



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 sous la Loi de 2007 sur les foyers de soins de longue durée

Health System Accountability and Performance Division
Performance Improvement and Compliance Branch

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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Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Nov 7, 2013	2013_190159_0030	H-000651- 13	Complaint

Licensee/Titulaire de permis

DEVONSHIRE ERIN MILLS INC.
195 DUFFERIN AVENUE, SUITE 800, LONDON, ON, N6A-1K7

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

ERIN MILLS LODGE NURSING HOME
2132 DUNDAS STREET WEST, MISSISSAUGA, ON, L5K-2K7

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

ASHA SEHGAL (159)

Inspection Summary/Résumé de l'inspection



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

This inspection was conducted on the following date(s): October 23, 28, 2013

During the course of the inspection, the inspector(s) spoke with President of the Residents' Council, residents, families, Administrator, Director of Care (DOC), Registered Nursing Staff (RN/RPN), Personal Support Workers (PSWs), Quality Improvement Manager, Food Service Manager, Food Service Supervisor and dietary staff.

During the course of the inspection, the inspector(s) Observed and reviewed food production, reviewed menus, observed dining service and reviewed Residents' Council and Food Committee meeting minutes.

The following Inspection Protocols were used during this inspection:

Dining Observation

Food Quality

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES	
Legend	Legendé
WN – Written Notification	WN – Avis écrit
VPC – Voluntary Plan of Correction	VPC – Plan de redressement volontaire
DR – Director Referral	DR – Aiguillage au directeur
CO – Compliance Order	CO – Ordre de conformité
WAO – Work and Activity Order	WAO – Ordres : travaux et activités



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Non-compliance with requirements under the Long-Term Care Homes Act, 2007 (LTCHA) was found. (A requirement under the LTCHA includes the requirements contained in the items listed in the definition of "requirement under this Act" in subsection 2(1) of the LTCHA.)

The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.

Le non-respect des exigences de la Loi de 2007 sur les foyers de soins de longue durée (LFSLD) a été constaté. (Une exigence de la loi comprend les exigences qui font partie des éléments énumérés dans la définition de « exigence prévue par la présente loi », au paragraphe 2(1) de la LFSLD.

Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.

WN #1: The Licensee has failed to comply with O.Reg 79/10, s. 72. Food production

Specifically failed to comply with the following:

s. 72. (2) The food production system must, at a minimum, provide for, (c) standardized recipes and production sheets for all menus; O. Reg. 79/10, s. 72 (2).

s. 72. (3) The licensee shall ensure that all food and fluids in the food production system are prepared, stored, and served using methods to, (a) preserve taste, nutritive value, appearance and food quality; and O. Reg. 79/10, s. 72 (3).

s. 72. (6) The licensee shall ensure that the home has, (b) institutional food service equipment with adequate capacity to prepare, transport and hold perishable hot and cold food at safe temperatures; and O. Reg. 79/10, s. 72 (6).

Findings/Faits saillants :



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1. Not all recipes were standardized and consistent with the planned cycle menu. Recipes were not scaled and adjusted for the number of servings/portions identified on the production sheets (e.g. Omelet recipe available was for 20 servings, the production report indicated 39 servings. Grilled cheese sandwich recipe was for 20 servings, however, the required number of servings on the production report identified 56 portions). There were no recipes or production guide for preparing mince food items to provide consistent quality product. [s. 72. (2) (c)]

2. Foods were not prepared, stored and served using methods which preserved taste, nutritive value, appearance and food quality.

On October 23, 2013 staff preparing the lunch meal did not follow the planned recipes to ensure taste, nutritive value, appearance and food quality were preserved as noted by following:

The recipe available for home made 'from scratch' Herbed Omelet was not followed. The recipe indicated preparation of Herbed Omelets on site using fresh ingredients. However, out sourced prepared frozen omelets were served. Frozen omelets were heated before 1030 hours and left sitting in the oven for extended periods of time and served at 1215 hours for the 1st sitting and 1320 hours for the 2nd sitting. The preparation of food too far in advance and overcooking resulted in undesirable flavour, texture and loss of nutrients. The minced and pureed Herbed Omelets were not prepared as per available recipes. Steamed scrambled eggs were minced and pureed instead of Herbed Omelet.

