



**Inspection Report  
under the *Long-Term  
Care Homes Act, 2007***

**Rapport d'inspection  
prevue 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

Hamilton Service Area Office  
119 King Street West, 11<sup>th</sup> Floor  
Hamilton, ON L8P 4Y7

Telephone: 905-546-8294  
Facsimile: 905-546-8255

Bureau régional de services de Hamilton  
119, rue King Quest, 11<sup>th</sup> étage  
Hamilton, ON L8P 4Y7

Téléphone: 905-546-8294  
Télécopieur: 905-546-8255

<input type="checkbox"/> Licensee Copy/Copie du Titulaire <input checked="" type="checkbox"/> Public Copy/Copie Public		
Date of inspection/Date de l'Inspection  02 December 2010	Inspection No/ d'inspection  2010_127_9623_02Dec093044	Type of Inspection/Genre d'inspection  Complaint (H-02774)
<b>Licensee/Titulaire</b>  The Regional Municipality of Halton, 1151 Bronte Road, Oakville ON L6M 3L1		
<b>Long-Term Care Home/Foyer de soins de longue durée</b>  Creek Way Village, 5200 Corporate Drive, Burlington ON L7L 7G7		
<b>Name of Inspector(s)/Nom de l'Inspecteur(s)</b>  Richard Hayden, Long Term Care Homes Inspector – Environmental Health #127		
<b>Inspection Summary / Sommaire d'inspection</b>		
The purpose of this inspection was to conduct a complaint inspection.		
During the course of the inspection, the inspector spoke with the administrator, acting director of care, food services manager, registered staff and housekeeping staff.		
During the course of the inspection, the inspector undertook a visual inspection of all resident home areas and reviewed e-mails and resident-specific documentation.		
The following Inspection Protocols were used during this inspection:		
<ul style="list-style-type: none"><li>• Accommodation Services – Maintenance</li><li>• Safe and Secure Home</li></ul>		
<input checked="" type="checkbox"/> Findings of Non-Compliance were found during this inspection. The following action was taken:		
1 WN		



Ministry of Health and  
Long-Term Care

Ministère de la Santé et  
des Soins de longue durée

Inspection Report  
under the *Long-  
Term Care Homes  
Act, 2007*

Rapport d'inspection  
prevue le *Loi de 2007  
les foyers de soins  
de longue durée*

**NON-COMPLIANCE / Non-respectés**

**Definitions/Définitions**

WN – Written Notifications/Avis écrit

VPC – Voluntary Plan of Correction/Plan de redressement volontaire

DR – Director Referral/Référance envoyée

CO – Compliance Order/Ordre de conformité

WAO – Work and Activity Order/Ordre: travaux et activités

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

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.)

Le suivant constitue un avis écrit de l'exigence prévue par le paragraphe 1 de la section 152 de les foyers de soins de longue durée.

Non-respect avec les exigences sur le *Loi de 2007 les foyers de soins de longue durée* à trouvé. (Une exigence dans le loi comprend les exigences contenues dans les points énumérés dans la définition de "exigence prévue par la présente loi" au paragraphe 2(1) de la loi.

**WN #1:** The Licensee has failed to comply with O. Reg. 79/10, s. 9.1.(i) and (ii):

9. Every licensee of a long-term care home shall ensure that the following rules are complied with:

1. All doors leading to stairways and the outside of the home must be,

(i) kept closed and locked,

(ii) equipped with a door access control system that is kept on at all times,

**Findings:**

02 December 2010

The door leading from the dining room/common room in Millcroft resident home area to the outside was unlocked and not alarmed. The door unlocks automatically at a certain time of day and re-locks later in the day. This was to allow unobstructed resident access to the outdoor area.

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).