

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

<b>Report Issue Date:</b> January 15, 2026
<b>Inspection Number:</b> 2026-1458-0001
<b>Inspection Type:</b> Complaint Critical Incident
<b>Licensee:</b> St. Joseph's Health System
<b>Long Term Care Home and City:</b> St. Joseph's Villa, Dundas, Dundas

## INSPECTION SUMMARY

The inspection occurred onsite on the following dates: January 7, 8, 9, 12, 13 and 15, 2026.

The inspection occurred offsite on the following dates: January 9, 14 and 15, 2026.

The following intakes were inspected:

- Intake: #00161596 - Critical Incident (CI) 2975-000065-25- related to prevention of abuse and neglect.
- Intake: #00163447 - CI 2975-000066-25 - related to falls prevention and management.
- Intake: #00164709 - Complainant regarding admission refusal.
- Intake: #00165264 - CI 2975-000071-25 - related to falls prevention and management.
- Intake: #00165592 - CI 2975-000074-25 - related to falls prevention and management.
- Intake: #00165852 - CI 2975-000075-25 - related to care and services.

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

- Resident Care and Support Services
- Prevention of Abuse and Neglect
- Responsive Behaviours
- Falls Prevention and Management
- Admission, Absences and Discharge

## INSPECTION RESULTS

### Non-Compliance Remedied

**Non-compliance** was found during this inspection and was **remedied** by the 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: FLTCA, 2021, s. 3 (1) 11.**

Residents' Bill of Rights

s. 3 (1) Every licensee of a long-term care home shall ensure that the following rights of residents are fully respected and promoted:

11. Every resident has the right to live in a safe and clean environment.

A resident's bathroom was soiled and there was a delay in cleaning the area. The room was cleaned, after being identified by the Inspector.

Sources: Observation; and interview with staff.

Date Remedy Implemented: January 8, 2026

NC #002 remedied pursuant to FLTCA, 2021, s. 154 (2)

**Non-compliance with: FLTCA, 2021, s. 6 (10) (b)**

Plan of care

s. 6 (10) The licensee shall ensure that the resident is reassessed and the plan of care reviewed and revised at least every six months and at any other time when,

(b) the resident's care needs change or care set out in the plan is no longer necessary.

A resident's plan of care specified the use was of an assistive device, which was not observed in place on two occasions. A staff member revised the plan of care to remove the intervention as it was no longer required.

Sources: A resident's clinical records; observations; and interview with staff.

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Date Remedy Implemented: January 12, 2026

### **WRITTEN NOTIFICATION: Care and Services**

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

#### **Non-compliance with: FLTCA, 2021, s. 11 (1) (a)**

Nursing and personal support services

s. 11 (1) Every licensee of a long-term care home shall ensure that there is,

(a) an organized program of nursing services for the home to meet the assessed needs of the residents.

Staff did not follow the home's policy regarding actions to be taken when resident's blood sugars were at specified value.

Sources: A resident's clinical records, Management of Hypo/Hyperglycemia policy; and interview with staff.

### **WRITTEN NOTIFICATION: Written notice if licensee withholds approval**

NC #004 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

#### **Non-compliance with: FLTCA, 2021, s. 51 (9) (c)**

Authorization for admission to a home

s. 51 (9) If the licensee withholds approval for admission, the licensee shall give to persons described in subsection (10) a written notice setting out,

(c) an explanation of how the supporting facts justify the decision to withhold approval.

The written notice to an applicant did not include an explanation or justified the decision to withhold the approval of admission.

Sources: Review of letter to an applicant and interview with staff.

### **WRITTEN NOTIFICATION: Written notice if licensee withholds approval**

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NC #005 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

**Non-compliance with: FLTCA, 2021, s. 51 (9) (d)**

Authorization for admission to a home

s. 51 (9) If the licensee withholds approval for admission, the licensee shall give to persons described in subsection (10) a written notice setting out,

(d) contact information for the Director.

The written notice to an applicant, which identified a withhold of approval for admission, did not include contact information for the Director.

Sources: Review of letter to applicant and interview with staff.

## **WRITTEN NOTIFICATION: General Requirement for Programs**

NC #006 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

**Non-compliance with: O. Reg. 246/22, s. 34 (2)**

General requirements

s. 34 (2) The licensee shall ensure that any actions taken with respect to a resident under a program, including assessments, reassessments, interventions and the resident's responses to interventions are documented.

Staff did not document assessment findings for a resident as required in the nursing program.

Sources: A resident's clinical records, Management of Hypo/Hyperglycemia policy; and interviews with staff.