

Ministry of Long-Term Care

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

Toronto District

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

Public Report

Report Issue Date: July 31, 2025

Inspection Number: 2025-1049-0004

Inspection Type:

Complaint
Follow up

Licensee: Extendicare (Canada) Inc.

Long Term Care Home and City: Extendicare Scarborough, Scarborough

INSPECTION SUMMARY

The inspection occurred on the following date(s): July 24-25, 28-31, 2025

The following intake(s) were inspected:

- Intake: #00150192 – Follow-up to Compliance order #001 from inspection # 2025-1049-0003 – Duty to protect
- Intake: #00152125 – was a complaint related to emergency plans; safe secure home and missing resident

Previously Issued Compliance Order(s)

The following previously issued Compliance Order(s) were found to be in compliance:

Order #001 from Inspection #2025-1049-0003 related to FLTCA, 2021, s. 24 (1)

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

Housekeeping, Laundry and Maintenance Services
Safe and Secure Home
Prevention of Abuse and Neglect

INSPECTION RESULTS

WRITTEN NOTIFICATION: Safe and Secure Home

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

Non-compliance with: FLTCA, 2021, s. 5

Home to be safe, secure environment

s. 5. Every licensee of a long-term care home shall ensure that the home is a safe and secure environment for its residents.

The licensee has failed to ensure that the home was a safe and secure environment for its residents.

Residents had access to a secure outdoor patio area, which had two gates to preclude exit by a resident. One gate was observed to be unlocked and the second gate had a lock but the gate was broken.

Sources: Observations by Inspector, interviews with staff.

WRITTEN NOTIFICATION: Dealing with Complaints

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

Non-compliance with: O. Reg. 246/22, s. 108 (1) 1.

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Dealing with complaints

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:

1. The complaint shall be investigated and resolved where possible, and a response that complies with paragraph 3 provided within 10 business days of the receipt of the complaint, and where the complaint alleges harm or risk of harm including, but not limited to, physical harm, to one or more residents, the investigation shall be commenced immediately.

The licensee has failed to ensure that when a complaint was received verbally that a response was provided to the person who made the complaint within ten business days.

Environmental Service Manager (ESM) and the Administrator received information about a verbal complaint, and they did not respond to the complainant within ten business days.

Sources: Interviews with staff.

WRITTEN NOTIFICATION: Dealing with Complaints

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

Non-compliance with: O. Reg. 246/22, s. 108 (2)

Dealing with complaints

s. 108 (2) The licensee shall ensure that a documented record is kept in the home that includes,

- (a) the nature of each verbal or written complaint;
- (b) the date the complaint was received;
- (c) the type of action taken to resolve the complaint, including the date of the

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action, time frames for actions to be taken and any follow-up action required;
(d) the final resolution, if any;
(e) every date on which any response was provided to the complainant and a description of the response; and
(f) any response made in turn by the complainant.

The licensee has failed to ensure that a documented record was kept in the home related to a complaint concerning the operation of the home. There was no record that included the nature of the verbal complaint, the date it was received, the type of action taken to resolve the complaint, the final resolution, if any, every date of which any response was provided to the complainant and a description of the response, and any response made in turn by the complainant.

Sources: The home's policy titled Complaints and Customer Service, last revised June 2025; Interviews with staff and the complainant.

WRITTEN NOTIFICATION: Reports re Critical Incidents

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

Non-compliance with: O. Reg. 246/22, s. 115 (3) 2. ii.

Reports re critical incidents

s. 115 (3) The licensee shall ensure that the Director is informed of the following incidents in the home no later than one business day after the occurrence of the incident, followed by the report required under subsection (5):

2. An environmental hazard that affects the provision of care or the safety, security or well-being of one or more residents for a period greater than six hours, including,

ii. a breakdown of major equipment or a system in the home,

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The licensee has failed to ensure that a breakdown of major equipment in the home affecting the safety, security or well-being of one or more residents for a period greater than six hours, was reported to the Director. The home's air conditioning (AC) unit was not operational for greater than six hours. The Director was not informed of the breakdown of this system.

Sources: Air temperature reports from the home, interviews with staff.

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

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