



**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**

**Long-Term Care Homes Division  
Long-Term Care Inspections Branch**

**Division des foyers de soins de  
longue durée  
Inspection de soins de longue durée**

Hamilton Service Area Office  
119 King Street West 11th Floor  
HAMILTON ON L8P 4Y7  
Telephone: (905) 546-8294  
Facsimile: (905) 546-8255

Bureau régional de services de  
Hamilton  
119 rue King Ouest 11<sup>ième</sup> étage  
HAMILTON ON L8P 4Y7  
Téléphone: (905) 546-8294  
Télécopieur: (905) 546-8255

**Public Copy/Copie du public**

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<b>Report Date(s) / Date(s) du rapport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / Registre no</b>	<b>Type of Inspection / Genre d'inspection</b>
Jun 5, 2017	2017_573581_0004	018625-16	Follow up

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**Licensee/Titulaire de permis**

PARK LANE TERRACE LIMITED  
284 CENTRAL AVENUE LONDON ON N6B 2C8

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

PARK LANE TERRACE  
295 GRAND RIVER STREET NORTH PARIS ON N3L 2N9

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

DIANNE BARSEVICH (581)

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**Inspection Summary/Résumé de l'inspection**

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**The purpose of this inspection was to conduct a Follow up inspection.**

**This inspection was conducted on the following date(s): April 6 and April 7, 2017.**

**This was an inspection to follow-up to a compliance order, to ensure that the home did not cause or permit anyone to make a charge or accept such a payment on the licensee's behalf.**

**During the course of the inspection, the inspector(s) spoke with Administrator, Director of Care (DOC), Registered Nurses (RN), Registered Practical Nurses (RPN), Personal Support Workers (PSW), residents and families.**

**The inspector reviewed records, including but not limited to clinical health records, audits and invoices from medical suppliers.**

**The following Inspection Protocols were used during this inspection:  
Continence Care and Bowel Management**

**During the course of this inspection, Non-Compliances were issued.**

**1 WN(s)**

**0 VPC(s)**

**1 CO(s)**

**0 DR(s)**

**0 WAO(s)**



**NON-COMPLIANCE / NON - RESPECT DES EXIGENCES**

<p>Legend</p> <p>WN – Written Notification  VPC – Voluntary Plan of Correction  DR – Director Referral  CO – Compliance Order  WAO – Work and Activity Order</p>	<p>Legendé</p> <p>WN – Avis écrit  VPC – Plan de redressement volontaire  DR – Aiguillage au directeur  CO – Ordre de conformité  WAO – Ordres : travaux et activités</p>
<p>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).</p> <p>The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.</p>	<p>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.</p> <p>Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.</p>

**WN #1: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 91. Resident charges**

**Specifically failed to comply with the following:**

**s. 91. (4) A licensee shall not accept payment from or on behalf of a resident for anything that the licensee is prohibited from charging for under subsection (1) and shall not cause or permit anyone to make such a charge or accept such a payment on the licensee's behalf. 2007, c. 8, s. 91. (4).**

**Findings/Faits saillants :**

1. The licensee failed to ensure that they did not cause or permit anyone to make a



charge or accept such a payment on the licensee's behalf.

Ontario Regulation 79/10 section 245 paragraph 1 identified the following:

"The following charges are prohibited for the purposes of paragraph 4 of subsection 91(1) of the Act: 1. Charges for goods and services that a licensee is required to provide to a resident using funding that the licensee receives from, i. a local health integration network under section 19 of the Local Health System Integration Act, 2006 including goods and services funded by a local health integration network under a service accountability agreement, and ii. the Minister under section 90 of the Act".

The licensee received funding from the local health integration network under section 19 of the Local Health System Integration Act, 2006, for goods and services funded by the local health integration network under their service accountability agreement for continence care supplies.

The Long Term Care Home (LTCH) Policy, LTCH Required Goods, Equipment, Supplies and Services, dated July 1, 2010, identified that:

"The licensee must provide the following goods, equipment, supplies and services to long-term care (LTC) home residents at no charge, other than the accommodation charge payable under the Long Term Care Homes Act, 2007 (LTCHA), using the funding the licensee receives from the Local Health Integration Network under the Local Health System Integration Act, 2006 (LHSIA) or the Minister under the LTCHA or accommodation charges received under the LTCHA.

