

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: March 25, 2026
Inspection Number: 2026-1361-0001
Inspection Type: Complaint Critical Incident
Licensee: Yee Hong Centre for Geriatric Care
Long Term Care Home and City: Yee Hong Centre - Markham, Markham

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): March 16-19, 23-25, 2026

The inspection occurred offsite on the following date(s): March 20, 2026

The following intake(s) were inspected:

One intake related to a written complaint alleging improper care of a resident
One intake related to a complaint alleging improper care of residents
One intake related to an allegation of neglect of a resident

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

- Skin and Wound Prevention and Management
- Resident Care and Support Services
- Prevention of Abuse and Neglect
- Reporting and Complaints
- Falls Prevention and Management

INSPECTION RESULTS

WRITTEN NOTIFICATION: Reporting and Complaints

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

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Non-compliance with: FLTCA, 2021, s. 28 (1) 2.

Reporting certain matters to Director

s. 28 (1) A person who has reasonable grounds to suspect that any of the following has occurred or may occur shall immediately report the suspicion and the information upon which it is based to the Director:

2. Abuse of a resident by anyone or neglect of a resident by the licensee or staff that resulted in harm or a risk of harm to the resident.

The long-term care (LTC) home received a written complaint letter alleging neglect of the resident that resulted in harm. A Critical Incident (CI) report was submitted regarding the written complaint, however the CI regarding the allegation of neglect was not immediately reported, as required.

Sources: Critical Incident System (CIS) reports and an interview with staff

WRITTEN NOTIFICATION: Care Conference

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

Non-compliance with: O. Reg. 246/22, s. 30 (1) (a)

Care conference

s. 30 (1) Every licensee of a long-term care home shall ensure that,

(a) a care conference of the interdisciplinary team providing a resident's care is held within six weeks following the resident's admission and at least annually after that to discuss the plan of care and any other matters of importance to the resident and their substitute decision-maker, if any;

A resident's admission care conference was not held within six weeks of their admission, as required.

Sources: A resident's clinical records and an 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 (1) 2.

Skin and wound care

s. 55 (1) The skin and wound care program must, at a minimum, provide for the

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following:

2. Strategies to promote resident comfort and mobility and promote the prevention of infection, including the monitoring of residents.

According to the long-term care (LTC) home's Skin and Wound Program policy, the home was required to develop an individualized care plan for each resident exhibiting altered skin integrity outlining interprofessional interventions and management to reduce or relieve pain, promote healing, and prevent infection.

An assessment of a resident noted impaired skin integrity. Staff confirmed that an individualized care plan was not completed for the resident related to the altered skin integrity.

Sources: A resident's clinical records, home's Skin and Wound program policy and interviews with staff



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

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