



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
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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 Novmeber 24, 2010	Inspection No/ d'Inspection 2010-155-2767-24Nov095042	Type of Inspection/Genre d'inspection L-01066 Complaint
Licensee/Titulaire Shanti Enterprises Limited, 600 Whites Road, Palmerston N0G 2P0		
Long-Term Care Home/Foyer de soins de longue durée Royal Terrace, 600 Whites Road, Palmerston N0G 2P0		
Name of Inspector(s)/Nom de l'inspecteur(s) Sharon Perry # 155		
Inspection Summary/Sommaire d'inspection		
The purpose of this inspection was to conduct an anonymous complaint inspection regarding staff training, resident care and supplies.		
During the course of the inspection, the inspector spoke with: Administrator, Director of Care, Registered Nurses, Registered Practical Nurses, Personal Support Workers and Residents.		
During the course of the inspection, the inspector: did a walkthrough of the home including some resident rooms and common areas; checked supplies available in supply rooms and tub rooms; observed residents taking part in an activity; and reviewed three resident's clinical records.		
The following Inspection Protocols were used during this inspection: Training and Orientation		
<input checked="" type="checkbox"/> There are no findings of Non-Compliance as a result of this inspection.		



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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). November 26, 2010