



**Inspection Report
under the *Long-Term
Care Homes Act, 2007***

**Rapport d'inspection
prevue 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

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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
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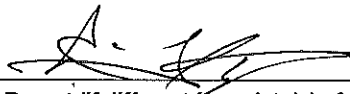
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Date of inspection/Date de l'inspection 26 April 2011	Inspection No/ d'inspection 2011_127_2975_26Apr092231	Type of Inspection/Genre d'inspection Follow up # H-000883-11
Licensee/Titulaire St. Joseph's Health System, 56 Governor's Road, Dundas ON L9H 5G7		
Long-Term Care Home/Foyer de soins de longue durée St. Joseph's Villa, 56 Governor's Road, Dundas ON L9H 5G7		
Name of Inspector(s)/Nom de l'inspecteur(s) Richard Hayden, Long Term Care Homes Inspector – Environmental Health #127		
Inspection Summary / Sommaire d'inspection		
<p>The purpose of this inspection was to follow up on written notification #10 and compliance order #001 of inspections 2010_127_2975_07Sep164606 and 2010_167_2975_08Sep102415 regarding the use of bedrails and the evaluation of bed systems to identify zones of entrapment.</p> <p>During the course of the inspection, the inspector spoke with the director of nursing, director of performance and quality management and registered staff.</p> <p>During the course of the inspection, the inspector reviewed audit notes, performance indicators, educational materials, policies and procedures, receipts for equipment purchase and residents' plans of care.</p> <p>The following Inspection Protocols were used during this inspection:</p> <ul style="list-style-type: none"> • Safe and Secure Home <p>No Findings of Non-Compliance were found during this inspection.</p> <p>Corrected Non-Compliance is listed in the section titled Corrected Non-Compliance.</p>		



CORRECTED NON-COMPLIANCE / Non-respects à Corrigé				
REQUIREMENT EXIGENCE	TYPE OF ACTION/ORDER	ACTION/ ORDER #	INSPECTION REPORT #	INSPECTOR ID #
O. Reg. 79/10, s. 15(1) (a) and (b)	WN	# 10	2010_127_2975_07Sep164606 2010_167_2975_08Sep102415	127
O. Reg. 79/10, s. 15(1) (a) and (b)	CO	# 001	2010_127_2975_07Sep164606 2010_167_2975_08Sep102415	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). 27 April 2011	