

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: July 2, 2025

Inspection Number: 2025-1340-0003

Inspection Type:

Complaint
Follow up

Licensee: Villa Forum

Long Term Care Home and City: Villa Forum, Mississauga

INSPECTION SUMMARY

The inspection occurred onsite on the following dates: June 24- 27, 2025 and July 2, 2025

The following intakes were inspected:

- Intake: #00144883 -Follow-up #: 1 to CO #001- O. Reg. 246/22 regarding infection prevention and control (IPAC).
- Intake: #00150013 - Compliant regarding staffing, training and care standards.

Additional inspector present during inspection.

Previously Issued Compliance Order(s)

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

Order #001 from Inspection #2025-1340-0001 related to O. Reg. 246/22, s. 102 (2)

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(b)

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

Infection Prevention and Control
Staffing, Training and Care Standards

INSPECTION RESULTS

WRITTEN NOTIFICATION: Retention of records

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

Non-compliance with: O. Reg. 246/22, s. 282 1.

Retention of records

s. 282. Every licensee of a long-term care home shall retain the records required under section 281 in accordance with the following:

1. If a staff member ceases to work at the home, the record shall be retained for at least seven years after the staff member ceased to work at the home and, for at least the first year, the record shall be retained at the home.

The licensee has failed to ensure that the home retained the records of staff required under section 281 in accordance with when the staff member ceased to work at the home, the staff record was retained for at least the first year after, at the home. The home was unable to produce the staff's records during the course of inspection.

Sources: Interview with staff.

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COMPLIANCE ORDER CO #001 Certification of nurses

NC #002 Compliance Order pursuant to FLTCA, 2021, s. 154 (1) 2.

Non-compliance with: O. Reg. 246/22, s. 51

Certification of nurses

s. 51. Every licensee of a long-term care home shall ensure that every member of the staff who performs duties in the capacity of registered nurse, registered practical nurse or registered nurse in the extended class has the appropriate current certificate of registration with the College of Nurses of Ontario or, in the case of an out of province nurse, a current certificate of registration with the governing body of their health profession. O. Reg. 246/22, s. 51; O. Reg. 202/23, s. 4.

The inspector is ordering the licensee to comply with a Compliance Order [FLTCA, 2021, s. 155 (1) (a)]:

The Licensee shall:

- (1) Review and revise the home's policy to ensure that when agency nursing staff (Registered Nurses and Registered Practical Nurses) are hired, their registration is validated by the College of Nurses of Ontario (CNO)- Find a Nurse tool and include a process of how the licensee will validate their registration including frequency, and;
- (2) Ensure a copy of this written revision available upon inspector request, and;
- (3) Complete an audit of all currently employed agency RN and RPN using the CNO- Find a Nurse tool to ensure that they are entitled to practice or their governing body (if an out of province Nurse) and;
- (4) Ensure a copy of this audit is available upon inspector request.

Grounds

The licensee has failed to ensure that every member of the staff who performed duties in the capacity of registered practical nurse (RPN) had the appropriate current certificate of registration with the CNO.

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When an agency RPN started in the home, their certification to practice was verified. The home was unaware that the RPN's certificate of registration with the CNO was suspended and later expired. RPN continued to perform duties in the capacity of an RPN in the home while on an expired licence. When the home became aware, they took action immediately.

Failing to ensure that the RPN had the appropriate current certification of registration with the CNO posed a safety risk to residents they provided care to.

Sources: resident's clinical records, CNO- Find a Nurse, the home's investigative notes, and interviews with staff.

This order must be complied with by August 15, 2025

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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

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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

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:

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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.