



**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  
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**

Central East Service Area Office  
419 King Street West Suite #303  
OSHAWA ON L1J 2K5  
Telephone: (905) 433-3013  
Facsimile: (905) 433-3008

Bureau régional de services du  
Centre-Est  
419 rue King Ouest bureau 303  
OSHAWA ON L1J 2K5  
Téléphone: (905) 433-3013  
Télécopieur: (905) 433-3008

## **Amended Public Copy/Copie modifiée 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 #/ No de registre</b>	<b>Type of Inspection / Genre d'inspection</b>
Nov 13, 2018	2018_486653_0025 (A1)	016067-18	Follow up

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### **Licensee/Titulaire de permis**

City of Toronto  
55 John Street Metro Hall, 11th Floor TORONTO ON M5V 3C6

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

Seven Oaks  
9 Neilson Road SCARBOROUGH ON M1E 5E1

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

Amended by ROMELA VILLASPIR (653) - (A1)

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## **Amended Inspection Summary/Résumé de l'inspection modifié**

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**The home had requested for an extension to ensure the compliance order is addressed in full.**

**Issued on this 13th day of November, 2018 (A1)**

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

**Original report signed by the inspector.**



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Nov 13, 2018	2018_486653_0025 (A1)	016067-18	Follow up

### **Licensee/Titulaire de permis**

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

Seven Oaks  
9 Neilson Road SCARBOROUGH ON M1E 5E1

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

Amended by ROMELA VILLASPIR (653) - (A1)

## **Amended 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): October 10, and 11, 2018.**

**During the course of the inspection, the inspector reviewed clinical health records, application for admission, and the refusal letter for admission.**

**During the course of the inspection, the inspector(s) spoke with the Central East Local Health Integration Network (CE LHIN) Placement Coordinator, Advocacy Centre for the Elderly (ACE) Representative, Registered Practical Nurses (RPNs), Registered Nurses (RNs), Occupational Therapist (OT), Support Assistant (SA), Manager of Resident Services (MRS), and the Administrator.**

**The following Inspection Protocols were used during this inspection:  
Admission and Discharge**

**During the course of the original 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>Légende</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. 44. Authorization for admission to a home**



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

**s. 44. (7) The appropriate placement co-ordinator shall give the licensee of each selected home copies of the assessments and information that were required to have been taken into account, under subsection 43 (6), and the licensee shall review the assessments and information and shall approve the applicant's admission to the home unless,**

- (a) the home lacks the physical facilities necessary to meet the applicant's care requirements; 2007, c. 8, s. 44. (7).**
- (b) the staff of the home lack the nursing expertise necessary to meet the applicant's care requirements; or 2007, c. 8, s. 44. (7).**
- (c) circumstances exist which are provided for in the regulations as being a ground for withholding approval. 2007, c. 8, s. 44. (7).**

**s. 44. (9) If the licensee withholds approval for admission, the licensee shall give to persons described in subsection (10) a written notice setting out,**

- (a) the ground or grounds on which the licensee is withholding approval; 2007, c. 8, s. 44. (9).**
- (b) a detailed explanation of the supporting facts, as they relate both to the home and to the applicant's condition and requirements for care; 2007, c. 8, s. 44. (9).**
- (c) an explanation of how the supporting facts justify the decision to withhold approval; and 2007, c. 8, s. 44. (9).**
- (d) contact information for the Director. 2007, c. 8, s. 44. (9).**

**Findings/Faits saillants :**

1. The licensee had failed to comply with s. 44 (7) of the LTCHA whereby the licensee refused the application for applicant #002 for reasons other than provided for in the LTCHA.

This inspection had been initiated related to follow-up log #016067-18 for Compliance Order (CO) #001. On an identified date, CO #001, made under s. 44 (7) of the LTCHA had been served to Seven Oaks:

1. The licensee must be compliant with s. 44 (7) and s. 44 (9) of the LTCHA.
2. The home shall cease the practice of withholding an applicant's approval unless:



- (a) the home lacks the physical facilities necessary to meet the applicant's care requirements;
- (b) the staff of the home lack the nursing expertise necessary to meet the applicant's care requirements; or
- (c) circumstances exist which are provided for in the regulations as being a ground for withholding approval. 2007, c. 8, s. 44 (7).