**2.1 Required Goods, Equipment, Supplies and Equipment**

**2.1.2 Continence Management Supplies**

Continence management supplies including, but not limited to:

a. A range of continence care products in accordance with section 51 of the Regulation under the LTCHA".

Section 51(2) of the Regulation under the LTCHA identified the following:

"51. (2) Every licensee of a long-term care home shall ensure that, (f) there are a range of continence care products available and accessible to residents and staff at all times, and in sufficient quantities for all required changes; and (h) residents are provided with a range of continence care products that, (i) are based on their individual assessed needs, (ii) properly fit the residents, (iii) promote resident comfort, ease of use, dignity and good skin integrity, (iv) promote continued independence wherever possible and (v) are



appropriate for the time of day, and for the individual resident's type of incontinence".

If a resident was assessed to require a pull up style incontinent product then it shall be provided as part of the range of continence care products to be provided at no charge by the home.

The licensee permitted the resident's representative to make a charge or accept a payment on the licensee's behalf for continence care products, which they received funding from the local health integration network under the service accountability agreement.

The home submitted a plan to the Ministry of Health and Long Term Care (MOHLTC ) on September 20, 2016, related to CO #005, s. 91. (4) which included an audit of all current and former residents that they determined were charged for a pull up style incontinent product from July 1, 2010, until June 2016, which included the total number of individuals charged for the pull up product and the amounts they were reimbursed.

Review of the audit that the home provided to inspector revealed the following:

- i. That 38 residents were charged for a pull up style incontinent products and that only 20 residents or their substitute decision maker (SDM) or Power of Attorney (POA) were reimbursed for the costs they incurred from the home.
- ii. The home provided 21 medical supplier invoices to the inspector.
- iii. Three residents' families brought in receipts to the home and they were reimbursed only for the amount of their receipts.
- iv. Seventeen families were unable to provide receipts and the audit indicated the families were paid what the medical supplier invoices identified on the audit form.
- v. Ten families were identified as unable to provide receipts and did not receive any repayment.
- vi. Six families were left voice messages two times and the families did not call the home back and therefore did not receive any repayment for the pull up products they had purchased while the residents were in the home.
- vii. Two families according to the audit, the home was unable to reach by telephone.
- viii. One resident was not listed on the audit but had an invoice for payments charged to the family for pull up products and were not reimbursed by the home.

A. Review of the audit the home provided identified that resident #003 wore a pull up style incontinence product which was ordered by the home and billed to the family.



Review of the invoice indicated the family was billed for an identified amount but the audit revealed that the phone number on Point Click Care (PCC) for the Power of Attorney (POA) was not in service. Inspector telephoned the POA with the number listed in PCC as well as the number listed under the second contact on the audit sheet and spoke with the resident's POA who stated they had purchased pull up product for their family member since they were admitted to the home in May 2013, until March 2016 and confirmed that the home ordered the product for them and the bill was sent directly to them from the medical supplier. They stated they did not know that the home was trying to contact them and were unaware the home was to repay the family for the cost they incurred paying for the pull up style incontinence product that the resident wore for several years while residing in the long term care home. Interview with the Administrator stated they were unable to explain why the family was not reached and confirmed resident #003's POA did not receive reimbursement for the pull up products they were billed for from the medical supplier.

B. Review of the audit that identified which residents in the home wore a pull up style continence products that were ordered by the home and paid for by the family indicated that resident #004's POA was called in May 2016. Review of the invoices from the medical supplier revealed the family was billed an identified amount. Interview with the Administrator confirmed that the home did not issue a check to reimburse the family as the family did not call the home back.

C. Review of the invoices that the home provided from the medical supplier indicated that resident #005 was billed an identified amount for pull up products purchased. Review of the audit which was to identify all residents that wore a pull up style continence product between July 2010 and June 2016, revealed that they were not on the audit list and therefore the resident's POA did not receive repayment from the home for the pull up product they were charged for from the medical supplier.

D. Review of the audit documentation indicated that resident #002 was still residing in the home and identified the name of the contact with two telephone numbers. The documentation revealed that the home tried to telephone the contact person in April 2016 and documented that the phone numbers were invalid numbers.

