

Ministry of Long-Term Care

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

Central West District

609 Kumpf Drive, Suite 105
Waterloo, ON, N2V 1K8
Telephone: (888) 432-7901

Public Report

Report Issue Date: July 31, 2025

Inspection Number: 2025-1624-0003

Inspection Type:

Complaint
Critical Incident

Licensee: Corporation of the County of Wellington

Long Term Care Home and City: Wellington Terrace Long-Term Care Home,
Fergus

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): July 16 -18, 22 - 25, 28, 30 - 31, 2025

The following intake(s) were inspected:

Intake: #00152530 - Concerns regarding heat in the home.

Intake: #00153391 - Concerns regarding heat in the home.

Intake: #00153848 - Concerns regarding heat in the home.

Intake: #00153851 - Concerns regarding heat in the home.

Intake: #00153884 - Environmental hazard: breakdown of air conditioning.

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

Resident Care and Support Services
Safe and Secure Home

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INSPECTION RESULTS

WRITTEN NOTIFICATION: Plan of care

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

Non-compliance with: O. Reg. 246/22, s. 29 (3) 11.

Plan of care

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

11. Seasonal risk relating to heat related illness, including protective measures required to prevent or mitigate heat related illness.

The licensee has failed to ensure that residents' plan of care were based on, at a minimum, interdisciplinary assessment of the seasonal risk relating to heat related illness, including protective measures required to prevent or mitigate heat related illness; with respect to multiple residents in the home.

Sources: Medical record review of multiple residents, interview with staff.

WRITTEN NOTIFICATION: Nutritional care and hydration programs

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

Non-compliance with: O. Reg. 246/22, s. 74 (2) (b)

Nutritional care and hydration programs

s. 74 (2) Every licensee of a long-term care home shall ensure that the programs include,

(b) the identification of any risks related to nutritional care and dietary services and

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hydration;

The licensee has failed to ensure that the nutritional care and hydration program, which included a system to monitor and evaluate the food and fluid intake of two residents.

In accordance with O. Reg 246/22, s. 11 (1) (b), the licensee was required to ensure that written policies developed for nutritional care and hydration program were complied with.

Source: Observations, review of the residents' medical records, review of Hydration Assessment and Management Policy, interview with residents and staff.

WRITTEN NOTIFICATION: Reports re critical incidents

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

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 the Director was informed of breakdown of the home's mechanical cooling system that affected the well-being of multiple residents for a period greater than six hours.

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Sources: Observations of different home areas, interview with residents and staff.

COMPLIANCE ORDER CO #001 Air conditioning requirements

NC #004 Compliance Order pursuant to FLTCA, 2021, s. 154 (1) 2.

Non-compliance with: O. Reg. 246/22, s. 23.1 (3) 1.

Air conditioning requirements

s. 23.1 (3) The licensee shall ensure air conditioning is operating, and is used in accordance with the manufacturer's instructions, in each area of the long-term care home described in subsection (1) in either of the following circumstances:

1. When needed to maintain the temperature at a comfortable level for residents during the period and on the days described in subsections (1) and (2).

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

The licensee shall:

- 1) Sufficient supplemental air conditioning equipment shall be made readily available for residents when and where needed for cooling and comfort. Residents at high risk for heat-related illness and residents who are subject to increased heat in their rooms from oxygen concentrators and direct sun exposure shall be prioritized.
- 2) Where supplementary air conditioning equipment has been provided for resident comfort, and consented to by the resident(s) or substitute decision maker(s), the reason shall be stated in the resident's plan of care, along with any operational instructions for staff to follow, if there are any.
- 3) Conduct an interdisciplinary assessment for heat related illness of Residents #001 and #006 to explore additional measures to maintain the temperature of their rooms at a comfortable level. Document the date of the assessment and update the

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interventions in each resident's plan of care accordingly.

Grounds

The licensee has failed to ensure that air conditioning was operating in resident rooms when needed to maintain the temperature at a comfortable level for residents between May 15 and September 15, on any day when the outside temperature (as forecasted by Environment and Climate Change Canada) or the indoor air temperatures measured by the licensee reached 26 degrees Celsius (°C) or above at any point during the day, remainder of the day and the following day.

Multiple concerns were raised about the high air temperature in the home.

Observations and review of the home's temperature logs indicated that the licensee's mechanical cooling system was unable to maintain comfortable indoor air temperatures.

The Environmental Service Manager stated that the home's cooling system required repairs.

Failure to ensure that air conditioning was operating in when needed, affected residents' comfort and quality of life and placed them at increased risk of heat-related illness.

Sources: Review of air temperature logs, observations and air temperature measurements, interview with residents and staff.

This order must be complied with by August 31, 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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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.