



**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

Toronto Service Area Office
55 St. Clair Avenue West, 8th Floor
Toronto ON M4V 2Y7

Telephone: 416-325-9297
1-866-311-8002

Fax: 416-327-4486

Bureau régional de services de Toronto
55, avenue St. Clair Ouest, 8ièm étage
Toronto, ON M4V 2Y7

Téléphone: 416-325-9297
1-866-311-8002

Télécopieur: 416-327-4486

<input type="checkbox"/> Licensee Copy/Copie du Titulaire <input checked="" type="checkbox"/> Public Copy/Copie Public		
Date of inspection/Date de l'inspection	Inspection No/ d'inspection	Type of Inspection/Genre d'inspection
November 15, 2010	2011_125_2914_04Apr100156	Complaint #T1555
Licensee/Titulaire Victoria Village Inc. 78 Ross Street, Barrie, Ontario L4N 1G3		
Long-Term Care Home/Foyer de soins de longue durée Victoria Village Manor. 78 Ross Street, Barrie, Ontario L4N 1G3		
Name of Inspector/Nom de l'inspecteur Marsha Hardwick #125		
Inspection Summary/Sommaire d'inspection		
The purpose of this inspection was to conduct a complaint inspection regarding lost clothing.		
During the course of the inspection, the inspector spoke with:		
<ul style="list-style-type: none">• Assistant Director of Care• Director of Dietary and Environmental Services• Inspected the Gathering Room• Reviewed lost laundry policy• Reviewed Lost Laundry form• Reviewed Laundry Labeling form		
During the course of the inspection, the inspector interviewed:		
<ul style="list-style-type: none">• Assistant Director of Care• Director of Dietary and Environmental Services		
The following Inspection Protocols were used in part or in whole during this inspection:		
<ul style="list-style-type: none">• Accommodation Services Laundry inspection.		
<input checked="" type="checkbox"/> 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.
Title:	Date: <i>April 11, 2007</i> <i>Masha Harlevic</i> Date of Report: (if different from date(s) of inspection).