

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: January 27, 2026

Inspection Number: 2026-1556-0001

Inspection Type:
Critical Incident

Licensee: The Regional Municipality of Halton

Long Term Care Home and City: Allendale, Milton

INSPECTION SUMMARY

The inspection occurred onsite on the following date (s): January 19, 20, 21, 22, 23, 27, 2026

The inspection occurred offsite on the following date (s): January 26, 2026

The following intake (s) were inspected:

-Intake: #00161746 - [Critical Incident (CI): M536-000062-25] Infection Prevention and Control.

-Intake: #00163083 - [CI: M536-000064-25] Infection Prevention and Control.

-Intake: #00164756 - [CI: M536-000071-25] Prevention of Abuse and Neglect.

-Intake: #00166201 - [CI: M536-000076-25] Falls Prevention and Management.

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

Resident Care and Support Services
Infection Prevention and Control
Prevention of Abuse and Neglect
Falls Prevention and Management

INSPECTION RESULTS

Non-Compliance Remedied

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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: O. Reg. 246/22, s. 272

CMOH and MOH

s. 272. Every licensee of a long-term care home shall ensure that all applicable directives, orders, guidance, advice or recommendations issued by the Chief Medical Officer of Health or a medical officer of health appointed under the Health Protection and Promotion Act are followed in the home.

The recommendations issued by the Chief Medical Officer of health were not followed in the home when a bottle of Purell Advanced Foam Hand Rub was observed to be expired.

A day later the expired product was removed.

Sources: Observation.

Date Remedy Implemented: January 20, 2026

WRITTEN NOTIFICATION: Duty to protect

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

Non-compliance with: FLTCA, 2021, s. 24 (1)

Duty to protect

s. 24 (1) Every licensee of a long-term care home shall protect residents from abuse by anyone and shall ensure that residents are not neglected by the licensee or staff.

A resident was not protected from neglect by staff of the home in accordance with O. Reg. 246/22, s. 7.

On a specified date, the resident was transferred into a broken chair by two staff. The resident did not receive the needed support when they were in a state of distress.

Sources: Camera footage of the incident, the home's internal investigation notes and

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their Lift and Transfer Policy.

WRITTEN NOTIFICATION: Transferring and positioning techniques

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

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.

A resident was transferred into a broken chair which was not checked prior to transferring the resident. They were not repositioned when they were in a state of discomfort.

Sources: Camera footage of the incident, the home's investigation notes and their Lift and Transfer Policy.

WRITTEN NOTIFICATION: Housekeeping

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

Non-compliance with: O. Reg. 246/22, s. 93 (2) (a) (i)

Housekeeping

s. 93 (2) As part of the organized program of housekeeping under clause 19 (1) (a) of the Act, the licensee shall ensure that procedures are developed and implemented for,
(a) cleaning of the home, including,
(i) resident bedrooms, including floors, carpets, furnishings, privacy curtains, contact surfaces and wall surfaces, and

In accordance with O. Reg. 246/22, s. 11 (1) (a) a surface cleaning policy was not implemented in the home to guide staff on the frequency of contact surface cleaning requirements during times of outbreak and non-outbreak periods, as well as the the frequency of changing cleaning cloth in between multiple surfaces.

Sources: Observation, and the home's Surface Cleaning Policy.

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WRITTEN NOTIFICATION: Housekeeping

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

Non-compliance with: O. Reg. 246/22, s. 93 (2) (b) (iii)

Housekeeping

s. 93 (2) As part of the organized program of housekeeping under clause 19 (1) (a) of the Act, the licensee shall ensure that procedures are developed and implemented for, (b) cleaning and disinfection of the following in accordance with manufacturer's specifications and using, at a minimum, a low level disinfectant in accordance with evidence-based practices and, if there are none, in accordance with prevailing practices:

(iii) contact surfaces;

On a specified date, a staff exited a resident's room without cleaning and disinfecting the frequently touch areas in the room.

Sources: Observation.

WRITTEN NOTIFICATION: Infection prevention and control

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

Non-compliance with: O. Reg. 246/22, s. 102 (2) (b)

Infection prevention and control program

s. 102 (2) The licensee shall implement,

(b) any standard or protocol issued by the Director with respect to infection prevention and control. O. Reg. 246/22, s. 102 (2).

A. In accordance with the Infection Prevention and Control (IPAC) Standard for Long-Term Care Homes section 10.2 (c) was not met when staff did not support a resident with hand hygiene prior to the resident eating.

Sources: Dining room observation, and the home's Hand Hygiene Policy.

B. In accordance with additional requirement 9. 1 (b) under the Infection Prevention and Control (IPAC) standard for Long-Term Care Homes, revised September 2023, routine practices of hand hygiene was not carried out by staff on a specific date during meal services.

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Sources: Observation of meal services, and the home's Hand Hygiene Policy.

WRITTEN NOTIFICATION: Reports re critical incidents

NC #007 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 115 (1) 5.

Reports re critical incidents

s. 115 (1) Every licensee of a long-term care home shall ensure that the Director is immediately informed, in as much detail as is possible in the circumstances, of each of the following incidents in the home, followed by the report required under subsection (5):

5. An outbreak of a disease of public health significance or communicable disease as defined in the Health Protection and Promotion Act.

Public Health declared an outbreak in the home on a specific date, however the home did not inform the Director until five days later.

Sources: Critical Incident Report.