



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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Inspection Report under the LTC Homes Act, 2007		Rapport d'inspection prévue de la Loi de 2007 les foyers de soins de longue durée	
<input checked="" type="checkbox"/> Public Copy	<input type="checkbox"/> Licensee Copy	<input type="checkbox"/> Copie du Titulaire	<input type="checkbox"/> Copie de la Publique
Date(s) of inspection/Date de l'inspection	Inspection No/ d'inspection	Type of Inspection/Genre d'inspection	
August 11, 2010	2010-145-2643-11Aug084655	Complaint L-00099	
Licensee/Titulaire			
Meadow Park (London) Inc., 689 Yonge Street, Midland, Ontario L4R 2E1			
Long-Term Care Home/Foyer de soins de longue durée			
Meadow Park (London) Inc., 1210 Southdale Road E., London, Ontario N6E 1B4			
Name of Inspector(s)/Nom de l'inspecteur(s)			
Karin Mussart (ID#145)			
Inspection Summary/Sommaire d'inspection			

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 constituer un avis d'écrit de l'exigences prévue le paragraph 1 de 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.

The purpose of this inspection was to conduct a Complaint inspection

The inspection was conducted by the inspector identified above.

The inspection occurred on August 11, 2010 with the inspector being present on that day

During the course of the inspection, the inspector spoke with:
Dan Culbert, Administrator; Environmental Services Manager

The following Inspection Protocols were used in part or in whole during this inspection:

Accommodation Services – Laundry

- Maintenance
- Housekeeping

Corrected Non-Compliance is listed in the section titled Corrected Non-Compliance.

1 Finding of Non-Compliance were found during this inspection. The following action was taken:

1 WN

NON-COMPLIANCE / (Non-respectés)

Definitions/Définitions

WN – Written Notifications/Avis écrit

VPC – Plan of correction/Plan de redressement

DR – Director Referral/Régisseur envoyé

CO – Compliance Order/Ordres de conformité

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

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

Le suivant constituer un avis d'écrit de l'exigences prevue le paragraph 1 de section 152 de les foyers de soins de longue durée.

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.)

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 prevue par la présente loi" au paragraphe 2(1) de la loi.

WN#1: The Licensee has failed to comply with: O. Regulation 79/10 s. 89 (1)(c)
As part of the organized program of laundry services under clause 15 (1) (b) of the Act, every licensee of a long-term care home shall ensure that, linen, face cloths and bath towels are kept clean and sanitary and are maintained in a good state of repair, free from stains and odours.

Findings:

1. Observed in 3 rooms torn or dirty sheets or pillowcases.

Inspector ID#: 145

Signature of Licensee or Designated Representative
 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).
 August 13, 2010