

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

<b>Report Issue Date:</b> January 28, 2026
<b>Inspection Number:</b> 2026-1404-0001
<b>Inspection Type:</b> Complaint Critical Incident
<b>Licensee:</b> Yee Hong Centre for Geriatric Care
<b>Long Term Care Home and City:</b> Yee Hong Centre - Mississauga, Mississauga

## INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): January 16, 19 - 23, 27 and 28, 2026.

The inspection occurred offsite on the following date(s): January 26, 2026.

The following intake(s) were inspected:

-Intake: #00163346 - Critical Incident (CI) #2920-000016-25 - Related to infection prevention and control;

-Intake: #00165701 - Complaint related to admission, absences and discharge.

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

Infection Prevention and Control  
Admission, Absences and Discharge

## INSPECTION RESULTS

### WRITTEN NOTIFICATION: Licensee consideration and approval

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

#### Non-compliance with: FLTCA, 2021, s. 51 (7) (b)

Authorization for admission to a home

s. 51 (7) The appropriate placement co-ordinator shall give the licensee of each selected home copies of the assessments and information that were required to have

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been taken into account, under subsection 50 (6), and the licensee shall review the assessments and information and shall approve the applicant's admission to the home unless,

(b) the staff of the home lack the nursing expertise necessary to meet the applicant's care requirements; or

An applicant was not approved for admission to the home, despite the requirement that applicants be approved unless the home lacks the nursing expertise required to meet the applicant's care requirements. The Director of Resident Care (DRC) indicated that the application for admission was refused on a certain date due to their specific care considerations. The DRC acknowledged that a lack of nursing expertise necessary to meet the applicant's care requirements was not a valid reason for refusing the applicant's admission.

**Sources:** Applicant's refusal letter and interview with the DRC.

### **WRITTEN NOTIFICATION: Written notice if licensee withholds approval**

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

**Non-compliance with: FLTCA, 2021, s. 51 (9) (d)**

Authorization for admission to a home

s. 51 (9) If the licensee withholds approval for admission, the licensee shall give to persons described in subsection (10) a written notice setting out,

(d) contact information for the Director.

The refusal letter with a specified date, regarding an applicant's refusal of admission did not include the contact information for the Director.

**Sources:** Applicant's refusal letters and interview with the DRC.

### **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 (4) (f)**

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Infection prevention and control program

s. 102 (4) The licensee shall ensure,

(f) that a written record is kept relating to each evaluation under clause (e) that includes the date of the evaluation, the names of the persons who participated in the evaluation, a summary of the changes made and the date that those changes were implemented; and

The annual Infection Prevention and Control (IPAC) evaluation completed for the year 2025 did not include the date that changes were implemented.

**Sources:** Review of the home's Annual IPAC Program Review and Evaluation for 2025, and interview with IPAC Manager.

### **WRITTEN NOTIFICATION: Infection prevention and control program**

NC #004 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

**Non-compliance with: O. Reg. 246/22, s. 102 (10)**

Infection prevention and control program

s. 102 (10) The licensee shall ensure that the information gathered under subsection (9) is analyzed daily to detect the presence of infection and reviewed at least once a month to detect trends, for the purpose of reducing the incidence of infection and outbreaks. O. Reg. 246/22, s. 102 (10).

The home did not analyze collected data regarding the presence of infectious symptoms in residents on a monthly basis in order to detect trends and support the reduction of infection and outbreaks.

**Sources:** Interview with the IPAC Manager and the home's Quarterly IPAC Reports.