



**Inspection Report
under the *Long-Term
Care Homes Act, 2007***

**Rapport d'inspection
prévus 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

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

Bureau régional de services de London
291, rue King, 4^{ième} étage
London ON N6B 1R8

**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: 519-675-7680
Facsimile: 519-675-7685

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

☐ Licensee Copy/Copie du Titulaire

☒ Public Copy/Copie Public

Date(s) of inspection/Date de l'inspection
September 14, 2010

Inspection No/ d'inspection
2010_105_2729_14sep092540

Type of Inspection/Genre d'inspection
Compliant L-00441

Licensee/Titulaire

Sharon Farms & Enterprises Ltd. 1340 Huron St. London ON N5V 3R3

Long-Term Care Home/Foyer de soins de longue durée

Kensington Village 1340 Huron St. London ON N5V 3R3

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

June Osborn #105

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 Assistant Administrator, the assistant DOC, the RAI coordinator, the charge RN, 2 PSWs, Director of environmental services and the maintenance man.

During the course of the inspection, the inspector observed the resident, the resident's call bell system, reviewed the resident's medical record, and reviewed the minutes of the resident care conference.

The following Inspection Protocols were used in part or in whole during this inspection: Dignity, Choice and Privacy.

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

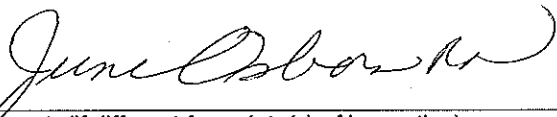


Ministry of Health and
Long-Term Care

Ministère de la Santé et
des Soins de longue durée

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).	
		September 17, 2010	