

### **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 5, 2025

**Inspection Number**: 2025-1568-0005

**Inspection Type:**Critical Incident

**Licensee:** City of Hamilton

Long Term Care Home and City: Macassa Lodge, Hamilton

## **INSPECTION SUMMARY**

The inspection occurred onsite on the following date(s): October 21-23, 27-29, 31, 2025 and November 4, 2025.

The following intake(s) were inspected:

- -Intake: #00155875 related to Falls Prevention and Management.
- -Intake: #00156840 related to Food, Nutrition and Hydration.

The following intake was completed:

-Intake: #00159229 - related to Prevention of Abuse and Neglect.

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

Food, Nutrition and Hydration Falls Prevention and Management

## **INSPECTION RESULTS**



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## **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) 9.

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:

9. Disease diagnosis.

The licensee of a long-term care home failed to ensure that a plan of care for a resident was based on, at a minimum, interdisciplinary assessment of a resident's disease diagnosis.

A resident's diagnosis was documented in the progress note by the Physician during the resident's assessment in the home.

Progress notes indicated that the resident's condition had changed, and they were in a distress related to their diagnosis.

The Nurse Manager (NM) acknowledged that for a resident with a diagnosis, the written care plan would highlight identified interventions, which were used by staff as a point of reference for care to be provided for the resident.

The resident's written care plan was not based on, at a minimum, on interdisciplinary assessment of a resident's disease.

Sources: A resident's progress notes, written care plan; interview with the NM.



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## **COMPLIANCE ORDER CO #001 Plan of care**

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

Non-compliance with: FLTCA, 2021, s. 6 (7)

Plan of care

s. 6 (7) The licensee shall ensure that the care set out in the plan of care is provided to the resident as specified in the plan.

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

The licensee shall:

1.Re-train identified staff member on how to become familiar with specified interventions and care needs for residents, before providing care to them.

2.During identified staff member's first shift working in the home, audit them on being familiar with at least three residents' specified interventions and care needs, who were assigned to them during their shift.

3.Document audit results, including date and time of the audit, name of the auditor, results and corrective actions taken if needed.

#### Grounds

The licensee failed to ensure that the care, related to a specified assistance for a resident was provided to them on an identified day.

A resident's written care plan stated that they required a specified assistance. On an identified date, a resident was not provided the specified assistance, which resulted in an incident, when the resident had a change in their health status, which was



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confirmed by the Nurse Manager (NM).

Sources: A resident's written care plan, Investigation Notes; interview with staff.

This order must be complied with by November 18, 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, 8<sup>th</sup> 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, 9<sup>th</sup> Floor Toronto, ON, M5S 1S4

#### Director

c/o Appeals Coordinator
Long-Term Care Inspections Branch
Ministry of Long-Term Care
438 University Avenue, 8<sup>th</sup> 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 <a href="https://www.hsarb.on.ca">www.hsarb.on.ca</a>.