

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: February 25, 2025
Inspection Number: 2025-1612-0001
Inspection Type: Critical Incident Follow up
Licensee: The Regional Municipality of Niagara
Long Term Care Home and City: The Woodlands of Sunset, Welland

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): February 18, 21, 24 - 25, 2025.
The inspection occurred offsite on the following date(s): February 20, 2025.

The following intake(s) were inspected:

- Intake: #00133519 - Critical Incident System (CIS) #M617-000024-24 - related to a disease outbreak.
- Intake: #00136724 - CIS #M617-000001-25 - related to a disease outbreak.
- Intake: #00139229 - CIS #M617-000004-25 - related to a disease outbreak.
- Intake: #00135126 -Critical Incident System (CIS) #M617-000025-24- related to falls prevention and management.
- Intake: #00133166 - Follow-up to Compliance Order (CO) #001 from inspection #2024-1612-0004, related to infection prevention and control.

The following intake(s) were completed in this inspection:

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- Intake: #00130814 - CIS #M617-000020-24 - related to falls prevention and management.
- Intake: #00131158 - CIS #M617-000021-24 - related to falls prevention and management.
- Intake: #00136952 - CIS #M617-000002-25 - related to falls prevention and management.
- Intake: #00137742 - CIS #M617-000003-25 - related to falls prevention and management.

Previously Issued Compliance Order(s)

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

Order #001 from Inspection #2024-1612-0004 related to O. Reg. 246/22, s. 102 (2) (b)

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

Infection Prevention and Control
Falls Prevention and Management

INSPECTION RESULTS

WRITTEN NOTIFICATION: Duty of licensee to comply with the plan

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

Non-compliance with: FLTCA, 2021, s. 6 (7)

Plan of care

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s. 6 (7) The licensee shall ensure that the care set out in the plan of care is provided to the resident as specified in the plan.

The licensee has failed to ensure that a falls management device was provided as identified in a resident's plan of care.

Their plan of care indicated to ensure the device was in a specific location and staff were to check every shift to ensure it was functioning.

The resident had a fall with injury. It was identified that the device was not in the specified location and was documented as being checked, after the fall occurred.

When care was not provided as per the resident's plan of care, this had the potential to contribute to the incident.

Sources: Critical incident report; the resident's progress notes, care plan, task report, home's investigative notes, and interviews with Personal Support Worker (PSW) staff.

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**Inspection Report Under the
Fixing Long-Term Care Act, 2021**

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