



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

**Rapport d'inspection  
prevue 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

Hamilton Service Area Office  
119 King Street West, 11<sup>th</sup> Floor  
Hamilton, ON L8P 4Y7

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

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Division de la responsabilisation et de la performance du  
système de santé  
Direction de l'amélioration de la performance et de la  
conformité

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|---|---|---|
| <b>Date of inspection/Date de l'inspection</b><br>08 March 2011 | <b>Inspection No/ d'inspection</b><br>2011_127_2472_07Mar164429 | <b>Type of Inspection/Genre d'inspection</b><br>Complaint # H-00436 |
|---|---|---|

**Licensee/Titulaire**  
Vigour Limited Partnership on behalf of Vigour General Partner Inc., 302 Town Centre Blvd, Suite #200, Markham ON L3R 0E8

**Long-Term Care Home/Foyer de soins de longue durée**  
Leisureworld Caregiving Centre – Mississauga, 2250 Hurontario Street, Mississauga ON L5B 1M8

**Name of Inspector(s)/Nom de l'inspecteur(s)**  
Richard Hayden, Long Term Care Homes Inspector – Environmental Health #127

**Inspection Summary / Sommaire d'inspection**

The purpose of this visit was to conduct a complaint inspection regarding laundry odours.

During the course of the inspection, the inspector spoke with the administrator and environmental services manager.

During the course of the inspection, the inspector toured the entire home and inspected the laundry area.

The following Inspection Protocols were used during this inspection:

- Accommodation Services - Housekeeping

No findings of non-compliance were found during this inspection.

|   |  |
|---|--|
| Signature of Licensee or Representative of Licensee<br>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. |
| Title: _____ Date: _____  | Date of Report (if different from date(s) of inspection).<br><i>10 March 2011</i>  |