

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^{ième} 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
Facsimilie: 905-546-8255

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

 Licensee Copy/Copie du Titulaire Public Copy/Copie Public

Date of inspection/Date de l'inspection	Inspection No/ d'inspection	Type of Inspection/Genre d'inspection
04 November 2010	2010_127_2739_03Nov161444	Complaint (H-01875)

Licensee/Titulaire
The Royal Crest Lifecare Group Inc.
c/o Ernst and Young Inc. - 222 Bay Street TD Centre, P.O. Box 251, Toronto ON M5K 1J7

Long-Term Care Home/Foyer de soins de longue durée
Townsvlew Lifecare Centre, 39 Mary Street, Hamilton ON L8R 3L8

Name of Inspector(s)/Nom de l'inspecteur(s)
Richard Hayden, Long Term Care Homes Inspector – Environmental Health #127

Inspection Summary / Sommaire d'inspection

The purpose of this inspection was to conduct a complaint inspection and a follow up inspection regarding the following previously identified non-compliance:

Complaint Inspection - 25 June 2010 – unmet criterion B3.16 and O3.1

During the course of the inspection, the inspector spoke with the administrator, director of care, registered and non-registered staff, residents and a representative from Ecolab.

During the course of the inspection, the inspector undertook a visual inspection of all areas of the home where previous non-compliance was identified.

The following Inspection Protocols were used during this inspection:


- Accommodation Services - Housekeeping
- Safe and Secure Home

 No findings of non-compliance were found during this inspection.

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



CORRECTED NON-COMPLIANCE / Non-respects à Corrigé				
REQUIREMENT EXIGENCE	TYPE OF ACTION/ORDER	ACTION/ ORDER #	INSPECTION REPORT #	INSPECTOR ID #
B3.16 , LTC Homes Program Manual now found in <i>LTCHA, 2007</i> , c.8., s. 5 and O. Reg. 79/10, s. 91			Complaint Inspection - 25 June 2010	127
O3.1 , LTC Homes Program Manual now found in <i>LTCHA, 2007</i> , c.8., s. 15(1)(a) and O. Reg. 79/10, s. 87(2)(a)			Complaint Inspection - 25 June 2010	127

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). 22 November 2010	