Inspector telephoned the resident's contact in April 2017, using the number listed on the audit sheet which was the same number in PCC and spoke with the resident's caregiver who stated they took resident #002 out of the home on a regular basis and the resident purchased their own pull up style continence product at that time. They stated they spent



approximately \$15.00 a week. They indicated that they were not informed that the home was now providing pull up products and that their contact numbers had not changed.

Review of resident #002 plan of care identified they required one person assistance with toileting and used pull up style incontinence product. Interview with PSW #100 in April 2017, who was the resident's primary caregiver stated the resident wore pull up products. Interview with the resident with the PSW staff present stated they wore pull up products and that the caregiver purchased the product with them. Resident #002 stated they were unaware that the home would pay for their pull up products and was very happy that they would no longer have to purchase their own pull up style continence product. Interview with the Administrator stated that they were unaware that the resident's caregiver was still purchasing pull up products with the resident and was unable to explain why the resident or the resident's caregiver was not informed that the home now provided pull up products. They were unable to explain why the audit identified the home was unable to telephone the resident's caregiver as the numbers that were documented were both in working order. The home did not reimburse the resident for all costs for the pull up style continence product they purchased and that should have been provided at no charge since they were admitted.

E. Review of the home's audit and the invoices provided by the medical supplier identified that resident #001's SDM did not provide receipts but was repaid the amount on the invoices provided. Interview with resident #001's SDM stated that they were informed that the home was required to pay back residents and/or families who paid for pull up style incontinence products for the costs they incurred. The families were given a certain amount of time to bring in receipts for the pull up products they paid for and they would be reimbursed from the home. They stated they were paid for the pull up products that were ordered from the home; however indicated that for several months when the resident was first admitted they bought their own pull up products for their family member but then decided it was easier and approximately the same cost for the home to order the pull up style product from the medical supplier and to be billed directly. They stated they were not reimbursed for those costs incurred when they paid for the pull up product themselves and stated they did not keep receipts.

F. Review of audit identified that resident #006's POA brought in receipts which totaled an identified amount. Review of the medical supplier invoices identified that the family was billed for and paid a different amount which was a difference of over \$500.00 that the family was not reimbursed for.



G. Resident #007's POA brought in receipts which totaled an identified amount for the pull up style products that they had purchased for the resident. Review of the medical supplier invoices identified the resident's family had paid a different amount, which was a difference of over \$200.00 which the family was not paid for.

H. Review of the home's audit for resident's that were repaid for the pull up style products that the resident/families had paid for identified that resident #008's family did not provide receipts. The audit indicated they were paid an identified amount; however, review of the invoices indicated the family was billed a different amount which was a difference of over \$500.00.

Interview with Administrator and the DOC both indicated they were not in the home at the time of the audit but stated they would be completely redoing the audit from June 2010, until present to ensure that all residents that were assessed as requiring pull up style continence products were aware that the home provided this product. After reviewing the audit with both the Administrator and DOC they confirmed the audit did not include all the current and former residents that were charged for a pull up style continence product and therefore all families were not paid back for the costs they incurred purchasing pull up style continence products either on their own or by the home ordering the product for them. The home failed to ensure that when a resident was assessed to require a pull up style incontinent product between June 2010 and April 2017, that all residents were included in the audit, all residents and families were contacted and informed that the home would be reimbursing them for the pull up products they had paid for independently. That all residents/families were reimbursed for the total cost of the pull up products that they incurred regardless if the residents/SDM or the estate provided receipts. [s. 91. (4)]

***Additional Required Actions:***

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

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**Rapport d'inspection sous la  
Loi de 2007 sur les foyers de  
soins de longue durée**

**Issued on this 14th day of July, 2017**

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

**Original report signed by the inspector.**



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

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

**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*

**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*

**Long-Term Care Homes Division  
Long-Term Care Inspections Branch**

**Division des foyers de soins de longue durée  
Inspection de soins de longue durée**

**Public Copy/Copie du public**

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**Name of Inspector (ID #) /**

