

Ministry of Long-Term Care

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

Central East District

33 King Street West, 4th Floor
Oshawa, ON, L1H 1A1
Telephone: (844) 231-5702

Public Report

Report Issue Date: July 9, 2025

Inspection Number: 2025-1486-0005

Inspection Type:
Complaint

Licensee: Bethany Lodge

Long Term Care Home and City: Bethany Lodge, Markham

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): July 7 - 9, 2025

The following intake(s) were inspected:

Intake: Complaint related to improper care of a resident.

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

Resident Care and Support Services
Infection Prevention and Control
Reporting and Complaints

INSPECTION RESULTS

WRITTEN NOTIFICATION: Safe and Secure Home

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

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Non-compliance with: FLTCA, 2021, s. 5

Home to be safe, secure environment

s. 5. Every licensee of a long-term care home shall ensure that the home is a safe and secure environment for its residents.

The licensee failed to ensure that the home provided a safe environment for its residents. During an observation of a resident's room, numerous items were found on the nightstand. Assistant Director of Care (ADOC) acknowledged that the nightstand should not have been as cluttered.

Sources: Interviews with Registered Practical Nurse (RPN) and Assistant Director of Care (ADOC).

WRITTEN NOTIFICATION: Reporting and Complaints

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

Non-compliance with: O. Reg. 246/22, s. 108 (2)

Dealing with complaints

s. 108 (2) The licensee shall ensure that a documented record is kept in the home that includes,

- (a) the nature of each verbal or written complaint;
- (b) the date the complaint was received;
- (c) the type of action taken to resolve the complaint, including the date of the action, time frames for actions to be taken and any follow-up action required;
- (d) the final resolution, if any;
- (e) every date on which any response was provided to the complainant and a description of the response; and
- (f) any response made in turn by the complainant.

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The licensee has failed to ensure that a documented record was kept in the home related to a verbal complaints regarding the care of a resident. There was no record that included the nature of the verbal complaint, the date it was received, the type of action taken to resolve the complaint, the final resolution, if any, every date of which any response was provided to the complainant and a description of the response, and any response made in turn by the complainant.

Sources: The home's policy titled Complaints Procedures; Interview with ADOC and the complainant.



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

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