



**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, 11<sup>th</sup> Floor  
Hamilton, ON L8P 4Y7

Bureau régional de services de Hamilton  
119, rue King Ouest, 11<sup>ième</sup> 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

<b>Date of inspection/Date de l'inspection</b> 19 and 20 April 2011	<b>Inspection No/ d'inspection</b> 2011_127_9562_19Apr085752	<b>Type of Inspection/Genre d'inspection</b> Complaint #H-000774-11
--	---	--

**Licensee/Titulaire**  
The Regional Municipality of Peel, 10 Peel Centre Drive, Brampton ON L6T 4B9

**Long-Term Care Home/Foyer de soins de longue durée**  
Peel Manor, 525 Main Street North, Brampton ON L6X 1N9

**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 regarding infection prevention and control practices, including equipment sanitation.

During the course of the inspection, the inspector spoke with the administrator, supervisor of care, supervisor of administration, supervisor of facility services, registered and non-registered staff and residents.

During the course of the inspection, the inspector undertook a visual inspection of identified equipment and observed staff performing duties/following routine practices for infection prevention and control.

The following Inspection Protocols were used during this inspection:

- Infection Prevention and Control

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

<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>
Title: _____ Date: _____	Date of Report (if different from date(s) of inspection). 27 April 2011