

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

Toronto District  
5700 Yonge Street, 5th Floor  
Toronto, ON, M2M 4K5  
Telephone: (866) 311-8002

## Public Report

<b>Report Issue Date:</b> December 11, 2025
<b>Inspection Number:</b> 2025-1485-0005
<b>Inspection Type:</b> Critical Incident
<b>Licensee:</b> Belmont House
<b>Long Term Care Home and City:</b> Belmont House, Toronto

## INSPECTION SUMMARY

The inspection occurred onsite on the following dates: December 4-5, 8-9, and 11, 2025.

The inspection occurred offsite on the following dates: December 9-10, 2025.

The following Critical Incident (CI) intakes were inspected:

- Intake: #00161392 / CI #2985-000025-25 and Intake: #00161807 / CI #2985-000026-25 were related to falls prevention and management.
- Intake: #00159264 / CI #2985-000024-25 was related to an outbreak of a communicable disease.
- Intake: #00162892 / CI #2985-000027-25 was related to an injury of an unknown cause.

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

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

## INSPECTION RESULTS

### WRITTEN NOTIFICATION: Transferring and Positioning Techniques

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

Toronto District  
5700 Yonge Street, 5th Floor  
Toronto, ON, M2M 4K5  
Telephone: (866) 311-8002

NC #001 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 resident's plan of care indicated that the staff were to use a mechanical lift when transferring the resident. During an observation, two staff transferred the resident without using the mechanical lift. A registered staff confirmed that a lift should have been used.

**Sources:** Observation, resident's clinical records, and staff interviews.

## WRITTEN NOTIFICATION: Required Programs

NC #002 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 risk of injury.

In accordance with O. Reg. 246/22, s. 11 (1) (b), the licensee was required to ensure that written policies and protocols developed for the falls prevention and management program were complied with. Specifically, the home's policy indicated a Morse Fall Assessment was to be completed when there was a significant change in health status.

A resident sustained a fall with injury. A Resident Assessment Instrument (RAI) was completed for the resident and indicated that the resident had a significant change in their health status. A manager confirmed that the fall resulted in a significant change in resident's health status and that the Morse Fall Assessment had not been completed as required per the home's policy.

**Sources:** Resident's clinical records, home's Fall Prevention and Management in Long-Term Care policy (revised October 2025), and interview with management.