

Ministry of Long-Term Care

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

London District

130 Dufferin Avenue, 4th Floor
London, ON, N6A 5R2
Telephone: (800) 663-3775

Public Report

Report Issue Date: September 5, 2025

Inspection Number: 2025-1028-0006

Inspection Type:

Critical Incident
Follow up

Licensee: Maplewood Nursing Home Limited

Long Term Care Home and City: Maple Manor Nursing Home, Tillsonburg

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): August 26, 27, 28, 29, 2025 and September 2, 3, 4, 5, 2025

The following intake(s) were inspected:

- Intake: #00152215 - Follow-up #: 1 - CO#004/2025-1028-0005, O. Reg. 246/22 - s. 140 (1) regarding medication administration, with a compliance due date (CDD) of July 4, 2025;
- Intake: #00152216 - Follow-up #: 1 -CO#002/2025-1028-0005, O. Reg. 246/22 - s. 102 (2) (b) regarding infection prevention and control program (IPAC), with a CDD of August 14, 2025;
- Intake: #00152217 - Follow-up #: 1 - CO#003/2025-1028-0005, O. Reg. 246/22 - s. 102 (11) (a) regarding IPAC, with a CDD of July 25, 2025;
- Intake: #00152218 - Follow-up #: 1 - CO#005/2025-1028-0005, O. Reg. 246/22 - s. 102 (9) regarding IPAC, with a CDD of July 25, 2025;
- Intake: #00152219 - Follow-up #: 1 -CO#001/ 2025-1028-0005, FLTCA, 2021 - s. 6 (7) regarding plan of care with a CDD of July 25, 2025;
- Intake: #00152639/Critical Incident System (CIS) report #1049-000028-25 related to falls prevention and management;

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- Intake: #00152896/CIS #1049-000030-25 related to IPAC;
- Intake: #00153745/CIS #1049-000032-25 related to medication management;
- Intake: #00155446/CIS #1049-000034-25 related to falls prevention and management.

Previously Issued Compliance Order(s)

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

- Order #004 from Inspection #2025-1028-0005 related to O. Reg. 246/22, s. 140 (1)
- Order #003 from Inspection #2025-1028-0005 related to O. Reg. 246/22, s. 102 (11)
(a)
- Order #005 from Inspection #2025-1028-0005 related to O. Reg. 246/22, s. 102 (9)
- Order #001 from Inspection #2025-1028-0005 related to FLTCA, 2021, s. 6 (7)

The following previously issued Compliance Order(s) were found **NOT** to be in compliance:

- Order #002 from Inspection #2025-1028-0005 related to O. Reg. 246/22, s. 102 (2)
(b)

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

- Resident Care and Support Services
- Medication Management
- Infection Prevention and Control
- Falls Prevention and Management

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INSPECTION RESULTS

WRITTEN NOTIFICATION: Conditions of Licence

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

Non-compliance with: FLTCA, 2021, s. 104 (4)

Conditions of licence

s. 104 (4) Every licensee shall comply with the conditions to which the licence is subject.

The licensee has failed to comply with Compliance Order (CO) #002 from inspection #2025-1028-0005, served June 19, 2025, with an extended compliance due date (CDD) of August 14, 2025.

Part one of CO #002 stated the licensee was to review the housekeeping shift routines and housekeeping schedule to ensure there was adequate housekeeping coverage on weekends and holidays to complete disinfection of high touch surface areas daily. The Nutrition and Environmental Manager (NEM) stated after review of the schedules the home was scheduling three housekeepers on days and one housekeeper float. The Administrator and NEM confirmed that due to low staffing levels and holidays there were some day shifts that were not staffed with three housekeepers and the new schedule with three housekeepers on days and one housekeeper float would not be implemented for several more weeks. Therefore, complete disinfection of high touch surface areas was not always completed on certain days after the CDD of August 14, 2025.

Part three of CO #002 stated the licensee was to complete in person retraining with housekeepers regarding the process for cleaning high touch surfaces. Two housekeepers stated they were not aware that they were required to use specific

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cleaning techniques to clean each resident space in a shared room. The NEM stated when the concern that staff were using one cloth to clean a shared resident space was identified, a document and sign off sheet was created for staff to review the proper procedure. The NEM acknowledged that not all staff had completed the required review of the proper procedure. There were still 12 staff members that worked in housekeeping that required retraining on the proper use of cloths when cleaning a shared resident space.

By not having the required number of housekeeping staff on weekend day shifts and not ensuring all housekeeping staff were trained on the proper use of cloths when cleaning shared resident spaces, there was risk that high-touch surfaces were not cleaned properly and at the required frequency.

Sources: Review of the August 2025 Housekeeping Schedule, the Housekeeping High Touch Cleaning Record for August 2025, the home's "Standards of Practice" Policy ICM-XII-010 dated June 16, 2024, Public Health Ontario - Routine Daily Cleaning of Patient/Resident Room; and interviews with two housekeepers, the Infection Prevention and Control Lead, the NEM, and the Administrator.

An Administrative Monetary Penalty (AMP) is being issued on this written notification AMP #001

NOTICE OF ADMINISTRATIVE MONETARY PENALTY (AMP)

The Licensee has failed to comply with FLTCA, 2021

Notice of Administrative Monetary Penalty AMP #001

Related to Written Notification NC #001

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Pursuant to section 158 of the Fixing Long-Term Care Act, 2021, the licensee is required to pay an administrative penalty of \$1100.00, to be paid within 30 days from the date of the invoice.

In accordance with s. 349 (6) and (7) of O. Reg. 246/22, this administrative penalty is being issued for the licensee's failure to comply with an order under s. 155 of the Act.

Compliance History:

In the last 36 months, the following NC was issued to O. Reg. 246/22 s. 102 (b) infection prevention and control:

- Compliance order on June 19, 2025, during inspection #2025-1028-0005;
- WN on January 14, 2025, during inspection #2025-1018-0001;
- WN on April 3, 2024, during inspection #2024-1018-0002.

This is the first AMP that has been issued to the licensee for failing to comply with this requirement.

Invoice with payment information will be provided under a separate mailing after service of this notice.

Licensees must not pay an AMP from a resident-care funding envelope provided by the Ministry [i.e., Nursing and Personal Care (NPC); Program and Support Services (PSS); and Raw Food (RF)]. By submitting a payment to the Minister of Finance, the licensee is attesting to using funds outside a resident-care funding envelope to pay the AMP.

WRITTEN NOTIFICATION: Housekeeping

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

Non-compliance with: O. Reg. 246/22, s. 93 (4)

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Housekeeping

s. 93 (4) The licensee shall ensure that a sufficient supply of housekeeping equipment and cleaning supplies is readily available to all staff at the home.

The licensee has failed to ensure that a sufficient supply of housekeeping equipment and cleaning supplies were readily available to all staff at the home, when there were insufficient cloths to ensure that housekeeping staff were changing cleaning cloths for each resident bed space as required.

Sources: Appendix A: Routine Daily Cleaning of a Resident Room and interviews with two housekeepers and the Nutrition and Environmental Manager.

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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
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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.