

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: October 24, 2025

Inspection Number: 2025-1540-0003

Inspection Type:
Critical Incident

Licensee: The Regional Municipality of Niagara

Long Term Care Home and City: The Meadows of Dorchester, Niagara Falls

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): October 20-24, 2025

The following intake(s) were inspected:

- Intake: #00157992 -Critical Incident (CI) #M515-000016-25 - Infection prevention and control
- Intake: #00159089 -CI#M515-000017-25 - Falls prevention and management
- Intake: #00159863 -CI#M515-000020-25 - Falls prevention and management

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

- Infection Prevention and Control
- Falls Prevention and Management

INSPECTION RESULTS

WRITTEN NOTIFICATION: Required Programs

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

Non-compliance with: O. Reg. 246/22, s. 53 (1) 1.

Required programs

s. 53 (1) Every licensee of a long-term care home shall ensure that the following interdisciplinary programs are developed and implemented in the home:

1. A falls prevention and management program to reduce the incidence of falls and the

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risk of injury.

The licensee has failed to ensure that the falls prevention and management program was implemented for a resident when they were observed to not have their falls prevention interventions in place on two occasions on a specified date as outlined in their plan of care.

Sources: Observations of resident, resident's clinical records.

WRITTEN NOTIFICATION: Skin and wound care

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

Non-compliance with: O. Reg. 246/22, s. 55 (2) (a) (ii)

Skin and wound care

s. 55 (2) Every licensee of a long-term care home shall ensure that,

(a) a resident at risk of altered skin integrity receives a skin assessment by an authorized person described in subsection (2.1)

(ii) upon any return of the resident from hospital, and

The licensee has failed to ensure that a resident received a skin assessment upon return from hospital, following a surgical procedure when the resident's wound was not assessed until a later date.

Sources: Resident's clinical records, interview with staff.

WRITTEN NOTIFICATION: Skin and wound care

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

Non-compliance with: O. Reg. 246/22, s. 55 (2) (b) (iv)

Skin and wound care

s. 55 (2) Every licensee of a long-term care home shall ensure that,

(b) a resident exhibiting altered skin integrity, including skin breakdown, pressure injuries, skin tears or wounds,

(iv) is reassessed at least weekly by an authorized person described in subsection (2.1), if clinically indicated;

The licensee has failed to ensure that a resident who had impaired skin integrity was

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reassessed weekly when they did not have weekly skin and wound assessments completed for their surgical incision on a specified date.

Sources: Resident's clinical records.