**Nom de l'inspecteur (No) :** DIANNE BARSEVICH (581)

**Inspection No. /**

**No de l'inspection :** 2017\_573581\_0004

**Log No. /**

**Registre no:** 018625-16

**Type of Inspection /**

**Genre**

Follow up

**d'inspection:**

**Report Date(s) /**

**Date(s) du Rapport :** Jun 5, 2017

**Licensee /**

**Titulaire de permis :** PARK LANE TERRACE LIMITED  
284 CENTRAL AVENUE, LONDON, ON, N6B-2C8

**LTC Home /**

**Foyer de SLD :** PARK LANE TERRACE  
295 GRAND RIVER STREET NORTH, PARIS, ON,  
N3L-2N9

**Name of Administrator /**

**Nom de l'administratrice**

**ou de l'administrateur :** Catherine Donahue

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To PARK LANE TERRACE LIMITED, 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)

**Linked to Existing Order /**  
**Lien vers ordre**      2016\_343585\_0007, CO #005;  
**existant:**

**Pursuant to / Aux termes de :**

LTCHA, 2007 S.O. 2007, c.8, s. 91. (4) A licensee shall not accept payment from or on behalf of a resident for anything that the licensee is prohibited from charging for under subsection (1) and shall not cause or permit anyone to make such a charge or accept such a payment on the licensee's behalf. 2007, c. 8, s. 91. (4).

**Order / Ordre :**

The licensee shall prepare, submit and implement a plan to ensure that all current and former residents since July 1, 2010, to present will be reimbursed for all costs for pull up style continence care products, that should have been provided at no charge, while the resident resided in the home.

The plan shall include:

1. Develop and implement an extensive audit and plan to refund all residents/SDM/POAs for the cost of the usage of pull up style continence products provided by resident/ families since June 2010, to present. In the absence of a receipt from residents/families, the home is to estimate the average usage of the pull up product, per resident, per day and refund the resident/SDM/POA for the incurred cost.
2. Develop a system to ensure that all families in the past six years that were assessed by the home to require pull up products are contacted and informed that they will be receiving payment from the home for costs that they incurred for purchasing pull up products while the resident resided in the home.
3. A schedule for reimbursement for the current and former residents/SDM/POA for the full cost of the products used during their length of stay by October 10, 2017.

The home will submit their compliance plan for the audits and how families will be informed of the repayment by July 17, 2017 to [dianne.barsevich@ontario.ca](mailto:dianne.barsevich@ontario.ca)

**Grounds / Motifs :**

1. This order is based upon three factors where there has been a finding of noncompliance in keeping with section 299(1) of Ontario Regulation 79/10, scope, severity and a history of non-compliance. The scope of the non-compliance is widespread (3), the severity of the non-compliance has minimal risk (1) and the history of non-compliance is ongoing (4) with an order issued previously in June 2016.

1. The licensee failed to ensure that they did not cause or permit anyone to make a charge or accept such a payment on the licensee's behalf.

Ontario Regulation 79/10 section 245 paragraph 1 identified the following:

"The following charges are prohibited for the purposes of paragraph 4 of subsection 91(1) of the Act: 1. Charges for goods and services that a licensee is required to provide to a resident using funding that the licensee receives from, i. a local health integration network under section 19 of the Local Health System Integration Act, 2006 including goods and services funded by a local health integration network under a service accountability agreement, and ii. the Minister under section 90 of the Act".

The licensee received funding from the local health integration network under section 19 of the Local Health System Integration Act, 2006, for goods and services funded by the local health integration network under their service accountability agreement for continence care supplies.

The Long Term Care Home (LTCH) Policy, LTCH Required Goods, Equipment, Supplies and Services, dated July 1, 2010, identified that:

"The licensee must provide the following goods, equipment, supplies and services to long-term care (LTC) home residents at no charge, other than the accommodation charge payable under the Long Term Care Homes Act, 2007 (LTCHA), using the funding the licensee receives from the Local Health Integration Network under the Local Health System Integration Act, 2006 (LHSIA) or the Minister under the LTCHA or accommodation charges received under the LTCHA.

2.1 Required Goods, Equipment, Supplies and Equipment

2.1.2 Continence Management Supplies

Continence management supplies including, but not limited to:

a. A range of continence care products in accordance with section 51 of the Regulation under the LTCHA”.

