

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 12, 2026

Inspection Number: 2026-1434-0001

Inspection Type:

Proactive Compliance Inspection

Licensee: United Mennonite Home for the Aged

Long Term Care Home and City: United Mennonite Home, Vineland

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): February 3-6, 9-12, 2026

The following intake(s) were inspected:

- Intake: #00169135 - Proactive Compliance Inspection

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

Skin and Wound Prevention and Management
Housekeeping, Laundry and Maintenance Services
Infection Prevention and Control

INSPECTION RESULTS

Non-Compliance Remedied

Non-compliance was found during this inspection and was **remedied** by the

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licensee prior to the conclusion of the inspection. The inspector was satisfied that the non-compliance met the intent of section 154 (2) and requires no further action.

NC #001 remedied pursuant to FLTCA, 2021, s. 154 (2)

Non-compliance with: O. Reg. 246/22, s. 20 (a)

Communication and response system

s. 20. Every licensee of a long-term care home shall ensure that the home is equipped with a resident-staff communication and response system that,
(a) can be easily seen, accessed and used by residents, staff and visitors at all times;

During an observation of the home made on a specified date in February there were multiple call bells in common areas accessible to residents observed to be covered by furniture. A second observation made on a specified date in February showed that all furniture that was covering call bells previously had been removed and call bells were observed to be clear of furniture.

Sources: Observations of the home, Discussion with management.

Date Remedy Implemented: February 10, 2026

WRITTEN NOTIFICATION: Skin and wound care

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

Non-compliance with: O. Reg. 246/22, s. 55 (2) (b) (iv)

Skin and wound care

s. 55 (2) Every licensee of a long-term care home shall ensure that,
(b) a resident exhibiting altered skin integrity, including skin breakdown, pressure injuries, skin tears or wounds,
(iv) is reassessed at least weekly by an authorized person described in subsection

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(2.1), if clinically indicated;

A resident had areas of altered skin integrity that required weekly re-assessment using the home's clinically appropriate skin and wound assessment instrument. A residents areas of altered skin integrity were not reassessed as required during an identified time period in January 2026.

Sources: residents clinical record including progress notes and assessments; interviews with staff; the home's Skin Care Assessment policy (revised date September 2017).

WRITTEN NOTIFICATION: Skin and wound care

NC #003 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 55 (2) (e)

Skin and wound care

s. 55 (2) Every licensee of a long-term care home shall ensure that,

(e) a resident exhibiting a skin condition that is likely to require or respond to nutrition intervention, such as pressure injuries, foot ulcers, surgical wounds, burns or a worsening skin condition, is assessed by a registered dietitian who is a member of the staff of the home, and that any changes the registered dietitian recommends to the resident's plan of care relating to nutrition and hydration are implemented. O. Reg. 246/22, s. 55 (2); O. Reg. 66/23, s. 12.

On a date in January 2026, a resident's nutrition needs were assessed by the registered dietitian (RD) due to the resident having impaired skin integrity. The RD updated the resident's plan of care to include a new intervention. The new intervention had not been implemented from a time period reviewed in January 2026 to February 2026 as ordered.

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Sources: meal observations; interviews with staff, clinical records for a resident including plan of care, physician order's; meal service documents.