

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: March 13, 2026

Inspection Number: 2026-1567-0002

Inspection Type:

Complaint
Critical Incident
Follow up

Licensee: The Regional Municipality of Niagara

Long Term Care Home and City: Linhaven, St Catharines

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): March 6, 9-13, 2026

The following intake(s) were inspected:

- Intake: #00162632 - Follow-up to CO # 001 under inspection #2025-1567-0005, O. Reg. 246/22 - s. 78 (7) (a), related to the food production
- Intake: #00165756 - Critical Incident (CI) #M551-000037-25 - Fall Prevention and Management
- Intake: #00167214 -CI # M551-000002-26 - Resident Care and Support Services.
- Intake: #00170372 - Complaint related to residents' drug regimes

Previously Issued Compliance Order(s)

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

Order #001 from Inspection #2025-1567-0005 related to O. Reg. 246/22, s. 78 (7) (a)

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

- Resident Care and Support Services
- Food, Nutrition and Hydration
- Reporting and Complaints
- Falls Prevention and Management

INSPECTION RESULTS

WRITTEN NOTIFICATION: Administration of drugs

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

Non-compliance with: O. Reg. 246/22, s. 140 (2)

Administration of drugs

s. 140 (2) The licensee shall ensure that drugs are administered to residents in accordance with the directions for use specified by the prescriber. O. Reg. 246/22, s. 140 (2).

A resident received a medication and their clinical records did not show that they had a physician's order for this medication that indicated directions for use.

Sources: A resident's clinical records, interview with Nurse Practitioner, Home's policy

COMPLIANCE ORDER CO #001 Transferring and positioning techniques

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

Non-compliance with: O. Reg. 246/22, s. 40

Transferring and positioning techniques

s. 40. Every licensee of a long-term care home shall ensure that staff use safe transferring and positioning devices or techniques when assisting residents.

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

The licensee shall:

1. Develop and implement an audit to ensure that Personal Support Worker (PSW) staff on the identified home area transfer residents who require a specific transfer status as per their plan of care. The audit should be completed at a minimum, four times a week for a period of three weeks following the service of this order.

a. At least one audit each week must be completed for a specific resident.

b. At least one audit must be completed for two specified staff, if scheduled to work prior to the Compliance Due Date (CDD).

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2. Maintain a record of the audits completed, including dates, shift times, audit time, the name of the person completing the audits, resident and staff names being audited, resident's care plan transfer directions, observations made, audit findings and content of on-the-spot education provided and/or other corrective actions taken where required. Retain all records until the order has been complied with.

Grounds

On a specified date, a resident sustained an injury when two staff transferred them not according to their plan of care.

Failure to use safe transferring techniques for the resident placed them at significant risk of harm, and resulted in an injury.

Sources: Critical Incident report; a resident's clinical records; home's investigation notes; interview with Physiotherapist, Director of Resident Care (DRC) and Associate Director of Resident Care (ADRC).

This order must be complied with by April 24, 2026

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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
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

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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
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.