

**Ministry of Long-Term Care**

Long-Term Care Operations Division  
Long-Term Care Inspections Branch

**Toronto District**

5700 Yonge Street, 5th Floor  
Toronto, ON, M2M 4K5  
Telephone: (866) 311-8002

## Public Report

**Report Issue Date:** July 17, 2025

**Inspection Number:** 2025-1440-0006

**Inspection Type:**

Critical Incident

**Licensee:** Schlegel Villages Inc.

**Long Term Care Home and City:** The Village of Humber Heights, Etobicoke

## INSPECTION SUMMARY

The inspection occurred onsite on the following dates: July 14, 15, 16, 17, 2025.

The following intakes were inspected:

- Intakes: #00152045, 00152056 - Critical Incident System (CIS) # 2957-000022-25, 2957-000023-25 were related to concerns over malfunctioning mechanical equipment.

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

Safe and Secure Home

## INSPECTION RESULTS

### WRITTEN NOTIFICATION: Reports re critical incidents

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

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**Non-compliance with: O. Reg. 246/22, s. 115 (3) 2. ii.**

Reports re critical incidents

s. 115 (3) The licensee shall ensure that the Director is informed of the following incidents in the home no later than one business day after the occurrence of the incident, followed by the report required under subsection (5):

2. An environmental hazard that affects the provision of care or the safety, security or well-being of one or more residents for a period greater than six hours, including,
  - ii. a breakdown of major equipment or a system in the home,

The licensee has failed to ensure that a breakdown of major equipment in the home affecting the provision of care or the safety, security or well-being of one or more residents for a period greater than six hours, was reported to the Director. The home's air conditioning (AC) unit 6 was not working on July 7, 2025 at noon and repaired on July 8, 2025 at noon. The Director was not informed of the breakdown of this system. The General Manager (GM) confirmed the breakdown of AC unit 6 on July 7, 2025 was not reported to the Director.

**Sources:** Email communication with the Regional Director Environmental Services (RDES); Air temperature records on the third floor common area from July 7 to 8, 2025; Interview with the GM.

**COMPLIANCE ORDER CO #001 Cooling requirements**

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

**Non-compliance with: O. Reg. 246/22, s. 23 (4)**

Cooling requirements

s. 23 (4) The heat related illness prevention and management plan for the home shall be implemented by the licensee every year during the period from May 15 to September 15 and it shall also be implemented,

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(a) any day on which the outside temperature forecasted by Environment and Climate Change Canada for the area in which the home is located is 26 degrees Celsius or above at any point during the day; and  
(b) anytime the temperature in an area in the home measured by the licensee in accordance with subsections 24 (2), (3) and (4) reaches 26 degrees Celsius or above, for the remainder of the day and the following day. O. Reg. 246/22, s. 23 (4).

**The Inspector is ordering the licensee to prepare, submit and implement a plan to ensure compliance with O. Reg. 246/22, s. 23 (4) [FLTCA, 2021, s. 155 (1) (b)]:**

The plan must include but is not limited to:

- 1). Undertake a review to provide supplementary cooling options based on the home's heat related illness prevention and management plan in order to ensure resident home areas including resident rooms are maintained at a cool and comfortable temperature.
- 2). A process in which staff are aware of the home's heat related illness prevention and management plan, in order to implement effective cooling measures when air temperatures in resident neighbourhoods are at an elevated level.
- 3). A process in which staff can respond when cooling measures implemented are not effective and require a revision to the cooling interventions, based off the home's heat related illness prevention and management plan.

Please submit the written plan for achieving compliance for inspection #2025-1440-0006 to LTC Homes Inspector, MLTC, by email to [torontodistrict.mlrc@ontario.ca](mailto:torontodistrict.mlrc@ontario.ca) by July 31, 2025.

Please ensure that the submitted written plan does not contain any PI/PHI.

**Grounds**

The licensee has failed to ensure that the home's heat related illness prevention

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and management plan was implemented.

An email from the RDES indicated that the home had issues with AC unit 6 from July 24, 2025 and that the unit was fluctuating and working intermittently. The home's heat related illness prevention and management plan indicates that the environmental staff should do the following-

- Ensure AC was in good working order
- Implement strategies to keep the indoor environment cooler including the use of fans, portable/window ACs

A Personal Support Worker (PSW) stated that the home had utilized fans on the affected resident neighbourhood, but that the fans were blowing hot air and not sufficient at maintaining a cool temperature. Another PSW added that because of the heat on the neighbourhood area, two families had submitted complaints to the home's management and a resident told them that they could not sleep due to the heat in their room. Air temperature records showed that between July 5 to 8, 2025, air temperatures on a specific neighbourhood were above 80 degrees Fahrenheit (F) or 26.7 degrees Celsius (C), including on July 7, 2025 at 1600 hours which showed a reading of 83.1 degrees F or 28.4 degrees C. The GM confirmed that AC unit 6 was not in a good working order and the strategies of using fans were not sufficient at maintaining a cooler air temperature on the affected areas.

Failure to ensure that the home's heat related illness prevention and management plan was implemented when there was a malfunction of the home's cooling system may increase the risk of heat related illnesses experienced by residents.

**Sources:** Email communication with the RDES; Air temperature records from July 5 to 8, 2025; Interview with the GM, two PSWs; Home's heat related illness prevention and management plan.

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**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, 8<sup>th</sup> floor  
Toronto, ON, M7A 1N3  
e-mail: [MLTC.AppealsCoordinator@ontario.ca](mailto:MLTC.AppealsCoordinator@ontario.ca)

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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:

**Health Services Appeal and Review Board**

Attention Registrar

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**Director**

c/o Appeals Coordinator  
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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](http://www.hsarb.on.ca).