



**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

Ottawa Service Area Office
347 Preston St., 4th Floor
Ottawa ON K1S 3J4

Bureau régional de services d'Ottawa
347, rue Preston, 4^{ième} étage
Ottawa ON K1S 3J4

**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

Telephone: 613-569-5602
Facsimile: 613-569-9670

Téléphone: 613-569-5602
Télécopieur: 613-569-9670

Licensee Copy/Copie du Titulaire Public Copy/Copie Public

Date(s) of inspection/Date de l'inspection August 23 2010	Inspection No/ d'inspection 2010_166_9522_13Aug105219	Type of Inspection/Genre d'inspection Critical Incident log #O-000420
Licensee/Titulaire Oakwood Retirement Communities Inc. , 519-571-1873 Fax 519-571-0947 325 Max Becker Drive, Suite 210 Kitchener ON N2E 4H5		
Long-Term Care Home/Foyer de soins de longue durée The Village of Taunton Mills 905-666-3156 Fax 905-666-9601 3800 Brock Street North Whitby ON L1R 3A5		
Name of Inspector(s)/Nom de l'inspecteur(s) Caroline Tompkins #166		

Inspection Summary/Sommaire d'inspection

The purpose of this inspection was to conduct an inspection of critical incidents related to falls causing injuries.

During the course of the inspection, the inspector spoke with the Administrator, the Director of Care, the Clinical Coordinator, a Registered Nurse, three Personal Support Workers and the Activity Aide on the floor where the resident resides.

During the course of the inspection, the inspector observed the resident mobilizing around the unit quickly and independently, reviewed the resident's plan of care, the resident's progress notes including those that refer to the critical incident. The resident was not able to be interviewed at the time.

The following Inspection Protocols were used during this inspection:
Falls Prevention Inspection Protocol and Responsive Behaviours Inspection Protocol.

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.
Title:	Date:
	Date of Report: (if different from date(s) of inspection). October 7 2010