



**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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		<input type="checkbox"/> Licensee Copy/Copie du Titulaire <input checked="" type="checkbox"/> Public Copy/Copie Public
Date(s) of inspection/Date de l'inspection	Inspection No/ d'inspection	Type of Inspection/Genre d'inspection
August 10, 11, 12, 13, 2010	2010_111_2503_11Aug115005	Critical Incident (log # 0-000893)
Licensee/Titulaire Craiglee Nursing Home Limited c/o Deloitte & Touche Inc. 181 Bay Street Brookfield Place, Suite 1400 Toronto, ON M5J 2V1		
Long-Term Care Home/Foyer de soins de longue durée Craiglee Nursing Home, 102 Craiglee Drive Scarborough, ON M1N 2M7		
Name of Inspector(s)/Nom de l'inspecteur(s) Lynda Brown (ID # 111)		
Inspection Summary/Sommaire d'inspection		
The purpose of this inspection was to conduct a critical incident inspection related to unexpected death of a resident.		
During the course of the inspection, the inspector spoke with the Director of Care.		
During the course of the inspection, the inspector reviewed the deceased resident's health record.		
The following Inspection Protocols were used in part or in whole during this inspection: Hospitalization and Death Continence Care and Bowel Management		
<input checked="" type="checkbox"/> There are no findings of Non-Compliance as a result of this inspection. <input type="checkbox"/> Findings of Non-Compliance were found during this inspection.		



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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.
Title:	Date of Report: (if different from date(s) of inspection). <i>S. Brown</i> <i>Sept. 30/10</i>