Ontario

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*

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

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	Licensee Copy/Copie du Titulaire	X Public Copy/Copie Public
Date(s) of inspection/Date de l'inspection **September 7, 8, 9, 2010**	**Inspection No/ d'inspection** 2010_168_2741_09Sep105546	**Type of Inspection/Genre d'inspection** **Complaint** **H-01269**

Licensee/Titulaire
Grace Villa Limited
284 Central Avenue
London ON N6B 2C8
Fax 519-672-8729

Long-Term Care Home/Foyer de soins de longue durée
Grace Villa Nursing Home
45 Lockton Crescent
Hamilton ON L8V 4V5

Name of Inspector(s)/Nom de l'inspecteur(s)
Lisa Vink, #168

Inspection Summary/Sommaire d'inspection

The purpose of this inspection was to conduct a Complaint inspection.

During the course of the inspection, the inspector spoke with:
The Administrator, Assistant Director of Nursing, the charge Registered Nurse, and front line staff

During the course of the inspection, the inspector:
Reviewed one clinical record, observed care and interviewed staff

The following Inspection Protocols were used during this inspection:
Responsive Behaviors

X No findings of Non-Compliance were found during 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.** October 1/10
Title: **Date:**	**Date of Report:** (if different from date(s) of inspection).