The grilled cheese sandwich and green salad recipes were not followed. Not all ingredients listed in the recipes were used and measured. Spinach was omitted in the green salad, only chopped iceberg lettuce was served to residents. The recipe for grilled cheese sandwich had listed "place 2 slices cheese between 2 slices of bread", the dietary staff had prepared grilled cheese sandwich using only one slice of processed cheese. Residents did not receive adequate protein servings for lunch meal. The Food Service Manager confirmed some ingredients were not in stock and the staff did not follow the recipes.

Pureed grilled cheese sandwiches were prepared using brown bread and cheese sauce, however, the recipe for pureed grilled cheese had indicated to use prepared product (grilled cheese) and milk to be used.

Dietary staff was observed preparing mince and puree texture menu items using excessive amount of liquid and thickener product, this resulted in the pureed eggs to be altered appearance, diluted nutrient contents, altered flavour, texture and compromised taste. The minced food items served to residents were more of puree



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consistency. The recipes were reviewed with the Food Service Manager and the Food Service Supervisor.

On October 2013 most of the menu items including texture modified menu were prepared before 1030 and held in the oven to be served at 1200hours and 1315 hours. The minced and pureed hot foods held in a hot food cart during the service appeared dried out and had black caking on the top. The Food Service Supervisor and the Director Of Care who were present in the dining room confirmed the change in texture and appearance of the food was due to food being prepared too far in advance and held in the oven for an extended period of time before the service. [s. 72. (3) (a)]

3. During the Observation of food production on October 23, 2013 and interview with the Food Service Manager confirmed that institutional food service equipment was not available for preparing texture modified menu. Dietary staff reported that the food processor was broken over 3 weeks ago and had not been repaired. The dietary staff was noted using food blender for preparing mince food items, which did not give consistent and proper minced texture due to proper equipment not available. [s. 72. (6) (b)]

Additional Required Actions:

CO # - 001 will be served on the licensee. Refer to the "Order(s) of the Inspector".

VPC - pursuant to the Long-Term Care Homes Act, 2007, S.O. 2007, c.8, s.152(2) the licensee is hereby requested to prepare a written plan of correction for achieving compliance to ensure that all recipes are standardized and consistent with the planned menu (72(2)(c). Institutional food service equipment is available with adequate capacity to prepare, transport, and hold perishable hot and cold food at safe temperatures(72)(6))(b), to be implemented voluntarily.

WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 71. Menu planning



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Specifically failed to comply with the following:

s. 71. (2) The licensee shall ensure that each menu, (b) provides for a variety of foods, including fresh seasonal foods, each day from all food groups in keeping with Canada's Food Guide as it exists from time to time. O. Reg. 79/10, s. 71 (2).

s. 71. (4) The licensee shall ensure that the planned menu items are offered and available at each meal and snack. O. Reg. 79/10, s. 71 (4).

Findings/Faits saillants :

1. The planned menu did not provide variety of fresh seasonal foods each day from all food groups in keeping with Canada's Food Guide.

The planned 4 week cycle menu (Spring and Summer) did not provide a variety seasonal fresh fruits and vegetables in the day to day and week to week choices. A review home's planned 4 week cycle menu indicated that the fresh fruit was served only five servings a week; and the limited variety of the fresh fruit served did not reflect the season. The menu served to residents lacked fresh vegetables and fruit each day. The planned menu served to residents included highly processed prepared foods and cured meats e.g corned beef, sausages, cold cuts, ham, hot dogs and turkey burgers. The Food Service Supervisor confirmed that the planned weekly menu included a limited variety of fresh fruit and vegetables, canned or frozen fruit and vegetables were served for most meals. Modified texture menu did not provide similar, choice, variety and nutrient composition as the regular menus. [s. 71. (2) (b)]

