inspection fee is not subject to a review by the Director or an appeal to the Health Services Appeal and Review Board (HSARB). The request for review by the Director must be made in writing and be served on the Director within 28 days from the day the order or AMP was served on the licensee.

The written request for review must include:

- (a) the portions of the order or AMP in respect of which the review is requested;
- (b) any submissions that the licensee wishes the Director to consider; and
- (c) an address for service for the licensee.

The written request for review must be served personally, by registered mail, email or commercial courier upon:

Director
c/o Appeals Coordinator
Long-Term Care Inspections Branch
Ministry of Long-Term Care
438 University Avenue, 8th floor
Toronto, ON, M7A 1N3
e-mail: MLTC.AppealsCoordinator@ontario.ca

If service is made by:

- (a) registered mail, is deemed to be made on the fifth day after the day of mailing
- (b) email, is deemed to be made on the following day, if the document was served after 4 p.m.
- (c) commercial courier, is deemed to be made on the second business day after the commercial courier received the document

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If the licensee is not served with a copy of the Director's decision within 28 days of receipt of the licensee's request for review, this(these) Order(s) is(are) and/or this AMP is deemed to be confirmed by the Director and, for the purposes of an appeal to HSARB, the Director is deemed to have served the licensee with a copy of that decision on the expiry of the 28-day period.

Pursuant to s. 170 of the Act, the licensee has the right to appeal any of the following to HSARB:

- (a) An order made by the Director under sections 155 to 159 of the Act.
- (b) An AMP issued by the Director under section 158 of the Act.
- (c) The Director's review decision, issued under section 169 of the Act, with respect to an inspector's compliance order (s. 155) or AMP (s. 158).

HSARB is an independent tribunal not connected with the Ministry. They are established by legislation to review matters concerning health care services. If the licensee decides to request an appeal, the licensee must give a written notice of appeal within 28 days from the day the licensee was served with a copy of the order, AMP or Director's decision that is being appealed from. The appeal notice must be given to both HSARB and the Director:

Health Services Appeal and Review Board

Attention Registrar
151 Bloor Street West, 9th Floor
Toronto, ON, M5S 1S4

Director

c/o Appeals Coordinator
Long-Term Care Inspections Branch
Ministry of Long-Term Care
438 University Avenue, 8th Floor
Toronto, ON, M7A 1N3
e-mail: MLTC.AppealsCoordinator@ontario.ca

Upon receipt, the HSARB will acknowledge your notice of appeal and will provide instructions regarding the appeal and hearing process. A licensee may learn more about the HSARB on the website www.hsarb.on.ca.