

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

Central West District
609 Kumpf Drive, Suite 105
Waterloo, ON, N2V 1K8
Telephone: (888) 432-7901

Public Report

Report Issue Date: December 12, 2025
Inspection Number: 2025-1003-0005
Inspection Type: Complaint
Licensee: King Nursing Home Limited
Long Term Care Home and City: King Nursing Home, Bolton

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): December 9, 10, 11, 2025

The following was inspected:

- Intake #00162758 regarding a complaint with respect to the maintenance services program.

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

Housekeeping, Laundry and Maintenance Services

INSPECTION RESULTS

Non-Compliance Remedied

Non-compliance was found during this inspection and was **remedied** by the licensee prior to the conclusion of the inspection. The inspector was satisfied that the non-compliance met the intent of section 154 (2) and requires no further action.

NC #001 remedied pursuant to FLTCA, 2021, s. 154 (2)

Non-compliance with: O. Reg. 246/22, s. 12 (2)

Doors in a home

s. 12 (2) The licensee shall ensure that there is a written policy that deals with when doors leading to secure outside areas must be unlocked or locked to permit or restrict

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

Central West District
609 Kumpf Drive, Suite 105
Waterloo, ON, N2V 1K8
Telephone: (888) 432-7901

unsupervised access to those areas by residents.

In accordance with O. Reg 246/22, s. 11 (1) (b), the licensee is required to ensure that written policies developed to deal with when doors leading to secure outside areas must be locked or unlocked to permit or restrict unsupervised access to those areas by residents was complied with. Specifically, the home's door security policy included that staff were to lock doors to outside areas upon completion of resident outdoor activities. This did not occur on December 9, 2025, as the patio door was left unlocked and the outdoor temperature was -5.5C.

The patio door was locked as soon as it was identified by the inspector on December 9, 2025.

Sources: Interview with the Administrator, observations on December 9, 2025 and review of Door Safety and Security Policy (06/2025).

Date Remedy Implemented: December 9, 2025

WRITTEN NOTIFICATION: Maintenance services

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

Non-compliance with: O. Reg. 246/22, s. 96 (1) (b)

Maintenance services

s. 96 (1) As part of the organized program of maintenance services under clause 19 (1) (c) of the Act, every licensee of a long-term care home shall ensure that,
(b) there are schedules and procedures in place for routine, preventive and remedial maintenance.

Procedures and schedules were not in place for the home's preventive maintenance program, specifically for tub/shower rooms, and utility rooms.

Observations included surfaces that were not in a good state of repair such as cabinetry in soiled utility rooms and shower rooms.

Sources: Observations, interview with the Administrator and Environmental Services Manager and review of maintenance related software application, forms, policies and procedures.

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

Central West District
609 Kumpf Drive, Suite 105
Waterloo, ON, N2V 1K8
Telephone: (888) 432-7901

WRITTEN NOTIFICATION: Maintenance services

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

Non-compliance with: O. Reg. 246/22, s. 96 (1) (b)

Maintenance services

s. 96 (1) As part of the organized program of maintenance services under clause 19 (1) (c) of the Act, every licensee of a long-term care home shall ensure that,

(b) there are schedules and procedures in place for routine, preventive and remedial maintenance.

In accordance with O. Reg 246/22, s. 11 (1) (b), the licensee is required to ensure that policies are in place for routine, preventive and remedial maintenance. Specifically, the home's preventive maintenance policy included the requirement to routinely audit the condition of walls, doors, floors, furniture, fixtures and other surfaces in resident rooms every six months. Although some auditing was completed between June and December 2025, the results could not be provided for review.

Observations included surfaces that were not in a good state of repair such as lighting fixtures, (missing light covers and functional bulbs), furniture (not smooth, easy to clean or had tight fitting surfaces), window covers (hems ripped and fabric of insufficient size to cover the full window), sink fixtures (taps spun 360 degrees), windows (missing screens or were warped and not tight fitting), and flooring tiles (cracked or lifting).

Sources: Observations, interview with the Administrator and Environmental Services Manager and review of maintenance related software application, forms, policies and procedures.



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

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

Central West District
609 Kumpf Drive, Suite 105
Waterloo, ON, N2V 1K8
Telephone: (888) 432-7901