



**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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<b>Date of inspection/Date de l'inspection</b> February 11, 2011	<b>Inspection No/ d'inspection</b> 2011_105_907_10Feb155023	<b>Type of Inspection/Genre d'inspection</b> L-01808 Critical Incident
<b>Licensee/Titulaire</b> Omni Healthcare (CT) GPCO Ltd. 161 Bay St. Suite 2430 TD Canada Trust Tower Toronto ON M5J 2S1		
<b>Long-Term Care Home/Foyer de soins de longue durée</b> Country Terrrace 10072 Oxbow Dr. RR#3 Komoka ON N0L 1R0		
<b>Name of Inspector/Nom de l'inspecteur</b> June Osborn #105		
<b>Inspection Summary/Sommaire d'inspection</b>		
<p>The purpose of this inspection was to conduct a critical incident inspection related to medication.</p> <p>During the course of the inspection, the inspector spoke with the clinical care co-ordinator, 2 RPNs, and the acting administrator.</p> <p>During the course of the inspection, the inspector observed and investigated the process for handling controlled substances, reviewed the policy for medication starter packs.</p> <p>The following Inspection Protocols were used in part or in whole during this inspection: Medication.</p> <p><input checked="" type="checkbox"/> There are no findings of Non-Compliance as a result of this inspection.</p>		



## **Ministry of Health and Long-Term Care**

## **Ministère de la Santé et des Soins de longue durée**

# **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*

<b>Signature of Licensee or Representative of Licensee</b> <b>Signature du Titulaire du représentant désigné</b>	<b>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.</b>
<b>Title:</b>  <input type="text"/>	<b>Date:</b>  <input type="text"/>
<b>Date of Report:</b> February 14, 2011	