



**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

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

Bureau régional de services de Hamilton
119, rue King Ouest, 11^{ème} étage
Hamilton ON L8P 4Y7

**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: 905-546-8294
Facsimile: 905-546-8255

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

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Date(s) of inspection/Date de l'inspection March 1, 2011	Inspection No/ d'inspection 2011_146_2931_01Mar102701	Type of Inspection/Genre d'inspection Complaint H-00132
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Licensee/Titulaire Idlewyld Manor, 449 Sanatorium Rd, Hamilton, ON., L9C 2A7
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Long-Term Care Home/Foyer de soins de longue durée Idlewyld Manor, 449 Sanatorium Rd, Hamilton, ON., L9C 2A7
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Name of Inspector(s)/Nom de l'inspecteur(s) Barbara Naykalyk-Hunt, #146

Inspection Summary/Sommaire d'Inspection

The purpose of this inspection was to conduct a complaint inspection.

During the course of the inspection, the inspector spoke with: the Administrator and the Director of Care.

During the course of the inspection, the inspector: reviewed the management's notes regarding the incident.

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>Barbara Naykalyk-Hunt</i> March 8/2011
Title:	Date:
Date of Report: (if different from date(s) of inspection).	