

**Ministry of Long-Term Care**

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

**Ottawa District**

347 Preston Street, Suite 410  
Ottawa, ON, K1S 3J4  
Telephone: (877) 779-5559

## Public Report

**Report Issue Date:** July 11, 2025

**Inspection Number:** 2025-1319-0003

**Inspection Type:**

Complaint

Critical Incident

**Licensee:** Omni Quality Living (East) Limited Partnership by its general partner,  
Omni Quality Living (East) GP Ltd.

**Long Term Care Home and City:** Forest Hill, Kanata

## INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): July 8, 9, 10, 2025

The following intake(s) were inspected:

- Intake: #00146152 - Critical incident related to a fall that resulted in a transfer to hospital
- Intake: #00149648 - Complaint related to windows
- Intake: #00151542 - Complaint related to communication response system and complaint process

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

Continence Care

Safe and Secure Home

Reporting and Complaints

Falls Prevention and Management

**Ministry of Long-Term Care**

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

**Ottawa District**

347 Preston Street, Suite 410  
Ottawa, ON, K1S 3J4  
Telephone: (877) 779-5559

## INSPECTION RESULTS

### WRITTEN NOTIFICATION: Reporting and Complaints

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

**Non-compliance with: FLTCA, 2021, s. 26 (1) (a)**

Complaints procedure — licensee

s. 26 (1) Every licensee of a long-term care home shall,

(a) ensure that there are written procedures that comply with the regulations for initiating complaints to the licensee and for how the licensee deals with complaints;

The licensee has failed to ensure that their written policy and procedures comply with the regulations for initiating complaints to the licensee and for how the licensee deals with the complaints.

Specifically, the Investigating and Responding to Complaints, licensee's policy # OP-AM-6.1, last reviewed March 11, 2025, it is documented under procedure #2 "to determine the nature of the concern and whether it shall be considered a written complaint or if it maybe resolved as a concern". As per O. Reg, 246/22 s. 108. (1) "Every licensee shall ensure that every written or verbal complaint made to the licensee or a staff member concerning the care of a resident or operation of the home is dealt with as follows".

On a specific day, the home received a verbal complaint from a resident and determined it was a concern and did not follow their verbal complaint policy.

Sources: Complaint Policy, Complaint/Concern report and the interview with the Executive Director.