

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 13, 2026
Inspection Number: 2026-1409-0002
Inspection Type: Complaint Critical Incident
Licensee: Extendicare (Canada) Inc.
Long Term Care Home and City: Extendicare Port Hope, Port Hope

INSPECTION SUMMARY

The inspection occurred onsite on the following dates: March 10-13, 2026

The following intakes were inspected:

- An intake related to a complaint of resident's care and allegation of neglect.
- An intake related to allegation of neglect.

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

- Contenance Care
- Food, Nutrition and Hydration
- Prevention of Abuse and Neglect

INSPECTION RESULTS

WRITTEN NOTIFICATION: Contenance care and bowel management

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

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

Contenance care and bowel management

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

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(a) each resident who is incontinent receives an assessment that includes identification of causal factors, patterns, type of incontinence and potential to restore function with specific interventions, and that where the condition or circumstances of the resident require, an assessment is conducted using a clinically appropriate assessment instrument that is specifically designed for assessment of incontinence;

A continence assessment was not completed for a resident when there was a change in their level of continence.

Sources: Clinical records, policy, interviews with staffs and Director of Care (DOC).

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;

The resident had an individualized plan of care requiring continence care. However, the plan was not implemented, as confirmed by the video camera footage and clinical records. The DOC acknowledged the same.

Sources: Clinical records, home's video camera footage, interview with DOC.

WRITTEN NOTIFICATION: Menu planning

NC #003 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 77 (7)

Menu planning

s. 77 (7) The licensee shall ensure that meals and snacks are served at times agreed upon by the Residents' Council and the Administrator or the Administrator's designate. O. Reg. 246/22, s. 390 (1).

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The resident's supper was not served within the agreed timeframe. The Nutrition Manager confirmed the expected supper time, and the DOC indicated that an internal investigation verified the meal was served late.

Sources: Home's internal investigation, home's video camera footage, interview with DOC and Nutrition Manager.



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

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