

**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:** March 24, 2025

**Inspection Number:** 2025-1618-0002

**Inspection Type:**

Critical Incident

**Licensee:** The Regional Municipality of Halton

**Long Term Care Home and City:** Creek Way Village, Burlington

## INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): March 17- 21, 24, 2025.

The following intake(s) were inspected:

- Intake: #00136605/ Critical Incident (CI) #M623-000001-25 was related to Infection Prevention and Control.

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

Infection Prevention and Control

## INSPECTION RESULTS

### Non-Compliance Remedied

**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.

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NC #001 remedied pursuant to FLTCA, 2021, s. 154 (2)

**Non-compliance with: O. Reg. 246/22, s. 97**

Hazardous substances

s. 97. Every licensee of a long-term care home shall ensure that all hazardous substances at the home are labelled properly and are kept inaccessible to residents at all times.

The licensee has failed to ensure that all hazardous substances at the home are labelled properly at all times. On a specific day, a cleaning agent used in the home was found with no expiry date. It was removed by the home two days later.

**Sources:** Review of cleaning agent label and interview with staff.

Date Remedy Implemented: March 19, 2025

**WRITTEN NOTIFICATION: Infection Prevention and Control**

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

**Non-compliance with: O. Reg. 246/22, s. 102 (9) (a)**

Infection prevention and control program

s. 102 (9) The licensee shall ensure that on every shift,  
(a) symptoms indicating the presence of infection in residents are monitored in accordance with any standard or protocol issued by the Director under subsection (2); and

The licensee has failed to ensure that on every shift, symptoms indicating the presence of infection in a resident was monitored while the resident was in isolation.

**Sources:** Resident's clinical records and interview with staff.

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