



**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

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**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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<b>Date(s) of inspection/Date de l'inspection</b> January 11, 2011	<b>Inspection No/ d'inspection</b> 2011_103_2470_10Jan100716	<b>Type of Inspection/Genre d'inspection</b> Follow up Log # O-002877
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**Licensee/Titulaire**  
ManorCare Partners, 6257 Main St., Stouffville, ON L4A 4J3 Fax # 905-640-4772

**Long-Term Care Home/Foyer de soins de longue durée**  
Stirling Manor, 218 Edward St., P.O. Box 220, Stirling, Ontario K0K 3E0 Fax #

**Name of Inspector(s)/Nom de l'inspecteur(s)**  
Darlene Murphy #103

**Inspection Summary/Sommaire d'inspection**

The purpose of this inspection was to conduct a follow up inspection related to three Compliance Orders served on October 7, 2010. While on site, the inspector also reviewed M1.6 (LTC Programs Manual) which was found to be an outstanding unmet from March 2010.

During the course of the inspection, the inspector spoke with: 1 Registered Nurse, 2 Registered Practical Nurses, 4 residents, the office manager and the Administrator.

During the course of the inspection, the inspector reviewed 3 resident health care records, attendance and materials related to wound and skin care education completed by registered staff on October 19, 2010 and 3 resident office files.

The following Inspection Protocols were used during this inspection:

Skin and Wound Care Inspection Protocol and  
Admission Process Inspection Protocol

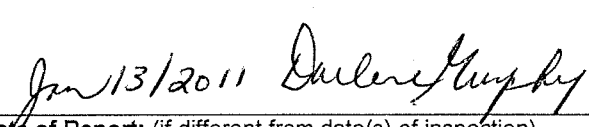
There are no findings of Non-Compliance as a result of this inspection.

Findings of Non-Compliance were found during this inspection. The following action was taken:

Corrected Non-Compliance is listed in the section titled Corrected Non-Compliance.



CORRECTED NON-COMPLIANCE Non-respects à Corrigé				
REQUIREMENT EXIGENCE	TYPE OF ACTION/ORDER	ACTION/ ORDER #	INSPECTION REPORT #	INSPECTOR ID #
LTCHA, 2007, S.O. 2007 c. 8, s.6(10)(b)	Compliance Order	#1	2010_103_2470_12Aug112230	103
LTCHA, 2007, S.O. 2007 c. 8, s.6(4)(a)	Compliance Order	#2	2010_103_2470_12Aug112230	103
O. Reg. 79/10, s.50(2)(b)(iv)	Compliance Order	#3	2010_103_2470_12Aug112230	103
M1.6, LTC Homes Program Manual now found in Ont. Regs 79/10 s.253(2)	Non- Compliance		March 31, 2010	103

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.	
		 Jan 13/2011 Doreen Murphy	
Title:	Date:	Date of Report: (if different from date(s) of inspection).	