3. The licensee shall immediately contact the appropriate placement coordinator at the Central East LHIN to request the most recent assessments for applicants #001 and #002 if the applicants are still choosing Seven Oaks.

4. The licensee shall accept applicant #001 and #002 unless as specified by this legislation.

5. Should the licensee withhold approval, the licensee must meet the requirements of s. 44 (9) of the LTCHA and provide a notice addressing:
- (a) the ground or grounds on which the licensee is withholding approval;
  - (b) a detailed explanation of the supporting facts, as they relate both to the home and to the applicant's condition and requirements for care;
  - (c) an explanation of how the supporting facts justify the decision to withhold approval; and
  - (d) contact information for the Director. 2007, c. 8, s. 44 (9).

At the time of the inspection, applicant #001 had already been admitted to the home, while applicant #002 was still residing at another Long-Term Care (LTC) facility.

A review of the Central East Local Health Integration Network (CE LHIN)'s referral management document indicated applicant #002 was referred to Seven Oaks LTC for admission, on an identified date. A review of the home's letter of withholding approval of admission addressed to applicant #002 from the Administrator of Seven Oaks LTC included details on the resident's use of their assistive device and concluded that the home cannot safely accommodate their use of the assistive device.

A telephone interview on an identified date and time with the Advocacy Centre for the Elderly (ACE) representative indicated that applicant #002 continued to place Seven Oaks as their LTC home of choice.



A telephone interview on an identified date and time with the CE LHIN Placement Coordinator, indicated applicant #002 was a previous resident of Seven Oaks LTC and had not been previously declined admission based on the use of their assistive device.

An interview with the Manager of Resident Services (MRS) on an identified date and time, acknowledged the above mentioned letter and indicated applicant #002 had been refused due to their use of the assistive device that the home's physical environment could not accommodate. The MRS stated the use of the assistive device poses a risk on the units where there are frail residents walking down the hallways, and storing it poses risk to staff giving care. When questioned by the inspector if there were residents living in the home residing in a room who currently utilize a similar assistive device, the MRS stated there were two, residents #001 and #003.

An interview with the Occupational Therapist (OT) on an identified date and time, indicated that the home no longer accepts applicants who use the identified assistive device due to the associated safety risks. When questioned by the inspector if the home had the physical facilities to accommodate independent use the identified assistive device, the OT indicated Seven Oaks was not a small home, the hallways and common areas were spacious, and that the whole home was big enough to accommodate current residents #001 and #003 who use their assistive device.

An interview with the Administrator on an identified date and time acknowledged the above mentioned letter to applicant #002. When asked by the inspector to speak to the criteria that the applicant did not meet for approval of admission, the Administrator indicated the main reason was the lack of physical facility necessary to meet applicant #002's care requirements. The Administrator indicated the applicant had an assistive device and that the issue was providing care safely considering the space in the room. The Administrator further indicated that upon review of the application of applicant #002, it was noted they had been involved in incidents at their current home while using their assistive device, and that it was a concern for Seven Oaks. At that point, the Administrator stated it was a risk issue and they had to mitigate the risk to ensure the safety and well-being of other residents at Seven Oaks, and to ensure that the home is a safe work place for the staff. The Administrator also stated they did not cite in the letter that applicant #002 had underlying health diagnoses that contributed to the home's decision.





The licensee had failed to demonstrate reasons provided for in the LTCHA, for withholding approval of admission to applicant #002. [s. 44. (7)]

2. The licensee had failed to ensure that when withholding approval for admission, the licensee shall give a written notice setting out the ground or grounds on which the licensee is withholding approval; a detailed explanation of the supporting facts, as they relate both to the home and to the applicant's condition and requirements for care; an explanation of how the supporting facts justify the decision to withhold approval; and contact information for the Director. 2007, c. 8, s. 44 (9).

