

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: November 6, 2025

Inspection Number: 2025-1458-0008

Inspection Type:

Complaint

Licensee: St. Joseph's Health System

Long Term Care Home and City: St. Joseph's Villa, Dundas, Dundas

INSPECTION SUMMARY

The inspection occurred onsite on the following dates: October 29-31, 2025 and November 3-6, 2025.

The following complaint intake was inspected:

- Intake: #00160808 was related to skin and wound care, continence care and resident care and services.

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

Skin and Wound Prevention and Management
Resident Care and Support Services

INSPECTION RESULTS

WRITTEN NOTIFICATION: Plan of Care

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

Non-compliance with: FLTCA, 2021, s. 6 (4) (a)

Plan of care

s. 6 (4) The licensee shall ensure that the staff and others involved in the different aspects of care of the resident collaborate with each other,

(a) in the assessment of the resident so that their assessments are integrated and are consistent with and complement each other; and

The licensee has failed to ensure that staff collaborate with each other in a resident's assessments so that they were consistent with and complemented each other. The resident had altered skin integrity requiring weekly assessments. Multiple inconsistencies were identified when comparing the assessments.

Sources: resident's clinical records; and interviews with staff.

WRITTEN NOTIFICATION: General Requirements for Programs

NC #002 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.

The licensee has failed to ensure that interventions were documented for a resident. Staff were required to document on three specific interventions in Point of Care (POC) for a resident. A review of POC showed that documentation, in a two month period, was not completed a total of 34 times for all three interventions.

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Sources: resident's clinical records; and interviews with staff.

WRITTEN NOTIFICATION: Records

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

Non-compliance with: O. Reg. 246/22, s. 274 (b)

Resident records

s. 274. Every licensee of a long-term care home shall ensure that,
(b) the resident's written record is kept up to date at all times.

The licensee has failed to ensure that a resident's written record was kept up to date at all times when staff did not document instructions from a family member that contradicted the resident's plan of care. Multiple staff said that the family member would give specific directions that did not follow the resident's plan of care, which was reported to the registered staff; however no corroborating documentation was identified.

Sources: resident's clinical records; and interviews with staff.