

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

North District
159 Cedar St, Suite 403
Sudbury, ON, P3E 6A5
Telephone: (800) 663-6965

Public Report

Report Issue Date: April 15, 2026

Inspection Number: 2026-1115-0002

Inspection Type:
Critical Incident

Licensee: Extendicare (Canada) Inc.

Long Term Care Home and City: Extendicare York, Sudbury

INSPECTION SUMMARY

The inspection occurred onsite on the following dates: April 7 - 15, 2026

The following intakes were inspected:

- One intake related to the improper/incompetent care of a resident by staff.
- One intake related to the neglect of a resident by staff.
- One intake related to the fall of a resident resulting in injury.
- One intake related to the physical abuse of a resident by a resident.

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

Resident Care and Support Services
Prevention of Abuse and Neglect
Responsive Behaviours
Falls Prevention and Management

INSPECTION RESULTS

WRITTEN NOTIFICATION: Plan of care - Duty of licensee to comply with plan

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

Non-compliance with: FLTCA, 2021, s. 6 (7)

Plan of care

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s. 6 (7) The licensee shall ensure that the care set out in the plan of care is provided to the resident as specified in the plan.

A resident sustained injury after a PSW did not utilize the correct equipment as per the residents' plan of care.

Sources: A residents' clinical records, CIS report, investigation file, and an interview with staff.

WRITTEN NOTIFICATION: Continence care and bowel management

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

Non-compliance with: O. Reg. 246/22, s. 56 (2) (b)

Continence care and bowel management

s. 56 (2) Every licensee of a long-term care home shall ensure that,

(b) each resident who is incontinent has an individualized plan, as part of their plan of care, to promote and manage bowel and bladder continence based on the assessment and that the plan is implemented;

Staff did not perform continence care as required by the residents' plan of care.

Sources: A residents' clinical records; Continence care program policy; CIS report; interview with staff.



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

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