2. On October 23, 2013, the minced and pureed menu items were not prepared and offered to residents as per planned and posted menu. The planned menu items for lunch menu on October 23, 2013, indicated pureed Herbed Omelet and Potato Wedges, however, the dietary staff had prepared and served steamed scrambled eggs and mashed potatoes. The planned menu for pureed diet stated pureed grilled cheese sandwich, residents were served pureed brown bread with cheese sauce. The Food Service Supervisor confirmed that Herbed Omelet and potato Wedges were not prepared and available for lunch. [s. 71. (4)]



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Additional Required Actions:

CO # - 002, 003 will be served on the licensee. Refer to the "Order(s) of the Inspector".

WN #3: The Licensee has failed to comply with O.Reg 79/10, s. 73. Dining and snack service

Specifically failed to comply with the following:

s. 73. (1) Every licensee of a long-term care home shall ensure that the home has a dining and snack service that includes, at a minimum, the following elements:

6. Food and fluids being served at a temperature that is both safe and palatable to the residents. O. Reg. 79/10, s. 73 (1).

Findings/Faits saillants :

1. On October 23, 2013, not all hot foods were served at a temperature that was safe and palatable to the residents. Minced and pureed vegetables held in the hot food cart were tested in the presence of dietary staff and the Food Service Supervisor and confirmed food temperatures were below the acceptable standard(140 degree Fahrenheit). The minced omelet and vegetables probed at 110-120 degree Fahrenheit. A resident interviewed voiced concern about cold food and stated that meals were often cold at lunch and supper. [s. 73. (1) 6.]

Additional Required Actions:

VPC - pursuant to the Long-Term Care Homes Act, 2007, S.O. 2007, c.8, s.152(2) the licensee is hereby requested to prepare a written plan of correction for achieving compliance to ensure that food and fluids are served at a temperature that is both safe and palatable to the residents, to be implemented voluntarily.



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Issued on this 21st day of November, 2013

Signature of Inspector(s)/Signature de l'inspecteur ou des inspecteurs

Aska Sehgal



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Pursuant to section 153 and/or
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Direction de l'amélioration de la performance et de la conformité

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Name of Inspector (ID #) /

Nom de l'inspecteur (No) : ASHA SEHGAL (159)

Inspection No. /

No de l'inspection : 2013_190159_0030

Log No. /

Registre no: H-000651-13

Type of Inspection /

Genre d'inspection: Complaint

Report Date(s) /

Date(s) du Rapport : Nov 7, 2013

Licensee /

Titulaire de permis : DEVONSHIRE ERIN MILLS INC.
195 DUFFERIN AVENUE, SUITE 800, LONDON, ON,
N6A-1K7

LTC Home /

Foyer de SLD : ERIN MILLS LODGE NURSING HOME
2132 DUNDAS STREET WEST, MISSISSAUGA, ON,
L5K-2K7

Name of Administrator /

Nom de l'administratrice
ou de l'administrateur : MARY WHALEN

To DEVONSHIRE ERIN MILLS INC., you are hereby required to comply with the following order(s) by the date(s) set out below:



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Order # /

Ordre no : 001

Order Type /

Genre d'ordre : Compliance Orders, s. 153. (1) (b)

Pursuant to / Aux termes de :

O.Reg 79/10, s. 72. (3) The licensee shall ensure that all food and fluids in the food production system are prepared, stored, and served using methods to,
(a) preserve taste, nutritive value, appearance and food quality; and
(b) prevent adulteration, contamination and food borne illness. O. Reg. 79/10, s. 72 (3).

Order / Ordre :

The licensee shall prepare, submit and implement a plan that outlines how the home shall ensure that:

- a) recipes are available and followed for all food items including textured modified foods
- b) recipes are adjusted and scaled to the number of servings required
- c) food are not prepared too far in advance of meal service
- d) all menu items are prepared and served as per planned menu
- e) the same level of quality is provided for all food items prepared for textured modified menu. The plan is to be submitted electronically to Long-Term Care Homes Inspector Asha sehgal@ontario.ca November 15, 2013

Grounds / Motifs :

1. Above non compliance was previously issued as VPC on July 22, 2013.

Foods were not prepared, stored and served using methods which preserved taste, nutritive value, appearance and food quality.

