

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:** April 8, 2026

**Inspection Number:** 2026-1275-0002

**Inspection Type:**  
Critical Incident

**Licensee:** DTOC III Long Term Care LP by its general partner, DTOC III Long Term Care MGP (a general partnership), by its partners, DTOC III Long Term Care GP Inc. and Arch Venture Holdings Inc.

**Long Term Care Home and City:** The Wellington Nursing Home, Hamilton

## INSPECTION SUMMARY

The inspection occurred onsite on the following dates: March 30 and 31, and April 1, 2 and 8, 2026.

The following intake was inspected:

-Intake: #00166662 -Critical Incident was related to prevention of abuse and neglect.

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

Prevention of Abuse and Neglect

## INSPECTION RESULTS

### WRITTEN NOTIFICATION: Prevention of Abuse and Neglect

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

**Non-compliance with: FLTCA, 2021, s. 24 (1)**

Duty to protect

s. 24 (1) Every licensee of a long-term care home shall protect residents from abuse by anyone and shall ensure that residents are not neglected by the licensee or staff.

An altercation took place between two residents and one resident sustained an injury.

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**Sources:** Residents' clinical records, Critical incident report; and interviews with the Director of Care (DOC) and staff member.

## **WRITTEN NOTIFICATION: Training and Orientation**

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

**Non-compliance with: O. Reg. 246/22, s. 261 (2) 1.**

Additional training — direct care staff

s. 261 (2) The licensee shall ensure that all staff who provide direct care to residents receive the training provided for in subsection 82 (7) of the Act based on the following: Subject to paragraph 2, the staff must receive annual training in all the areas required under subsection 82 (7) of the Act.

In accordance with FLTCA s. 82 (7) paragraph 3, direct care staff did not complete the required annual training.

One staff did not complete annual training in 2025 related to behaviour management.

**Sources:** home's training records; and interview with the DOC.