Section 51(2) of the Regulation under the LTCHA identified the following:

“51. (2) Every licensee of a long-term care home shall ensure that, (f) there are a range of continence care products available and accessible to residents and staff at all times, and in sufficient quantities for all required changes; and (h) residents are provided with a range of continence care products that, (i) are based on their individual assessed needs, (ii) properly fit the residents, (iii) promote resident comfort, ease of use, dignity and good skin integrity, (iv) promote continued independence wherever possible and (v) are appropriate for the time of day, and for the individual resident’s type of incontinence”.

If a resident was assessed to require a pull up style incontinent product then it shall be provided as part of the range of continence care products to be provided at no charge by the home.

The licensee permitted the resident’s representative to make a charge or accept a payment on the licensee’s behalf for continence care products, which they received funding from the local health integration network under the service accountability agreement.

The home submitted a plan to the Ministry of Health and Long Term Care (MOHLTC ) on September 20, 2016, related to CO #005, s. 91. (4) which included an audit of all current and former residents that they determined were charged for a pull up style incontinent product from July 1, 2010, until June 2016, which included the total number of individuals charged for the pull up product and the amounts they were reimbursed.

Review of the audit that the home provided to inspector revealed the following:

- i. That 38 residents were charged for a pull up style incontinent products and that only 20 residents or their substitute decision maker (SDM) or Power of Attorney (POA) were reimbursed for the costs they incurred from the home.
- ii. The home provided 21 medical supplier invoices to the inspector.
- iii. Three residents' families brought in receipts to the home and they were reimbursed only for the amount of their receipts.
- iv. Seventeen families were unable to provide receipts and the audit indicated

the families were paid what the medical supplier invoices identified on the audit form.

v. Ten families were identified as unable to provide receipts and did not receive any repayment.

vi. Six families were left voice messages two times and the families did not call the home back and therefore did not receive any repayment for the pull up products they had purchased while the residents were in the home.

vii. Two families according to the audit, the home was unable to reach by telephone.

viii. One resident was not listed on the audit but had an invoice for payments charged to the family for pull up products and were not reimbursed by the home.

A. Review of the audit the home provided identified that resident #003 wore a pull up style incontinence product which was ordered by the home and billed to the family. Review of the invoice indicated the family was billed for an identified amount but the audit revealed that the phone number on Point Click Care (PCC) for the Power of Attorney (POA) was not in service. Inspector telephoned the POA with the number listed in PCC as well as the number listed under the second contact on the audit sheet and spoke with the resident's POA who stated they had purchased pull up product for their family member since they were admitted to the home in May 2013, until March 2016 and confirmed that the home ordered the product for them and the bill was sent directly to them from the medical supplier. They stated they did not know that the home was trying to contact them and were unaware the home was to repay the family for the cost they incurred paying for the pull up style incontinence product that the resident wore for several years while residing in the long term care home. Interview with the Administrator stated they were unable to explain why the family was not reached and confirmed resident #003's POA did not receive reimbursement for the pull up products they were billed for from the medical supplier.

B. Review of the audit that identified which residents in the home wore a pull up style continence products that were ordered by the home and paid for by the family indicated that resident #004's POA was called in May 2016. Review of the invoices from the medical supplier revealed the family was billed an identified amount. Interview with the Administrator confirmed that the home did not issue a check to reimburse the family as the family did not call the home back.

C. Review of the invoices that the home provided from the medical supplier

indicated that resident #005 was billed an identified amount for pull up products purchased. Review of the audit which was to identify all residents that wore a pull up style continence product between July 2010 and June 2016, revealed that they were not on the audit list and therefore the resident's POA did not receive repayment from the home for the pull up product they were charged for from the medical supplier.

D. Review of the audit documentation indicated that resident #002 was still residing in the home and identified the name of the contact with two telephone numbers. The documentation revealed that the home tried to telephone the contact person in April 2016 and documented that the phone numbers were invalid numbers.

Inspector telephoned the resident's contact in April 2017, using the number listed on the audit sheet which was the same number in PCC and spoke with the resident's caregiver who stated they took resident #002 out of the home on a regular basis and the resident purchased their own pull up style continence product at that time. They stated they spent approximately \$15.00 a week. They indicated that they were not informed that the home was now providing pull up products and that their contact numbers had not changed.

