



<p>Ministry of Health and Long-Term Care</p> <p>Inspection Report under the Long-Term Care Homes Act, 2007</p>	<p>Ministère de la Santé et des Soins de longue durée</p> <p>Rapport d'inspection prévue le Loi de 2007 les foyers de soins de longue</p>
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**Health System Accountability and Performance
Division**
Performance Improvement and Compliance Branch
**Division de la responsabilisation et de la
performance du système de santé**
**Direction de l'amélioration de la performance et de la
conformité**

London Service Area Office
291 King Street, 4th Floor
LONDON, ON, N6B-1R8
Telephone: (519) 675-7680
Facsimile: (519) 675-7685

Bureau régional de services de London
291, rue King, 4th étage
LONDON, ON, N6B-1R8
Téléphone: (519) 675-7680
Télécopieur: (519) 675-7685

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Date(s) of inspection/Date(s) de l'inspection	Inspection No/ No de l'inspection	Type of Inspection/Genre d'inspection
Jan 31, Feb 27, 2012	2012_023155_0007	Critical Incident

Licensee/Titulaire de permis

**SOUTHAMPTON CARE CENTRE INC
689 YONGE STREET, MIDLAND, ON, L4R-2E1**

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

**SOUTHAMPTON CARE CENTRE
140 Grey Street, P.O. Box 790, Southampton, ON, N0H-2L0**

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

SHARON PERRY (155)

Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct a Critical Incident inspection.

During the course of the inspection, the inspector(s) spoke with Administrator, Director of Care, Life Enrichment Coordinator, (1) Registered Nurse, (2) Registered Practical Nurses, (2) Personal Support Workers, (1) Housekeeper, and Residents.

During the course of the inspection, the inspector(s) toured the resident living areas, reviewed infection control outbreak meeting minutes, reviewed infection prevention and control surveillance records, and reviewed clinical records for residents numbered 000000001, 000000002, 000000003, and 000000004.

The log number for this inspection is L-000110-12.

The following Inspection Protocols were used during this inspection:

Infection Prevention and Control

There are no findings of Non-Compliance as a result of this inspection.

NON-COMPLIANCE / NON-RESPECT DES EXIGENCES



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foyers de soins de longue**

Legend

WN – Written Notification
VPC – Voluntary Plan of Correction
DR – Director Referral
CO – Compliance Order
WAO – Work and Activity Order

Non-compliance with requirements under the Long-Term Care Homes Act, 2007 (LTCHA) was found. (A requirement under the LTCHA includes the requirements contained in the items listed in the definition of "requirement under this Act" in subsection 2(1) of the LTCHA.)

The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.

Legendé

WN – Avis écrit
VPC – Plan de redressement volontaire
DR – Aiguillage au directeur
CO – Ordre de conformité
WAO – Ordres : travaux et activités

Le non-respect des exigences de la Loi de 2007 sur les foyers de soins de longue durée (LFSLD) a été constaté. (Une exigence de la loi comprend les exigences qui font partie des éléments énumérés dans la définition de « exigence prévue par la présente loi », au paragraphe 2(1) de la LFSLD.)

Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.

Issued on this 27th day of February, 2012

Signature of Inspector(s)/Signature de l'inspecteur ou des inspecteurs

A handwritten signature in black ink, appearing to read "Sharon Perry".