

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: December 10, 2025

Inspection Number: 2025-1568-0006

Inspection Type:

Critical Incident
Follow up

Licensee: City of Hamilton

Long Term Care Home and City: Macassa Lodge, Hamilton

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): December 3-5, 8-10, 2025.

The following intake(s) were inspected:

-Intake #00156668 - CI (Critical Incident) #M552-000036-25 related to infection prevention and control (IPAC).

-Intake #00160084 - CI #M552-000043-25 related to falls prevention and management.

-Intake #00161961 - Follow-up for Compliance Order #001 from inspection #2025-1568-0005, FLTCA, 2021 - s. 6 (7) - Plan of care, Compliance Due Date: November 18, 2025.

-Intake #00162364 - CI #M552-000046-25 related to transferring and positioning techniques.

Previously Issued Compliance Order(s)

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

Order #001 from Inspection #2025-1568-0005 related to FLTCA, 2021, s. 6 (7)

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

Resident Care and Support Services
Food, Nutrition and Hydration
Infection Prevention and Control
Falls Prevention and Management

INSPECTION RESULTS

WRITTEN NOTIFICATION: Residents' Bill of Rights

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

Non-compliance with: FLTCA, 2021, s. 3 (1) 1.

Residents' Bill of Rights

s. 3 (1) Every licensee of a long-term care home shall ensure that the following rights of residents are fully respected and promoted:

1. Every resident has the right to be treated with courtesy and respect and in a way that fully recognizes the resident's inherent dignity, worth and individuality, regardless of their race, ancestry, place of origin, colour, ethnic origin, citizenship, creed, sex, sexual orientation, gender identity, gender expression, age, marital status, family status or disability.

Staff were providing care to a resident. During care, the staff began to speak with one another in a different language in front of the resident, who did not speak the

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same language. The resident indicated this made them feel uncomfortable and they did not like it.

Sources: Interview with staff, interview with a resident, the home's investigation notes.

WRITTEN NOTIFICATION: Transferring and positioning techniques

NC #002 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.

On an identified date, two staff transferred a resident into chair that was broken.

Sources: Interview with staff, CI report, the home's investigation notes, interview with a resident, the home's policy.

COMPLIANCE ORDER CO #001 Infection prevention and control program

NC #003 Compliance Order pursuant to FLTCA, 2021, s. 154 (1) 2.

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).

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

The licensee shall:

1. Educate all staff who work on a specified home area on the correct procedure for donning, doffing, and selection of Personal Protective Equipment (PPE). and;
2. Conduct once daily PPE (donning, doffing, and selection) audits of staff on the specified home area for a minimum of two weeks. and;
3. Retain records of:
 - A) Staff training (including the date of training, staff who attended, staff who provided the training, and documentation of training material). and;
 - B) The PPE audits, which should include the room number, resident name, staff name, precautions required, whether concerns were identified, and follow up action taken when gaps were identified.

Grounds

The IPAC Standard for Long-Term Care Homes, indicated under section 9.1 Additional Precautions were to be followed in the IPAC program which included (f) additional PPE requirements including appropriate selection and application were followed.

A. On a specified date, two staff were observed to don PPE in the incorrect order prior to entering a resident's room to provide personal care.

Sources: Observations and a resident's clinical record, PPE signage.

B. On a specified date, a staff member was observed to not don eye protection or an

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N95 mask when entering a resident's room.

The resident was on additional precautions and the home area was in a suspected respiratory outbreak at the time of the observations. The resident was later confirmed positive for a specified virus and the whole home was declared in outbreak for the same infection.

Sources: Observations and a resident's progress notes, PPE signage.

This order must be complied with by January 30, 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

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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.