

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: November 13, 2025

Inspection Number: 2025-1618-0005

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): November 4-7, 10, 12-13, 2025.

The following intake(s) were inspected:

- Intake: #00158690 regarding Infection Prevention and Control.
- Intake: #00161314 regarding Falls Prevention and Management, Skin and Wound Prevention and Management.

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

Resident Care and Support Services
Skin and Wound Prevention and Management
Infection Prevention and Control
Falls Prevention and Management

INSPECTION RESULTS

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WRITTEN NOTIFICATION: General Requirements

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

Non-compliance with: O. Reg. 246/22, s. 34 (2)

General requirements

s. 34 (2) The licensee shall ensure that any actions taken with respect to a resident under a program, including assessments, reassessments, interventions and the resident's responses to interventions are documented.

A registered nursing staff did not document action they had taken with respect to a resident under the skin and wound program.

Sources: Interview; record reviews.

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.

A staff did not ensure brakes on a resident's mobility device were fully applied before providing assistance with a transfer.

Sources: Observation; interview.

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WRITTEN NOTIFICATION: Infection prevention and control program

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

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).

A) Routine Practices and Additional Precautions did not include proper use and removal of personal protective equipment (PPE) during routine practices.

One staff wore gloves when portering a resident to different locations within a home area. Another staff did not perform hand hygiene after removing gloves worn for direct care.

B) Routine Practices and Additional Precautions did not include staff performing hand hygiene at the four moments of hand hygiene during routine practices.

One staff did not perform hand hygiene before and after making contact with multiple residents and their environments.

C) Additional Precautions did not include appropriate application and removal of PPE.

One staff applied gloves that had been stored in their pocket before providing care to a resident on Additional Precautions. The staff did not remove the PPE in a

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manner that prevented contamination of their skin, and did not perform hand hygiene when their skin was considered potentially contaminated.

Sources: Observations; interview; the home's PPE Protocol; the Infection Prevention and Control (IPAC) Standard for Long-Term Care Homes, April 2022 (revised September 2023).



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**Inspection Report Under the
Fixing Long-Term Care Act, 2021**

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