

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: February 5, 2026

Inspection Number: 2026-1618-0001

Inspection Type:
Proactive Compliance Inspection

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): January 22, 23, 27-30, 2026 and February 2-5, 2026

The following intake was inspected:

-Intake: #00168375 -Proactive Compliance Inspection

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

Food, Nutrition and Hydration
Infection Prevention and Control

INSPECTION RESULTS

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 (4) (b)

Plan of care

s. 29 (4) The licensee shall ensure that a registered dietitian who is a member of the staff of the home,

(b) assesses the matters referred to in paragraphs 13 and 14 of subsection (3). O. Reg. 246/22, s. 29 (4).

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A quarterly nutrition review identified a resident had been assessed for dehydration multiple times, their hydration requirements were not met, and had limited food/fluid intake. Registered Dietician (RD) was not made aware of the assessment findings.

Sources: resident's clinical records, Hydration Program Procedure, and interviews with staff.

WRITTEN NOTIFICATION: Nutritional care and hydration programs

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

Non-compliance with: O. Reg. 246/22, s. 74 (2) (c)

Nutritional care and hydration programs

s. 74 (2) Every licensee of a long-term care home shall ensure that the programs include,

(c) the implementation of interventions to mitigate and manage those risks;

A. Planned nutritional strategies were not implemented to manage risk to the resident.

i) The resident had a special pre-selected menu. During a meal service, the pre-selected menu was not followed and the resident was served one of the restricted items listed.

ii) The resident's plan of care directed staff to not provide a specific beverage due to preferences. During a meal service, the resident was served the beverage they did not prefer.

Sources: meal observations, resident's clinical health record, interviews with staff.

B. During a meal service, a resident was not offered specific beverages as required in their plan of care.

Sources: resident's clinical records, Hydration Program, and interviews with staff.

WRITTEN NOTIFICATION: Food production

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

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Non-compliance with: O. Reg. 246/22, s. 78 (2) (d)

Food production

s. 78 (2) The food production system must, at a minimum, provide for,
(d) preparation of all menu items according to the planned menu;

Not all menu items were prepared according to the planned menu for a lunch meal on a specified date:

- i) The planned menu included a food item at a specific weight. The food item used on the specific date weighed less. Therefore, the food served to residents contained less nutritional value than the planned menu item.
- ii) A specific scoop size was planned for the pureed meal, however, staff used a smaller scoop resulting in reduced nutritional value of the entrée.
- iii) The planned menu identified a pureed food with a specific dressing. The food was prepared with a different dressing.

Not all menu items were prepared according to the planned menu for the lunch meal on a specified date:

- i) The planned menu identified a specific food, it was prepared with a different dressing and included ingredients not identified on the planned recipe. The recipe identified the food was not to be prepared more than 24 hours in advance of service, however, it was prepared greater than 24 hours in advance.
- ii) A filling was prepared two days in advance of the meal. The Nutrition Service Supervisor (NSS) stated that fillings were not to be mixed two days in advance of meal service.

Sources: observations, interview with staff.

WRITTEN NOTIFICATION: Food production

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

Non-compliance with: O. Reg. 246/22, s. 78 (2) (g)

Food production

s. 78 (2) The food production system must, at a minimum, provide for,
(g) documentation on the production sheet of any menu substitutions. O. Reg. 246/22,
s. 78 (2).

Menu substitutions were not documented on the production sheet for smaller changes

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and specials throughout the menu cycle. Changes were made to the menu, however, direction for staff related to panning directions, servings required for each menu choice in each home area, and portion sizes for the replacement items were not consistently available.

Sources: production sheets, observations at the lunch meal service, interview with staff.

WRITTEN NOTIFICATION: Nutrition manager

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

Non-compliance with: O. Reg. 246/22, s. 81 (4)

Nutrition manager

s. 81 (4) The licensee shall ensure that a nutrition manager is on site at the home working in the capacity of nutrition manager for the minimum number of hours per week calculated under subsection (5), without including any hours spent fulfilling other responsibilities. O. Reg. 246/22, s. 81 (4).

Based on the current resident census, the home's Nutrition Manager would be required to provide a minimum of 46 hours on site at the Long-Term Care home. The home's Nutrition Manager (Nutrition Services Supervisor) is regularly scheduled for 35 paid hours per week, working on site in the home, resulting in a shortage of 11 hours per week.

Sources: interviews staff and staffing schedule.