



**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

London Service Area Office  
291 King Street, 4th Floor  
London ON N6B 1R8

Bureau régional de services de London  
291, rue King, 4<sup>ème</sup> étage  
London ON N6B 1R8

**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: 519-675-7680  
Facsimile: 519-675-7685

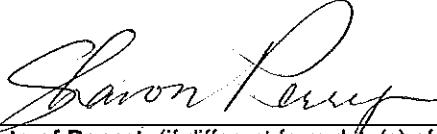
Téléphone: 519-675-7680  
Télécopieur: 519-675-7685

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<b>Date(s) of inspection/Date de l'inspection</b> November 17, 2010	<b>Inspection No/ d'inspection</b> 2010-155-2606-17Nov122402	<b>Type of Inspection/Genre d'inspection</b> L-01731 – follow up
<b>Licensee/Titulaire</b> peopleCare Inc., 28 William Street North, P.O. Box 460, Tavistock, ON N0B 2R0		
<b>Long-Term Care Home/Foyer de soins de longue durée</b> Hilltop Manor Cambridge, 42 Elliott Street, Cambridge, ON N1R 2J2		
<b>Name of Inspector(s)/Nom de l'inspecteur(s)</b> Sharon Perry #155		
<b>Inspection Summary/Sommaire d'inspection</b>		
<p>The purpose of this inspection was to conduct a follow up inspection regarding the unmet criteria B3.39 (resident bathed at least twice per week by method of her or her choice) issued May 18, 2010 and A1.11 (every resident has the right to be treated with courtesy and respect and in a way that fully recognizes the resident's dignity and individuality and to free from mental and physical abuse) issued March 22, 2010.</p> <p>During the course of the inspection, the inspector spoke with: Executive Director, Director of Care, Registered Nurse, Registered Practical Nurses, Personal Support Workers, and Residents.</p> <p>During the course of the inspection, the inspector: did a walkthrough of the home; reviewed staff education provided regarding resident rights and abuse; observed staff interactions with residents; reviewed the clinical records of three residents; and reviewed bath lists.</p> <p>The following Inspection Protocols were used during this inspection: Personal Support Services</p> <p><input checked="" type="checkbox"/> There are no findings of Non-Compliance as a result of this inspection.</p> <p>Corrected Non-Compliance is listed in the section titled Corrected Non-Compliance.</p>		



CORRECTED NON-COMPLIANCE Non-respects à Corrigé				
REQUIREMENT EXIGENCE	TYPE OF ACTION/ORDER	ACTION/ ORDER #	INSPECTION REPORT #	INSPECTOR ID #
B3.39, LTC Homes Program Manual, now found in O. Reg. 79/10, s.33. (1) and (2)	Unmet criteria	N/A	N/A	N/A
A1.11, LTC Homes Program Manual, now found in LTCHA, 2007, S.O. 2007, c.8, s.3, (1) 1. and 2.	Unmet criteria	N/A	N/A	N/A

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).	
		December 7, 2010	