

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

Health System Accountability and
Performance Division
Performance Improvement and Compliance Branch
Ottawa Service Area Office

347 Preston St., 4th Floor
Ottawa ON K1S 3J4
Telephone: 613-569-5602
Facsimile: 613-569-9670

**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
Bureau régional de services de Ottawa

347, rue Preston, 4^{ième} étage
Ottawa ON K1S 3J4
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November 15, 2010

Ms. Cathy Drouin
Administator
Carlingview Manor
2330 Carling Avenue
Ottawa ON K2B 7H1

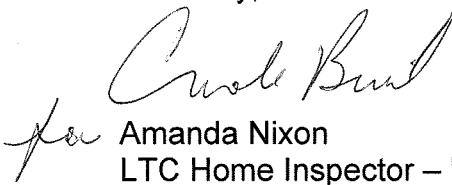
Dear Ms. Drouin:

Please find enclosed the ***Inspection Report-Public Copy*** for an inspection conducted on August 25, 2010 under the *Long-Term Care Homes Act, 2007* (LTCHA) for the purpose of ensuring compliance with requirements under the LTCHA.

This inspection report must be posted in the home, in a conspicuous and easily accessible location in accordance with the LTCHA, 2007, S.O. 2007, c.8, s.79 (1) and (2).

A copy of the ***Inspection Report-Public Copy*** must be made available without charge upon request. The report will also be on file with the Ottawa Service Area Office, Performance Improvement and Compliance Branch.

Sincerely,


for Amanda Nixon
LTC Home Inspector – Dietary

c President, Resident's Council
President, Family Council



**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**

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☐ Licensee Copy/Copie du Titulaire ☒ Public Copy/Copie Public		
Date(s) of inspection/Date de l'inspection August 25, 2010	Inspection No/ d'inspection 2010_148_2420_23Aug134453	Type of Inspection/Genre d'inspection Complaint Log # D 157
Licensee/Titulaire Revera Long Term Care Inc., 55 Standish Court 8 th Floor Mississauga Ontario L5R 4B2 Phone 289-360-1200 Fax 289-360-1201		
Long-Term Care Home/Foyer de soins de longue durée Carlingview Manor, 2330 Carling Avenue Ottawa Ontario K2B 7H1 Phone 613-820-9328 Fax 613-820-9774		
Name of Inspector(s)/Nom de l'inspecteur(s) Amanda Nixon (ID# 148) Kathleen Smid (ID# 161)		
Inspection Summary/Sommaire d'inspection		
The purpose of this inspection was to conduct a complaint inspection related to the care and services provided to an identified resident.		
During the course of the inspection, the inspectors spoke with members of the management team including the Executive Director, Regional Manager of Education and Resident Services, Resident Assessment Instrument (RAI) coordinator and Assistant Director of Care as well as the Registered Practical Nurse responsible for care on the 6 th floor, on August 25 th .		
During the course of the inspection, the inspectors reviewed the health care record of the resident.		
The following Inspection Protocol was used: Personal Support Services		
There are no findings of Non-Compliance as a result of this inspection.		

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. <i>Amanda Nixon RD LTCH Inspector - Dietary</i> <i>Kathleen Smid LTCH Inspector - Nursing</i>
Title:	Date:
	Date of Report: (if different from date(s) of inspection). <i>Sept 29, 2010</i>