



**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

London Service Area Office
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London ON N6B 1R8

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291, rue King, 4^{ième} étage
London ON N6B 1R8

**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
conformité

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Date(s) of Inspection/Date de l'inspection November 3, 2010	Inspection No/ d'inspection 2010_121_9549_02Nov183432	Type of Inspection/Genre d'inspection Complaint L-01460
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Licensee/Titulaire

Corporation of the County of Grey, 595 9th Ave. E., Owen Sound, ON N4K 3E3

Long-Term Care Home/Foyer de soins de longue durée

Lee Manor, 876 Sixth St. E., Owen Sound ON, N4K 5W5

Name of Inspector(s)/Nom de l'inspecteur(s)

Elizabeth Elvidge (#121)

Inspection Summary/Sommaire d'inspection

The purpose of this inspection was to conduct a complaint inspection concerning use of motorized wheelchairs.

During the course of the inspection, the inspector spoke with: The Director of Care, four residents, and four PSWs.

During the course of the inspection, the inspector: Viewed the motorized wheelchair and rented wheelchair and reviewed documentation records.

☒ There are no findings of Non-Compliance as a result of 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. <i>Elizabeth Eludje</i>
Title:	Date:	Date of Report: (if different from date(s) of inspection). November 4, 2010