



**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

**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

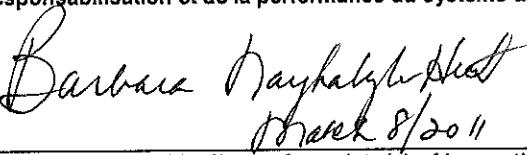
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			<input type="checkbox"/> Licensee Copy/Copie du Titulaire <input checked="" type="checkbox"/> Public Copy/Copie Public
Date(s) of inspection/Date de l'inspection March 1, 2011	Inspection No/ d'inspection 2011_146_2931_01Mar102701	Type of Inspection/Genre d'inspection Complaint H-00132	
Licensee/Titulaire Idlewyld Manor, 449 Sanatorium Rd, Hamilton, ON., L9C 2A7			
Long-Term Care Home/Foyer de soins de longue durée Idlewyld Manor, 449 Sanatorium Rd, Hamilton, ON., L9C 2A7			
Name of Inspector(s)/Nom de l'inspecteur(s) Barbara Naykalyk-Hunt, #146			
<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 and the Director of Care.			
During the course of the inspection, the inspector: reviewed the management's notes regarding the incident.			
<input checked="" type="checkbox"/> There are no findings of Non-Compliance as a result of this inspection.			

Signature of Licensee or Representative of Licensee Signature du Titulaire ou 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.   March 8/2011
Title:	Date:	Date of Report: (if different from date(s) of inspection).