



**Inspection Report  
under the *Long-Term  
Care Homes Act, 2007***

**Rapport d'inspection  
prévue le *Loi de 2007  
les foyers de soins de  
longue durée***

**Ministry of Health and Long-Term Care**  
Health System Accountability and Performance Division  
Performance Improvement and Compliance Branch

**Ministère de la Santé et des Soins de  
longue durée**

Division de la responsabilisation et de la performance du  
système de santé  
Direction de l'amélioration de la performance et de la  
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Date(s) of inspection/Date de l'inspection	Inspection No/ d'inspection	Type of Inspection/Genre d'inspection	
August 25, 2010	2010-120-1023-25Aug092109	H-01153 Follow-up to April 14 & 15, 2010	
<b>Licensee/Titulaire</b>			
Brantwood Manor Nursing Homes Limited, c/o Ernst and Young Inc. - 222 Bay Street, TD Centre, P.O. Box 251, Toronto, ON, M5K 1J7			
<b>Long-Term Care Home/Foyer de soins de longue durée</b>			
Brantwood Lifecare, 802 Hagar Ave., Burlington, ON L7S 1X2			
<b>Name of Inspector(s)/Nom de l'inspecteur(s)</b>			
Bernadette Susnik, LTC Homes Inspector – Environmental Health #120			
<b>Inspection Summary/Sommaire d'inspection</b>			

The purpose of this visit was to conduct a follow-up inspection to previously issued non-compliance related to the following:

Criterion O2.1 (maintenance services)  
Criterion O1.19 (hot water temperature monitoring).

During the course of the inspection, the inspector spoke with the Environmental Services Supervisor, maintenance staff, nursing staff and the Director of Care.

During the course of the inspection, the inspector reviewed documents and maintenance logs, took water temperatures and conducted a walk through of the first, second and third floor east wings, which includes dining areas, lounge areas, bathing areas and resident rooms.

The following Inspection Protocols were used during this inspection:

Accommodation Services – Maintenance  
Safe and Secure Home

No findings of Non-Compliance were found during this inspection.

Corrected Non-Compliance is listed in the section titled "Corrected Non-Compliance" on page 2.



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CORRECTED NON-COMPLIANCE Non-respects à Corriger				
REQUIREMENT EXIGENCE	TYPE OF ACTION/ORDER	ACTION/ ORDER #	INSPECTION REPORT #	INSPECTOR ID #
MOHLTC Program Standards Manual or LTCHA 2007, c.8	Unmet Criterion O2.1 or s.15(2)(c)		Log #338-2010	127
MOHLTC Program Standards Manual or O. Reg. 79/10	Unmet Criterion O1.19 or s. 90(1)(h)		Log #338-2010	127

Signature of Licensee or Representative of Licensee Signature du Titulaire du représentant désigné	Signature of Health System Accountability and Performance Division representative/Signature du (de la) représentant(e) de la Division de la responsabilisation et de la performance du système de santé.  <i>B. Susnik</i>
Title: _____ Date: _____	Date of Report: (if different from date(s) of inspection).  <i>Oct. 25/10</i>