This inspection had been initiated related to follow-up log #016067-18 for CO #001. On an identified date, CO #001, made under s. 44 (7) of the LTCHA had been served to Seven Oaks:

1. The licensee must be compliant with s. 44 (7) and s. 44 (9) of the LTCHA.
2. The home shall cease the practice of withholding an applicant's approval unless:
  - (a) the home lacks the physical facilities necessary to meet the applicant's care requirements;
  - (b) the staff of the home lack the nursing expertise necessary to meet the applicant's care requirements; or
  - (c) circumstances exist which are provided for in the regulations as being a ground for withholding approval. 2007, c. 8, s. 44 (7).
3. The licensee shall immediately contact the appropriate placement coordinator at the Central East LHIN to request the most recent assessments for applicants #001 and #002 if the applicants are still choosing Seven Oaks.
4. The licensee shall accept applicant #001 and #002 unless as specified by this legislation.
5. Should the licensee withhold approval, the licensee must meet the requirements of s. 44 (9) of the LTCHA and provide a notice addressing:
  - (a) the ground or grounds on which the licensee is withholding approval;
  - (b) a detailed explanation of the supporting facts, as they relate both to the home and to the applicant's condition and requirements for care;
  - (c) an explanation of how the supporting facts justify the decision to withhold



approval; and

(d) contact information for the Director. 2007, c. 8, s. 44 (9).

At the time of the inspection, applicant #001 had already been admitted to the home, while applicant #002 was still residing at another LTC facility.

A review of the home's letter of withholding approval of admission addressed to applicant #002 from the Administrator of Seven Oaks LTC included details on the resident's use of their assistive device and concluded that the home cannot safely accommodate their use of the assistive device.

During separate interviews with the MRS and the Administrator, they both acknowledged that the letter did not include sufficient details as required, for withholding an approval of admission.

The letter did not provide a detailed explanation of the supporting facts, as they related both to the home and to the applicant's condition and requirements for care, and an explanation of how the supporting facts justify the decision to withhold. [s. 44. (9)]

***Additional Required Actions:***

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

**(A1)**

**The following order(s) have been amended: CO# 001**

**Issued on this 13th day of November, 2018 (A1)**





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

**Original report signed by the inspector.**



Ministry of Health and  
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Ministère de la Santé et des  
Soins de longue durée

**Order(s) of the Inspector**

**Ordre(s) de l'inspecteur**

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

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*,  
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Long-Term Care Homes Division  
Long-Term Care Inspections Branch  
Division des foyers de soins de  
longue durée  
Inspection de soins de longue durée

**Amended Public Copy/Copie modifiée du public**

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**Name of Inspector (ID #) /  
Nom de l'inspecteur (No) :** Amended by ROMELA VILLASPIR (653) - (A1)

**Inspection No. /  
No de l'inspection :** 2018\_486653\_0025 (A1)

**Appeal/Dir# /  
Appel/Dir#:**

**Log No. /  
No de registre :** 016067-18 (A1)

**Type of Inspection /  
Genre d'inspection :** Follow up

**Report Date(s) /  
Date(s) du Rapport :** Nov 13, 2018(A1)

**Licensee /  
Titulaire de permis :** City of Toronto  
55 John Street, Metro Hall, 11th Floor, TORONTO,  
ON, M5V-3C6

**LTC Home /  
Foyer de SLD :** Seven Oaks  
9 Neilson Road, SCARBOROUGH, ON, M1E-5E1

**Name of Administrator /  
Nom de l'administratrice  
ou de l'administrateur :** Peter Puiatti

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**Order(s) of the Inspector**

**Ordre(s) de l'inspecteur**

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L. O. 2007, chap. 8

To City of Toronto, you are hereby required to comply with the following order(s) by  
the      date(s) set out below:





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foyers de soins de longue durée*,  
L. O. 2007, chap. 8

The licensee must be compliant with s. 44 (7) and s. 44 (9) of the Long-Term Care Homes Act (LTCHA), 2007.

