

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 18, 2025

Inspection Number: 2025-1555-0005

Inspection Type:

Complaint

Licensee: The Regional Municipality of York

Long Term Care Home and City: York Region Newmarket Health Centre,
Newmarket

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): July 11, 15-18, 2025

The following intake(s) were inspected:

- An intake related to responsive behavior and reporting of an incident

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

Infection Prevention and Control
Prevention of Abuse and Neglect
Responsive Behaviours
Reporting and Complaints

INSPECTION RESULTS

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**WRITTEN NOTIFICATION: Additional Requirements, s. 26 of the
Act**

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

Non-compliance with: O. Reg. 246/22, s. 109 (1)

Additional requirements, s. 26 of the Act

s. 109 (1) A complaint that a licensee is required to immediately forward to the Director under clause 26 (1) (c) of the Act is a complaint that alleges harm or risk of harm, including, but not limited to, physical harm, to one or more residents.

The licensee has failed to immediately forward to the Director under clause 26 (1) (c) of the Act a complaint that alleges harm or risk of harm involving two residents.

The Long-Term Care Home's (LTCH) 2025 complaints records indicated the home received two verbal complaints related to a resident. On a specified date, a verbal complaint was lodged related to a potential resident's safety issue for falls for two residents in their room involving a resident's use of a specified product. On a specified date, a verbal complaint was lodged by a resident of being uncomfortable with another resident when in their presence. The complaint records also indicated that the Ministry of Long-Term Care was not notified. The Assistant Administrator (AA) and Social Worker (SW) confirmed there was a risk of harm to the residents at the time of the complaints.

Source: LTCH's Complaint's 2025 Binder, Complaints 2025 Tracker Log, LTCH's Complaint Policy and Procedures, residents clinical records, LTCH's investigation notes, interviews with residents, SW and AA.



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

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