

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: October 20, 2025
Inspection Number: 2025-1432-0006
Inspection Type: Complaint Critical Incident
Licensee: 955464 Ontario Limited
Long Term Care Home and City: Millennium Trail Manor, Niagara Falls

INSPECTION SUMMARY

The inspection occurred onsite on the following dates: October 6-9, 14, 16, 20, 2025.

The following intakes were inspected:

- Intake: #00157751 - Complainant with concerns regarding Safe and Secure home.
- Intake: #00158659 - [Critical Incident Report (CIR) #22948-000030-25] - related to Prevention of Abuse and Neglect.
- Intake: #00159092 - [CIR #2948-000032-25] - related to Falls Prevention and Abuse.

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

- Safe and Secure Home
- Prevention of Abuse and Neglect
- Responsive Behaviours
- Falls Prevention and Management

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INSPECTION RESULTS

WRITTEN NOTIFICATION: Responsive Behaviours

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

Non-compliance with: O. Reg. 246/22, s. 58 (4) (b)

Responsive behaviours

s. 58 (4) The licensee shall ensure that, for each resident demonstrating responsive behaviours,

(b) strategies are developed and implemented to respond to these behaviours, where possible;

The licensee has failed to ensure that interventions were implemented for a resident who had responsive behaviours. As a result, the resident injured a fellow resident.

Sources: Resident's clinical records, video footage of incident, and interview with staff.

COMPLIANCE ORDER CO #001 Home to be safe, secure environment

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

Non-compliance with: FLTCA, 2021, s. 5

Home to be safe, secure environment

s. 5. Every licensee of a long-term care home shall ensure that the home is a safe and secure environment for its residents.

The inspector is ordering the licensee to comply with a Compliance Order

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[FLTCA, 2021, s. 155 (1) (a)]:

The licensee shall:

- 1) Ensure that all Registered Nursing staff for the home are educated on safety practices related to the administration of a specified drug.
- 2) Document the name of the education provided, the names of all staff in attendance and the date(s) the education was completed. Retain these records for review by a Long-term Care Homes inspector, along with a copy of the education provided.

Grounds

The licensee failed to ensure that the home was a safe and secure environment for its residents.

Between June 2025 and September 2025, registered nursing staff were administering a specified drug to a resident in such a way that put all residents in the home at risk.

Sources: Resident's clinical records and interviews with staff.

This order must be complied with by November 24, 2025

COMPLIANCE ORDER CO #002 Plan of care

NC #003 Compliance Order pursuant to FLTCA, 2021, s. 154 (1) 2.

Non-compliance with: O. Reg. 246/22, s. 29 (3) 19.

Plan of care

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s. 29 (3) A plan of care must be based on, at a minimum, interdisciplinary assessment of the following with respect to the resident:

19. Safety risks.

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

The licensee shall:

1) Ensure that a specified resident's written plan of care is based on specified safety risks.

Grounds

The licensee failed to ensure that the plan of care for a resident was based on, at a minimum, interdisciplinary assessment of safety risks.

A) A specified assessment was not completed from January 2025 to June 2025, where it was required. The purpose of this assessment was to identify and address safety risks.

Sources: The home's policies, resident assessments and interviews with staff.

B) A drug was ordered for a resident on a specified date. The resident's plan of care did not specify how this drug was to be administered safely, in view of known safety risks, until six months after the drug was ordered.

Sources: Resident's plan of care and interviews with staff.



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

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This order must be complied with by October 24, 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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Hamilton, ON, L8P 4Y7
Telephone: (800) 461-7137

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.