Specifically, the licensee shall ensure the following:

1. The home shall cease the practice of withholding an applicant's approval unless:
  - (a) the home lacks the physical facilities necessary to meet the applicant's care requirements;
  - (b) the staff of the home lack the nursing expertise necessary to meet the applicant's care requirements; or
  - (c) circumstances exist which are provided for in the regulations as being a ground for withholding approval. 2007, c. 8, s. 44 (7).
2. The licensee shall immediately contact the appropriate placement coordinator at the Central East Local Health Integration Network (CE LHIN) to request the most recent assessment for applicant #002, if the applicant is still choosing Seven Oaks.
3. The licensee shall accept applicant #002 unless as specified by this legislation.
4. Should the licensee withhold approval, the licensee must meet the requirements of s. 44 (9) of the LTCHA and provide a notice addressing:
  - (a) the ground or grounds on which the licensee is withholding approval;
  - (b) a detailed explanation of the supporting facts, as they relate both to the home and to the applicant's condition and requirements for care;
  - (c) an explanation of how the supporting facts justify the decision to withhold approval; and
  - (d) contact information for the Director. 2007, c. 8, s. 44 (9).

**Grounds / Motifs :**

1. The licensee had failed to comply with s. 44 (7) of the LTCHA whereby the licensee refused the application for applicant #002 for reasons other than provided for in the LTCHA.

This inspection had been initiated related to follow-up log #016067-18 for



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**Ordre(s) de l'inspecteur**

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Compliance Order (CO) #001. On an identified date, CO #001, made under s. 44 (7) of the LTCHA had been served to Seven Oaks:

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2. The home shall cease the practice of withholding an applicant's approval unless:
  - (a) the home lacks the physical facilities necessary to meet the applicant's care requirements;
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  - (c) circumstances exist which are provided for in the regulations as being a ground for withholding approval. 2007, c. 8, s. 44 (7).
3. The licensee shall immediately contact the appropriate placement coordinator at the Central East LHIN to request the most recent assessments for applicants #001 and #002 if the applicants are still choosing Seven Oaks.
4. The licensee shall accept applicant #001 and #002 unless as specified by this legislation.
5. Should the licensee withhold approval, the licensee must meet the requirements of s. 44 (9) of the LTCHA and provide a notice addressing:
  - (a) the ground or grounds on which the licensee is withholding approval;
  - (b) a detailed explanation of the supporting facts, as they relate both to the home and to the applicant's condition and requirements for care;
  - (c) an explanation of how the supporting facts justify the decision to withhold approval; and
  - (d) contact information for the Director. 2007, c. 8, s. 44 (9).

At the time of the inspection, applicant #001 had already been admitted to the home, while applicant #002 was still residing at another Long-Term Care (LTC) facility.

A review of the Central East Local Health Integration Network (CE LHIN)'s referral management document indicated applicant #002 was referred to Seven Oaks LTC for admission, on an identified date. A review of the home's letter of withholding approval of admission addressed to applicant #002 from the Administrator of Seven Oaks LTC included details on the resident's use of their assistive device and





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l'article 154 de la *Loi de 2007 sur les  
foyers de soins de longue durée*,  
L. O. 2007, chap. 8

concluded that the home cannot safely accommodate their use of the assistive device.

A telephone interview on an identified date and time with the Advocacy Centre for the Elderly (ACE) representative indicated that applicant #002 continued to place Seven Oaks as their LTC home of choice.

A telephone interview on an identified date and time with the CE LHIN Placement Coordinator, indicated applicant #002 was a previous resident of Seven Oaks LTC and had not been previously declined admission based on the use of their assistive device.

An interview with the Manager of Resident Services (MRS) on an identified date and time, acknowledged the above mentioned letter and indicated applicant #002 had been refused due to their use of the assistive device that the home's physical environment could not accommodate. The MRS stated the use of the assistive device poses a risk on the units where there are frail residents walking down the hallways, and storing it poses risk to staff giving care. When questioned by the inspector if there were residents living in the home residing in a room who currently utilize a similar assistive device, the MRS stated there were two, residents #001 and #003.

