

**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:** June 23, 2025

**Inspection Number:** 2025-1094-0004

**Inspection Type:**

Complaint  
Critical Incident  
Follow up

**Licensee:** Lutheran Homes Kitchener-Waterloo

**Long Term Care Home and City:** Trinity Village Care Centre, Kitchener

## INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): June 17-18, 20, 23, 2025

The following intake(s) were inspected:

- Intake: #00145310 - Follow-up #: 1 - FLTCA, 2021 - s. 51 (9) Written notice if licensee withholds approval
- Intake: #00146229 - complaint related to bed refusal
- Intake: #00148374 - allegation of improper transfer of a resident with injury

## Previously Issued Compliance Order(s)

The following previously issued Compliance Order(s) were closed:

Order #001 from Inspection #2025-1094-0003 related to FLTCA, 2021, s. 51 (9)

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

Resident Care and Support Services  
Pain Management

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Admission, Absences and Discharge

## INSPECTION RESULTS

### WRITTEN NOTIFICATION: Transferring and positioning techniques

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

**Non-compliance with: O. Reg. 246/22, s. 40**

Transferring and positioning techniques

s. 40. Every licensee of a long-term care home shall ensure that staff use safe transferring and positioning devices or techniques when assisting residents.

The licensee has failed to comply with the Resident Lifting and Transferring and Repositioning Policy-revised May 2025.

In accordance with Ontario Regulation 246/22, s. 11 (1) (b), the licensee is required to ensure that the written policy that deals with lifts and transfers of a resident must be complied with

A resident sustained an injury while being transferred using a mechanical lift device.

**Sources:** review of clinical record of a resident, interviews with staff.

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## WRITTEN NOTIFICATION: Pain management

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

**Non-compliance with: O. Reg. 246/22, s. 57 (2)**

Pain management

s. 57 (2) Every licensee of a long-term care home shall ensure that when a resident's pain is not relieved by initial interventions, the resident is assessed using a clinically appropriate assessment instrument specifically designed for this purpose.

The licensee has failed to comply with the policy, Pain Management last reviewed June 2025.

In accordance with Ontario Regulation 246/22, s. 11 (1) (b), the licensee is required to ensure that the written policy that deals with pain management must be complied with.

A resident was injured, requiring treatment and hospital assessment. The home did not complete a pain assessment with a clinically appropriate tool.

**Sources:** review of clinical record of a resident, interviews with staff