Review of resident #002 plan of care identified they required one person assistance with toileting and used pull up style incontinence product. Interview with PSW #100 in April 2017, who was the resident's primary caregiver stated the resident wore pull up products. Interview with the resident with the PSW staff present stated they wore pull up products and that the caregiver purchased the product with them. Resident #002 stated they were unaware that the home would pay for their pull up products and was very happy that they would no longer have to purchase their own pull up style continence product. Interview with the Administrator stated that they were unaware that the resident's caregiver was still purchasing pull up products with the resident and was unable to explain why the resident or the resident's caregiver was not informed that the home now provided pull up products. They were unable to explain why the audit identified the home was unable to telephone the resident's caregiver as the numbers that were documented were both in working order. The home did not reimburse the resident for all costs for the pull up style continence product they purchased and that should have been provided at no charge since they were admitted.

E. Review of the home's audit and the invoices provided by the medical supplier identified that resident #001's SDM did not provide receipts but was repaid the amount on the invoices provided. Interview with resident #001's SDM stated that they were informed that the home was required to pay back residents and/or families who paid for pull up style incontinence products for the costs they incurred. The families were given a certain amount of time to bring in receipts for the pull up products they paid for and they would be reimbursed from the home. They stated they were paid for the pull up products that were ordered from the home; however indicated that for several months when the resident was first admitted they bought their own pull up products for their family member but then decided it was easier and approximately the same cost for the home to order the pull up style product from the medical supplier and to be billed directly. They stated they were not reimbursed for those costs incurred when they paid for the pull up product themselves and stated they did not keep receipts.

F. Review of audit identified that resident #006's POA brought in receipts which totaled an identified amount. Review of the medical supplier invoices identified that the family was billed for and paid a different amount which was a difference of over \$500.00 that the family was not reimbursed for.

G. Resident #007's POA brought in receipts which totaled an identified amount for the pull up style products that they had purchased for the resident. Review of the medical supplier invoices identified the resident's family had paid a different amount, which was a difference of over \$200.00 which the family was not paid for.

H. Review of the home's audit for resident's that were repaid for the pull up style products that the resident/families had paid for identified that resident #008's family did not provide receipts. The audit indicated they were paid an identified amount; however, review of the invoices indicated the family was billed a different amount which was a difference of over \$500.00.

Interview with Administrator and the DOC both indicated they were not in the home at the time of the audit but stated they would be completely redoing the audit from June 2010, until present to ensure that all residents that were assessed as requiring pull up style continence products were aware that the home provided this product. After reviewing the audit with both the Administrator and DOC they confirmed the audit did not include all the current and former residents that were charged for a pull up style continence product





**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*

and therefore all families were not paid back for the costs they incurred purchasing pull up style continence products either on their own or by the home ordering the product for them. The home failed to ensure that when a resident was assessed to require a pull up style incontinent product between June 2010 and April 2017, that all residents were included in the audit, all residents and families were contacted and informed that the home would be reimbursing them for the pull up products they had paid for independently. That all residents/families were reimbursed for the total cost of the pull up products that they incurred regardless if the residents/SDM or the estate provided receipts.

. (581)

**This order must be complied with by /**

**Vous devez vous conformer à cet ordre d'ici le : Oct 10, 2017**



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

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

**Order(s) of the Inspector**

Pursuant to section 153 and/or  
section 154 of the *Long-Term Care  
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de l'article 154 de la *Loi de 2007 sur les foyers  
de soins de longue durée*, L.O. 2007, chap. 8

### **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  
Long-Term Care Inspections Branch  
Ministry of Health and Long-Term Care  
1075 Bay Street, 11th Floor  
TORONTO, ON  
M5S-2B1  
Fax: 416-327-7603



**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*

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  
Long-Term Care Inspections 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](http://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  
Inspection de soins de longue durée  
Ministère de la Santé et des Soins de longue durée  
1075, rue Bay, 11<sup>e</sup> 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  
Inspection de soins de longue durée  
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](http://www.hsarb.on.ca).

**Issued on this 5th day of June, 2017**

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

**Name of Inspector /  
Nom de l'inspecteur :** Dianne Barsevich

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