



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
conformité

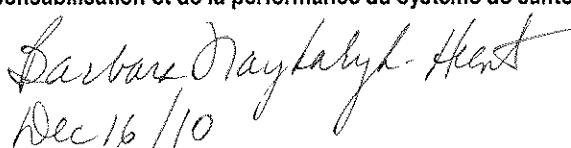
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			<input type="checkbox"/> Licensee Copy/Copie du Titulaire <input checked="" type="checkbox"/> Public Copy/Copie Public
Date(s) of inspection/Date de l'inspection	Inspection No/ d'inspection	Type of Inspection/Genre d'inspection	
December 9, 2010	2010_146_2775_09Dec101204	Complaint H-02655, 02307	
Licensee/Titulaire Shalom Village Nursing Home, 60 Macklin Street North, Hamilton, ON., L8S 3S1			
Long-Term Care Home/Foyer de soins de longue durée Shalom Village Nursing Home, 60 Macklin Street North, Hamilton, ON., L8S 3S1			
Name of Inspector(s)/Nom de l'inspecteur(s) Barbara Naykalyk-Hunt, #146			
Inspection Summary/Sommaire d'inspection			
The purpose of this inspection was to conduct a complaint inspection.			
During the course of the inspection, the inspector spoke with: the Administrator, the Director of Care (DOC), registered staff and a personal support worker (PSW) and a resident.			
During the course of the inspection, the inspector: reviewed the health files of 2 identified residents and interviewed 1 resident.			
The following Inspection Protocols were used during this inspection: Responsive Behaviours			
<input checked="" type="checkbox"/> There are no findings of Non-Compliance as a result of this inspection.			

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.  Dec 16 /10
Title:	Date:
Date of Report: (If different from date(s) of inspection).	