An interview with the Occupational Therapist (OT) on an identified date and time, indicated that the home no longer accepts applicants who use the identified assistive device due to the associated safety risks. When questioned by the inspector if the home had the physical facilities to accommodate independent use the identified assistive device, the OT indicated Seven Oaks was not a small home, the hallways and common areas were spacious, and that the whole home was big enough to accommodate current residents #001 and #003 who use their assistive device.

An interview with the Administrator on an identified date and time acknowledged the above mentioned letter to applicant #002. When asked by the inspector to speak to the criteria that the applicant did not meet for approval of admission, the Administrator indicated the main reason was the lack of physical facility necessary to meet applicant #002's care requirements. The Administrator indicated the applicant had an assistive device and that the issue was providing care safely considering the space in the room. The Administrator further indicated that upon review of the



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application of applicant #002, it was noted they had been involved in incidents at their current home while using their assistive device, and that it was a concern for Seven Oaks. At that point, the Administrator stated it was a risk issue and they had to mitigate the risk to ensure the safety and well-being of other residents at Seven Oaks, and to ensure that the home is a safe work place for the staff. The Administrator also stated they did not cite in the letter that applicant #002 had underlying health diagnoses that may have contributed to the home's decision.

The licensee had failed to demonstrate reasons provided for in the LTCHA, for withholding approval of admission to applicant #002.

2. The licensee had failed to ensure that when withholding approval for admission, the licensee shall give a written notice setting out the ground or grounds on which the licensee is withholding approval; a detailed explanation of the supporting facts, as they relate both to the home and to the applicant's condition and requirements for care; an explanation of how the supporting facts justify the decision to withhold approval; and contact information for the Director. 2007, c. 8, s. 44 (9).

This inspection had been initiated related to follow-up log #016067-18 for CO #001. On an identified date, CO #001, made under s. 44 (7) of the LTCHA had been served to Seven Oaks:

1. The licensee must be compliant with s. 44 (7) and s. 44 (9) of the LTCHA.
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  - (a) the home lacks the physical facilities necessary to meet the applicant's care requirements;
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  - (c) circumstances exist which are provided for in the regulations as being a ground for withholding approval. 2007, c. 8, s. 44 (7).
3. The licensee shall immediately contact the appropriate placement coordinator at the Central East LHIN to request the most recent assessments for applicants #001 and #002 if the applicants are still choosing Seven Oaks.
4. The licensee shall accept applicant #001 and #002 unless as specified by this



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legislation.

5. Should the licensee withhold approval, the licensee must meet the requirements of s. 44 (9) of the LTCHA and provide a notice addressing:

- (a) the ground or grounds on which the licensee is withholding approval;
- (b) a detailed explanation of the supporting facts, as they relate both to the home and to the applicant's condition and requirements for care;
- (c) an explanation of how the supporting facts justify the decision to withhold approval; and
- (d) contact information for the Director. 2007, c. 8, s. 44 (9).

At the time of the inspection, applicant #001 had already been admitted to the home, while applicant #002 was still residing at another LTC facility.

A review of the home's letter of withholding approval of admission addressed to applicant #002 from the Administrator of Seven Oaks LTC included details on the resident's use of their assistive device and concluded that the home cannot safely accommodate their use of the assistive device.

During separate interviews with the MRS and the Administrator, they both acknowledged that the letter did not include sufficient details as required, for withholding an approval of admission.

The letter did not provide a detailed explanation of the supporting facts, as they related both to the home and to the applicant's condition and requirements for care, and an explanation of how the supporting facts justify the decision to withhold.

