



**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

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

Division de la responsabilisation et de la performance du  
système de santé  
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Licensee Copy/Copie du Titulaire  Public Copy/Copie Public

<b>Date of inspection/Date de l'inspection</b>	<b>Inspection No/ d'inspection</b>	<b>Type of Inspection/Genre d'inspection</b>
04 March 2011	2011_127_9515_02Mar161913	Follow Up # H-00482
<b>Licensee/Titulaire</b>		
The Regional Municipality of Niagara, 2201 St. David's Road, PO Box 344, Thorold ON L2V 4T7		
<b>Long-Term Care Home/Foyer de soins de longue durée</b>		
The Meadows of Dorchester, 6623 Kalar Road, Niagara Falls ON L2H 2T3		
<b>Name of Inspector(s)/Nom de l'inspecteur(s)</b>		
Richard Hayden, Long Term Care Homes Inspector – Environmental Health #127		
<b>Inspection Summary / Sommaire d'inspection</b>		
<p>The purpose of this visit was to conduct a follow up inspection regarding the following previously identified non-compliance: <b>Annual Inspection – 04 March 2009 – unmet criteria M3.26</b></p> <p>During the course of the inspection, the inspector spoke with the administrator, director of care, environmental services manager and registered and non-registered staff.</p> <p>During the course of the inspection, the inspector inspected all areas where previous non-compliance was noted.</p> <p>The following Inspection Protocols were used during this inspection:</p> <ul style="list-style-type: none"> <li>Infection Prevention and Control</li> </ul> <p>No findings of non-compliance were found during this inspection.</p>		

<b>Signature of Licensee or Representative of Licensee</b> Signature du Titulaire du représentant désigné	<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>	<b>Date of Report (if different from date(s) of inspection).</b>
	10 March 2011