



**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
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Date(s) of inspection/Date de l'inspection	Inspection No/ d'inspection	Type of Inspection/Genre d'inspection
March 25, 2011	2011_148_2645_22Mar131222	Complaint Log- O-000641
Licensee/Titulaire		
Hilltop Manor Nursing Home, 82 Colonel By Crescent Smith Falls Ontario, K7A 5B6 Fax: 613-269-3534		
Long-Term Care Home/Foyer de soins de longue durée		
Hilltop Manor Nursing Home, 1005 St Lawrence Street P.O Box 430 Merrickville Ontario, K0G 1N0 Fax: 613-269-3534		
Name of Inspector/Nom de l'inspecteur		
Amanda Nixon (ID #148)		
Inspection Summary/Sommaire d'inspection		
The purpose of this inspection was to conduct a complaint inspection related to resident areas.		
During the course of the inspection, the inspector spoke with the Nutritional Manager, day Registered Nurse, Activity Members and Personal Support Workers.		
During the course of the inspection, the inspector reviewed the activity schedules and observed resident areas.		
The following Inspection Protocols were used during this inspection:		
<ul style="list-style-type: none"> • Safe and Secure 		
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. <i>Amanda Nixon</i>
Title:	Date of Report: (if different from date(s) of inspection). <i>April 7, 2011</i>