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
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Date(s) of inspection/Date de l'inspection	**Inspection No/ d'inspection**	**Type of Inspection/Genre d'inspection**
November 3, 2010	2010_121_9549_02Nov183432	Complaint L-01460

Licensee/Titulaire
Corporation of the County of Grey, 595 9th Ave. E., Owen Sound, ON N4K 3E3

Long-Term Care Home/Foyer de soins de longue durée
Lee Manor, 876 Sixth St. E., Owen Sound ON, N4K 5W5

Name of Inspector(s)/Nom de l'inspecteur(s)
Elizabeth Elvidge (#121)

Inspection Summary/Sommaire d'inspection

The purpose of this inspection was to conduct a complaint inspection concerning use of motorized wheelchairs.

During the course of the inspection, the inspector spoke with: The Director of Care, four residents, and four PSWs.

During the course of the inspection, the inspector: Viewed the motorized wheelchair and rented wheelchair and reviewed documentation records.

☒ 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. Elizabeth Elmsdie
Title: **Date:**	**Date of Report:** (if different from date(s) of inspection). November 4, 2010