On October 23, 2013 staff preparing the lunch meal did not follow the planned recipes to ensure taste, nutritive value, appearance and food quality were preserved as noted by following:

The recipe for home made 'from scratch' Herbed Omelet was not followed. The recipe indicated preparing of omelets on site using fresh ingredients. However, out sourced prepared frozen omelets were served. Frozen omelets were heated before 1030 hours and left sitting in the oven for extended periods of time and



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served at 1215 hours for the 1st sitting and 1320 hours for the 2nd sitting. The preparation of food too far in advance and overcooking resulted in undesirable flavour, texture and loss of nutrients. The minced and pureed Herbed Omelets were not prepared as per available recipes. Steamed scrambled eggs were minced and pureed instead of Herbed Omelet.

The grilled cheese sandwich and green salad recipes were not followed. Not all ingredients listed in the recipes were used and measured. Spinach was omitted in the green salad, only chopped iceberg lettuce was served to residents. The recipe for grilled cheese sandwich had listed "place 2 slices cheese between 2 slices of bread", the dietary staff had prepared grilled cheese sandwich using only one slice of processed cheese. Residents did not receive adequate protein servings for lunch meal. The Food Service Manager confirmed some ingredients were not in stock and the staff did not follow the recipes.

Pureed grilled cheese sandwiches were prepared using brown bread and cheese sauce, however, the recipe for pureed grilled cheese had indicated prepared product (grilled cheese) and milk to be used.

Dietary staff was observed preparing mince and puree texture menu items using excessive amount of liquid and thickener product, this resulted in pureed steamed eggs to be altered in appearance, diluted nutrient contents, altered flavour, texture and compromised taste. The minced food items served to residents appeared to be more of puree consistency. The recipes were reviewed with the Food Service Manager and the Food Service Supervisor.

On October 23, 2013 most of the menu items including texture modified menu were prepared before 1030 and held in the oven to be served at 1200hours and 1315 hours. The minced and pureed hot foods held in a hot food cart during the service appeared dried out and had black caking on the top. The Food Service Supervisor and the Director Of Care who were present in the dining room confirmed the change in texture and appearance of the food was due to food being prepared too far in advance and held in the oven for an extended period of time before the service. . (159)

Nov 15, 2013



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**This order must be complied with by /
Vous devez vous conformer à cet ordre d'ici le :**



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Order # /

Ordre no : 002

Order Type /

Genre d'ordre : Compliance Orders, s. 153. (1) (b)

Pursuant to / Aux termes de :

O.Reg 79/10, s. 71. (4) The licensee shall ensure that the planned menu items are offered and available at each meal and snack. O. Reg. 79/10, s. 71 (4).

Order / Ordre :

The licensee shall prepare, submit and implement a plan that outlines how the home will ensure that the planned menu items for textured modified diets are prepared, offered and available at each meal. The plan is to be submitted electronically to Long-Term Care Homes Inspector Asha sehgal@ontario.ca by November 15, 2013

Grounds / Motifs :

1. Above non compliance was previously issued as VPC on July 22, 2013.

On October 23, 2013, the minced and pureed menu items were not prepared and offered to residents as per planned and posted menu. The planned menu items for lunch menu on October 23, 2013 indicated pureed Herbed Omelet and Potato Wedges, however, the dietary staff had prepared steamed scrambled eggs and mashed potatoes. The planned menu for pureed diet stated pureed grilled cheese sandwich, however, the residents were served pureed brown bread with cheese sauce. The Food Service Supervisor confirmed that herbed omelet and the potato wedges were not prepared and available for lunch. (159)

This order must be complied with by /

Vous devez vous conformer à cet ordre d'ici le : Nov 15, 2013



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Order # / Ordre no : 003	Order Type / Genre d'ordre : Compliance Orders, s. 153. (1) (b)
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Pursuant to / Aux termes de :

O.Reg 79/10, s. 71. (2) The licensee shall ensure that each menu,
(a) provides for adequate nutrients, fibre and energy for the residents based on the current Dietary Reference Intakes (DRIs) established in the reports overseen by the United States National Academies and published by National Academy Press, as they may exist from time to time; and
(b) provides for a variety of foods, including fresh seasonal foods, each day from all food groups in keeping with Canada's Food Guide as it exists from time to time. O. Reg. 79/10, s. 71 (2).

