

**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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October 14, 2010

Mr. Ron Cartagena
Administrator
Craiglee Nursing Home
102 Craiglee Drive
Scarborough ON M1N 2M7

Dear Mr. Cartagena:

Please find enclosed the ***Inspection Report-Public Copy*** for an inspection conducted on July 28, 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,


Darlene Murphy
LTC Home Inspector - Nursing

C President, Resident's Council
President, Family Council



**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***

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Date(s) of inspection/Date de l'inspection	Inspection No/ d'inspection	Type of Inspection/Genre d'inspection
July 28, 2010	2010_103_2503_28Jul 24525	Complaint Log # O-000356
Licensee/Titulaire Craiglee Nursing Home Limited, c/o Deloitte and Touche Inc., 181 Bay St., Brookfield Place, Suite 1400, Toronto, ON M5J 2V1 Fax# 416-601-6690 Long-Term Care Home/Foyer de soins de longue durée Craiglee Nursing Home, 102 Craiglee Drive, Scarborough, ON M1N 2M7 Name of Inspector(s)/Nom de l'inspecteur(s) Darlene Murphy(ID#103)		

Inspection Summary/Sommaire d'inspection

The purpose of this inspection was to conduct a Complaint inspection related to room temperatures.

During the course of the inspection, the inspector spoke with: Resident, Director of Care, Personal Support Workers

During the course of the inspection, the inspector reviewed one resident health record.

The following Inspection Protocols were used in part or in whole during this inspection:

- Nutrition and Hydration Inspection Protocol

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



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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*

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).