The severity of this issue was determined to be a level 2 as there was potential for actual harm, as applicant #002 remains on the crisis list for Seven Oaks LTC. The scope was a level 1 as the risk of harm was related to one person. The home had a level 4 compliance history as they had on-going non-compliance with this section of the LTCHA that included: Compliance Order issued May 30, 2018 (#2018\_414110\_0008). (653)

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

**Vous devez vous conformer à cet ordre d'ici le :**

Dec 04, 2018(A1)



**Ministry of Health and  
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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, commercial courier 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

When service is made by registered mail, it is deemed to be made on the fifth day after the day of mailing, when service is made by a commercial courier it is deemed to be made on the second business day after the day the courier receives the document, 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:



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L. O. 2007, chap. 8

Health Services Appeal and Review Board and the Director

Attention Registrar  
Health Services Appeal and Review Board  
151 Bloor Street West, 9th Floor  
Toronto, ON M5S 1S4

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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L. O. 2007, chap. 8

**RENSEIGNEMENTS RELATIFS AUX RÉEXAMENS DE DÉCISION ET AUX  
APPELS**

PRENEZ AVIS :

Le/la titulaire de permis a le droit de faire une demande de réexamen par le directeur de cet ordre ou de ces ordres, et de demander que le directeur suspende cet ordre ou ces ordres conformément à l'article 163 de la Loi de 2007 sur les foyers de soins de longue durée.

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

La demande écrite doit comporter ce qui suit :

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

La demande de réexamen présentée par écrit doit être signifiée en personne, par courrier recommandé, par messagerie commerciale ou par télécopieur, au :

Directeur  
a/s du coordonnateur/de la coordonnatrice en matière d'appels  
Direction de l'inspection des foyers de soins de longue durée  
Ministère de la Santé et des Soins de longue durée  
1075, rue Bay, 11e étage  
Toronto ON M5S 2B1  
Télécopieur : 416-327-7603



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L. O. 2007, chap. 8

Quand la signification est faite par courrier recommandé, elle est réputée être faite le cinquième jour qui suit le jour de l'envoi, quand la signification est faite par messagerie commerciale, elle est réputée être faite le deuxième jour ouvrable après le jour où la messagerie reçoit le document, et lorsque la signification est faite par télécopieur, elle est réputée être faite le premier jour ouvrable qui suit le jour de l'envoi de la télécopie. Si un avis écrit de la décision du directeur n'est pas signifié au/à la titulaire de permis dans les 28 jours de la réception de la demande de réexamen présentée par le/la titulaire de permis, cet ordre ou ces ordres sont réputés être confirmés par le directeur, et le/la titulaire de permis est réputé(e) avoir reçu une copie de la décision en question à l'expiration de ce délai.

Le/la titulaire de permis a le droit d'interjeter appel devant la Commission d'appel et de révision des services de santé (CARSS) de la décision du directeur relative à une demande de réexamen d'un ordre ou des ordres d'un inspecteur ou d'une inspectrice conformément à l'article 164 de la Loi de 2007 sur les foyers de soins de longue durée. La CARSS est un tribunal autonome qui n'a pas de lien avec le ministère. Elle est créée par la loi pour examiner les questions relatives aux services de santé. Si le/la titulaire décide de faire une demande d'audience, il ou elle doit, dans les 28 jours de la signification de l'avis de la décision du directeur, donner par écrit un avis d'appel à la fois à :

la Commission d'appel et de révision des services de santé et au directeur

À l'attention du/de la registrateur(e)  
Commission d'appel et de révision  
des services de santé  
151, rue Bloor Ouest, 9e étage  
Toronto ON M5S 1S4

Directeur  
a/s du coordonnateur/de la coordonnatrice en matière  
d'appels  
Direction de l'inspection des foyers de soins de longue durée  
Ministère de la Santé et des Soins de longue durée  
1075, rue Bay, 11e étage  
Toronto ON M5S 2B1  
Télécopieur : 416-327-7603

À la réception de votre avis d'appel, la CARSS en accusera réception et fournira des instructions relatives au processus d'appel. Le/la titulaire de permis peut en savoir davantage sur la CARSS sur le site Web [www.hsarb.on.ca](http://www.hsarb.on.ca).

**Issued on this 13th day of November, 2018 (A1)**

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

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

Amended by ROMELA VILLASPIR (653) - (A1)



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

Central East Service Area Office