

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****Toronto District**

5700 Yonge Street, 5th Floor
Toronto, ON, M2M 4K5
Telephone: (866) 311-8002

Public Report**Report Issue Date:** November 5, 2025**Inspection Number:** 2025-1072-0005**Inspection Type:**

Proactive Compliance Inspection

Licensee: Extendicare (Canada) Inc.**Long Term Care Home and City:** Extendicare Bayview, North York**INSPECTION SUMMARY**

The inspection occurred onsite on the following date(s): October 29-31, 2025 and November 3-5, 2025

The following intake(s) were inspected:

- Intake: #00161184 - Proactive Compliance Inspection

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

Continence Care
Food, Nutrition and Hydration
Infection Prevention and Control

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. 102 (2) (b)

Infection prevention and control program

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s. 102 (2) The licensee shall implement,
(b) any standard or protocol issued by the Director with respect to infection prevention and control. O. Reg. 246/22, s. 102 (2).

The licensee has failed to ensure that the Infection Prevention and Control (IPAC) Standard for Long-Term Care Homes issued by the Director was complied with.

In accordance with Additional Requirement under the IPAC Standard for Long-Term Care Homes, the licensee has failed to ensure that the signage was posted throughout the home that lists the signs and symptoms of infectious diseases for self-monitoring as well as steps that must be taken if an infectious disease is suspected or confirmed in any individual.

Later, the signage was posted throughout the home.

Sources: Observations, IPAC standard for Long-Term Care Homes and interview with the IPAC Manager.

Date Remedy Implemented: October 30, 2025.

WRITTEN NOTIFICATION: Plan of care

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

Non-compliance with: FLTCA, 2021, s. 6 (10) (b)

Plan of care

s. 6 (10) The licensee shall ensure that the resident is reassessed and the plan of care reviewed and revised at least every six months and at any other time when,
(b) the resident's care needs change or care set out in the plan is no longer necessary.

The resident's current plan of care indicated that they required assistance with a specific type of equipment for transfers and personal care; however, this equipment was no longer being used for the resident.

Sources: The resident's clinical records, interviews with the resident, a PSW and a RPN.

WRITTEN NOTIFICATION: Dining and snack service

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

Non-compliance with: O. Reg. 246/22, s. 79 (2) (b)

Dining and snack service

s. 79 (2) The licensee shall ensure that,

(b) no resident who requires assistance with eating or drinking is served a meal until someone is available to provide the assistance required by the resident.

The licensee has failed to ensure that a resident who required assistance with eating or drinking was not served a meal until someone was available to provide the assistance required by the resident.

During a meal observation, food and beverage were left in front of a resident, who required assistance with eating. The food items remained there for a certain amount of time without any staff available to provide the necessary assistance. At that time, the resident was not visible from where the RPN was standing.

Sources: An observation, review of the resident's clinical records, interviews with a PSW, and the Registered Dietitian (RD).

WRITTEN NOTIFICATION: Infection and prevention control program

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

Non-compliance with: O. Reg. 246/22, s. 102 (2) (b)

Infection prevention and control program

s. 102 (2) The licensee shall implement,

(b) any standard or protocol issued by the Director with respect to infection prevention and control. O. Reg. 246/22, s. 102 (2).

The licensee has failed to ensure that any standard or protocol issued by the Director with respect to infection prevention and control was implemented.

Additional Requirement of the IPAC Standard for Long-Term Care Homes required Additional Precautions be followed in the IPAC program. Specifically, around the proper use of Personal Protective Equipment (PPE), including appropriate selection, application, removal, and disposal. A Registered Nurse (RN) and a Nursing Student

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were observed to have provided care to a resident in an isolation room with Enhanced Precautions without donning the required PPE.

Sources: An Observation, IPAC standard for Long-Term Care Homes, interviews with a RN, a Nursing Student and the IPAC Manager.

WRITTEN NOTIFICATION: CMOH and MOH

NC #005 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 272

CMOH and MOH

s. 272. Every licensee of a long-term care home shall ensure that all applicable directives, orders, guidance, advice or recommendations issued by the Chief Medical Officer of Health or a medical officer of health appointed under the Health Protection and Promotion Act are followed in the home.

The licensee has failed to ensure that all applicable directives or recommendations issued by the Chief Medical Officer of Health (CMOH) was followed by the home, in relation to alcohol-based hand rub (ABHR). Specifically, ABHR must not be expired as required by IPAC Measures under Recommendations for Outbreak Prevention and Control in Institutions and Congregate Living Settings, effective April 2024. The wall mounted ABHR in several resident rooms were observed to have an expiration dates.

Sources: An observation, IPAC standard for Long-Term Care Homes and interview with the IPAC Manager.