Ontario

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

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

London Service Area Office
291 King Street, 4th Floor
London, ON N6B 1R8

Telephone: 519-675-7680
Facsimilie: 519-675-7685

Bureau régional de services de London
291, rue King , 4e étage
London, ON N6B 1R8

Téléphone: 519-675-7680
Télécopieur: 519-675-7685

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Date(s) of inspection/Date de l'inspection	**Inspection No/ d'inspection**	**Type of Inspection/Genre d'inspection**
September 8, 2010	2010-145-9507-07-Sep230413	Complaint L00379

Licensee/Titulaire

Corporation of the County of Bruce
41 McGivern Street P.O. Box 1600
Walkerton, Ontario N0G 2V0

Long-Term Care Home/Foyer de soins de longue durée
Brucelea Haven
41 McGivern Street, P.O. Box 1600
Walkerton, Ontario N0G 2V0

Name of Inspector(s)/Nom de l'inspecteur(s)

Karin Mussart (ID #145)

Inspection Summary/Sommaire d'inspection

The purpose of this inspection was to conduct a complaint inspection relating to concerns related to infection control in the Home .

During the course of the inspection, the inspector spoke with: The Administrator, and the Director of Care.

During the course of the inspection, the inspector: Reviewed the policy and procedures relating to infection control; reviewed the Chart Progress Notes relating to the resident in the complaint.

The following Inspection Protocols were used during this inspection: Infection Prevention and Control.

☒ There are no findings of Non-Compliance as a result of this inspection.

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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). September 10, 2010