Order / Ordre :

The licensee shall prepare, submit and implement a plan that outlines how the home will ensure that:
a) menu offered to residents provides a variety of foods
b) fresh seasonal foods from all food group e.g fruits and vegetables are provided each day.
c) menu provides for adequate nutrients. The plan is to be submitted electronically to Long-Term Care Homes Inspector Asha sehgal@ontario.ca by November 15, 2013

Grounds / Motifs :



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1. The planned menu did not provide variety of fresh seasonal foods each day from all food groups in keeping with Canada's Food Guide. The planned 4 week cycle menu (Spring and Summer) did not provide a variety seasonal fresh fruits and vegetables in the day to day and week to week choices. A review home's planned 4 week cycle menu indicated that fresh fruit was served only five servings a week; and the limited variety of the fresh fruit served did not reflect the season. The menu served to residents lacked fresh vegetables and fruit each day. The planned menu served to residents included highly processed prepared foods and cured meats e.g. corned beef, sausages, cold cuts, ham, hot dogs and turkey burgers. The Food Service Supervisor confirmed that the planned weekly menu included a limited variety of fresh fruit and vegetables, canned or frozen fruit and vegetables were served for most meals. Modified texture menu did not provide similar, choice, variety and nutrient composition as the regular menus.
(159)

This order must be complied with by /

Vous devez vous conformer à cet ordre d'ici le : Nov 15, 2013



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REVIEW/APPEAL INFORMATION

TAKE NOTICE:

The Licensee has the right to request a review by the Director of this (these) Order(s) and to request that the Director stay this (these) Order(s) in accordance with section 163 of the Long-Term Care Homes Act, 2007.

The request for review by the Director must be made in writing and be served on the Director within 28 days from the day the order was served on the Licensee.

The written request for review must include,

- (a) the portions of the order in respect of which the review is requested;
- (b) any submissions that the Licensee wishes the Director to consider; and
- (c) an address for services for the Licensee.

The written request for review must be served personally, by registered mail or by fax upon:

Director
c/o Appeals Coordinator
Performance Improvement and Compliance Branch
Ministry of Health and Long-Term Care
1075 Bay Street, 11th Floor
TORONTO, ON
M5S-2B1
Fax: 416-327-7603



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When service is made by registered mail, it is deemed to be made on the fifth day after the day of mailing and when service is made by fax, it is deemed to be made on the first business day after the day the fax is sent. If the Licensee is not served with written notice of the Director's decision within 28 days of receipt of the Licensee's request for review, this(these) Order(s) is(are) deemed to be confirmed by the Director and the Licensee is deemed to have been served with a copy of that decision on the expiry of the 28 day period.

The Licensee has the right to appeal the Director's decision on a request for review of an Inspector's Order(s) to the Health Services Appeal and Review Board (HSARB) in accordance with section 164 of the Long-Term Care Homes Act, 2007. The HSARB is an independent tribunal not connected with the Ministry. They are established by legislation to review matters concerning health care services. If the Licensee decides to request a hearing, the Licensee must, within 28 days of being served with the notice of the Director's decision, give a written notice of appeal to both:

Health Services Appeal and Review Board and the Director

Attention Registrar
151 Bloor Street West
9th Floor
Toronto, ON M5S 2T5

Director
c/o Appeals Coordinator
Performance Improvement and Compliance
Branch
Ministry of Health and Long-Term Care
1075 Bay Street, 11th Floor
TORONTO, ON
M5S-2B1
Fax: 416-327-7603

Upon receipt, the HSARB will acknowledge your notice of appeal and will provide instructions regarding the appeal process. The Licensee may learn more about the HSARB on the website www.hsarb.on.ca.



