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
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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, 4iém étage
Ottawa ON K1S 3J4
Téléphone: 613-569-5602
Télécopieur: 613-569-9670

October 28, 2010

Ms. Linda Coles
Administrator
Lakeview Manor
133 Main Street
Beaverton ON L0K 1A0

Dear Ms. Coles:

Please find enclosed the ***Inspection Report-Public Copy*** for an inspection conducted on July 14, 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,

Kathleen Smith

for Darlene Murphy
LTC Home Inspector – Nursing

c President, Resident's Council
President, Family Council

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*

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☐ Licensee Copy/Copie du Titulaire ☒ Public Copy/Copie Public

Date(s) of inspection/Date de l'inspection	Inspection No/ d'inspection	Type of Inspection/Genre d'inspection
July 14, 2010	2010_103_2693_14Jul221319	Criticial Incident (M546-000022-10) Log # O-000196

Licensee/Titulaire
Regional Municipality of Durham, 605 Rossland Road, East, Whitby, ON L1N 6A3

Long-Term Care Home/Foyer de soins de longue durée
Lakeview Manor, 133 Main St., Beaverton, ON L0K 1A0 Fax #1-705-426-4218

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 critical incident inspection related to resident to resident abuse.

During the course of the inspection, the inspector spoke with 3 Personal Support Workers, 1 Registered Nurse, 1 Registered Practical Nurse, 1 family member and 1 activity aide.

During the course of the inspection, the inspector did a walkthrough of the Resident Home Area to observe resident care and reviewed the health care records of 2 residents.

The following Inspection Protocols were used during this inspection:

- Prevention of Abuse and Neglect
- Responsive Behaviors

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

NON- COMPLIANCE / (Non-respectés)

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. Oct 14/10 Darlene Murphy
Title: **Date:**	**Date of Report:** (if different from date(s) of inspection).