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RENSEIGNEMENTS SUR LE RÉEXAMEN/L'APPEL

PRENDRE AVIS

En vertu de l'article 163 de la Loi de 2007 sur les foyers de soins de longue durée, le titulaire de permis peut demander au directeur de réexaminer l'ordre ou les ordres qu'il a donné et d'en suspendre l'exécution.

La demande de réexamen doit être présentée par écrit et est signifiée au directeur dans les 28 jours qui suivent la signification de l'ordre au titulaire de permis.

La demande de réexamen doit contenir ce qui suit :

- a) les parties de l'ordre qui font l'objet de la demande de réexamen;
- b) les observations que le titulaire de permis souhaite que le directeur examine;
- c) l'adresse du titulaire de permis aux fins de signification.

La demande écrite est signifiée en personne ou envoyée par courrier recommandé ou par télécopieur au:

Directeur
a/s Coordinateur des appels
Direction de l'amélioration de la performance et de la conformité
Ministère de la Santé et des Soins de longue durée
1075, rue Bay, 11^e étage
Ontario, ON
M5S-2B1
Fax: 416-327-7603

Les demandes envoyées par courrier recommandé sont réputées avoir été signifiées le cinquième jour suivant l'envoi et, en cas de transmission par télécopieur, la signification est réputée faite le jour ouvrable suivant l'envoi. Si le titulaire de permis ne reçoit pas d'avis écrit de la décision du directeur dans les 28 jours suivant la signification de la demande de réexamen, l'ordre ou les ordres sont réputés confirmés par le directeur. Dans ce cas, le titulaire de permis est réputé avoir reçu une copie de la décision avant l'expiration du délai de 28 jours.



**Ministry of Health and
Long-Term Care**

Order(s) of the Inspector
Pursuant to section 153 and/or
section 154 of the *Long-Term Care
Homes Act, 2007*, S.O. 2007, c.8

**Ministère de la Santé et
des Soins de longue durée**

Ordre(s) de l'inspecteur
Aux termes de l'article 153 et/ou
de l'article 154 de la *Loi de 2007 sur les foyers
de soins de longue durée*, L.O. 2007, chap. 8

En vertu de l'article 164 de la Loi de 2007 sur les foyers de soins de longue durée, le titulaire de permis a le droit d'interjeter appel, auprès de la Commission d'appel et de révision des services de santé, de la décision rendue par le directeur au sujet d'une demande de réexamen d'un ordre ou d'ordres donnés par un inspecteur. La Commission est un tribunal indépendant du ministère. Il a été établi en vertu de la loi et il a pour mandat de trancher des litiges concernant les services de santé. Le titulaire de permis qui décide de demander une audience doit, dans les 28 jours qui suivent celui où lui a été signifié l'avis de décision du directeur, faire parvenir un avis d'appel écrit aux deux endroits suivants :

À l'attention du registraire
Commission d'appel et de révision
des services de santé
151, rue Bloor Ouest, 9e étage
Toronto (Ontario) M5S 2T5

Directeur
a/s Coordinateur des appels
Direction de l'amélioration de la performance et de la
conformité
Ministère de la Santé et des Soins de longue durée
1075, rue Bay, 11e étage
Ontario, ON
M5S-2B1
Fax: 416-327-7603

La Commission accusera réception des avis d'appel et transmettra des instructions sur la façon de procéder pour interjeter appel. Les titulaires de permis peuvent se renseigner sur la Commission d'appel et de révision des services de santé en consultant son site Web, au www.hsarb.on.ca.

Issued on this 7th day of November, 2013

**Signature of Inspector /
Signature de l'inspecteur :**

**Name of Inspector /
Nom de l'inspecteur :** ASHA SEHGAL

**Service Area Office /
Bureau régional de services :** Hamilton Service Area Office