

Inspection Report under the Long-Term Care Homes Act, 2007 Ministère de la Santé et des Soins de longue durée

Rapport d'inspection prévue le Loi de 2007 les foyers de soins de longue

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

Ottawa Service Area Office 347 Preston St, 4th Floor OTTAWA, ON, K1S-3J4 Telephone: (613) 569-5602 Facsimile: (613) 569-9670 Bureau régional de services d'Ottawa 347, rue Preston, 4iém étage OTTAWA, ON, K1S-3J4 Téléphone: (613) 569-5602 Télécopieur: (613) 569-9670

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Date(s) of inspection/Date(s) de Inspection No/ No de l'inspection Type of Inspection/Genre l'inspection d'inspection Jan 18, 19, Feb 1, 2, 14, 2012 2012 028102 0006 Other Licensee/Titulaire de permis Glen Hill Terrace Christian Homes Inc. 200 Glen Hill Drive South, WHITBY, ON, L1N-9W2 Long-Term Care Home/Foyer de soins de longue durée STRATHAVEN LIFECARE CENTRE 264 King Street East, Bowmanville, ON, L1C-1P9 Name of Inspector(s)/Nom de l'inspecteur ou des inspecteurs WENDY BERRY (102) Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct an Other inspection.

During the course of the inspection, the inspector(s) spoke with the Administrator, Director of Care, Environmental Services Supervisor, Licensee's Executive Director, several registered and non registered Nursing staff, a Dietary Aide.

During the course of the inspection, the inspector(s) reviewed the proposed location of interim beds and followed up on 3 compliance orders related to the door security system. 3 compliance orders for doors have been issued again with a new compliance date. The onsite inspection occurred on January 18 and 19, 2012.

The following Inspection Protocols were used during this inspection: Safe and Secure Home

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON-RESPECT DES EXIGENCES



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Legend	Legendé
CO - Compliance Order	WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités
Homes Act, 2007 (LTCHA) was found. (A requirement under the	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.
The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.	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. 9. Doors in a home Specifically failed to comply with the following subsections:

- s. 9. (1) Every licensee of a long-term care home shall ensure that the following rules are complied with:
- 1. All doors leading to stairways and the outside of the home other than doors leading to secure outside areas that preclude exit by a resident, including balconies and terraces, or doors that residents do not have access to must be,
 - i. kept closed and locked,
 - ii.equipped with a door access control system that is kept on at all times, and
 - iii.equipped with an audible door alarm that allows calls to be cancelled only at the point of activation and,
 - A. is connected to the resident-staff communication and response system, or
- B. is connected to an audio visual enunciator that is connected to the nurses' station nearest to the door and has a manual reset switch at each door.
- 1.1. All doors leading to secure outside areas that preclude exit by a resident, including balconies and terraces, must be equipped with locks to restrict unsupervised access to those areas by residents.
- 2. All doors leading to non-residential areas must be equipped with locks to restrict unsupervised access to those areas by residents.
- 3. Any locks on bedrooms, washrooms, toilet or shower rooms must be designed and maintained so they can be readily released from the outside in an emergency.
- 4. All alarms for doors leading to the outside must be connected to a back-up power supply, unless the home is not served by a generator, in which case the staff of the home shall monitor the doors leading to the outside in accordance with the procedures set out in the home's emergency plans. O. Reg. 79/10, s. 9. (1).

Findings/Faits saillants:



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- 1. 10 of the resident accessible doors leading to stairways and the outside of the home were closed but not locked:
- 1 lower level door leading from the corridor to the adjoining retirement home was not locked.
- 5 lower level doors leading from the corridor into stairways were not locked.
- 4 1st floor doors leading from the corridor into stairways were not locked. [s. 9.(1).1.i.]
- 2. 11 of the resident accessible doors leading to stairways and the outside of the home were not equipped with a door access control system:
- 1 of the 2 double main entrance doors facing King Street East at the front of the long-term care home, 1st floor.
- 1 lower level door leading from the corridor to the adjoining retirement home.
- 5 lower level doors leading from the corridor into stairways.
- 4 1st floor doors leading from the corridor into stairways. [s.9.(1)1.ii.]
- 3. 9 of the resident accessible doors leading to stairways and the outside of the home were not equipped with an audible door alarm that allows calls to be cancelled only at the point of activation and is connected to the resident-staff communication and response system, or is connected to an audio visual enunciator that is connected to the nurses' station nearest to the door and has a manual reset switch at each door:
- 5 lower level doors leading from the corridor into stairways
- 1st floor door leading from the corridor into a stairway in the vicinity of the main entrance lobby (the door is equipped with a magnetic lock and a keypad)
- 1st floor double main entrance doors facing King Street East at the front of the long-term care home
- Some of the alarms that are provided on doors to stairways and the outside, including the lower level door to the retirement home are connected to an audio visual enunciator that is not connected to the nurses station nearest to the door. An audio visual enunciator for some of the doors is provided at a 1st floor reception desk within the main entrance lobby. [s.9.(1)1.iii.]
- 4. Not all resident accessible doors leading to stairways and the outside of the Long term care home were checked during this inspection.

Compliance orders 001, 002, 003 were previously issued during inspection # 2011 1022605 18May105135 and are being issued again with a new compliance date of April 01, 2012.

Additional Required Actions:

CO # - 001, 002, 003 will be served on the licensee. Refer to the "Order(s) of the Inspector".

WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 305. Construction, renovation, etc., of homes Specifically failed to comply with the following subsections:

- s. 305. (3) A licensee may not commence any of the following work without first receiving the approval of the Director:
- 1. Alterations, additions or renovations to the home.
- 2. Other work on the home or work on its equipment, if doing the work may significantly disturb or significantly inconvenience residents. O. Reg. 79/10, s. 305 (3).

Findings/Faits saillants:



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- 1. Work in the 1st floor lounge and adjoining main entrance corridor, reception and lobby area was commenced in December 2011, which resulted in the lounge being closed to resident use. The project was identified by management staff of the home to primarily consist of work to replace ceiling tiles, painting and replacement of some lighting within the reception/lobby entrance corridor and replacement of flooring and redecorating in the lounge.
- 2. On the inspection dates January 18 and 19, 2012, the lounge was in an unfinished state and continued to be closed to resident use. A number of ceiling tiles were missing in the corridor.
- 3. Plans or specifications relating to the work to be done and a work plan were not provided to the Director as required by O.reg. 79/10, s.305(4)

Work on the home which has significantly inconvenienced residents was commenced without first receiving the approval of the Director. [s. 305.(3)2]

WN #3: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 5. Every licensee of a long-term care home shall ensure that the home is a safe and secure environment for its residents. 2007, c. 8, s. 5.

Findings/Faits saillants:

- 1. During the inspection on January 17 and 18, 2012, the alarm system on the resident accessible lower level door between the long-term care home and the adjoining retirement home was observed to be set to bypass, causing the existing alarm for the door not to work.
- 2. The above identified door is kept closed but is not locked and it is not equipped with a door access control system.
- 3. Residents can leave the long term care home without being detected posing a potential safety risk to residents.

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 the alarm system on the resident accessible lower floor door leading into the retirement home remains on at all times, to be implemented voluntarily.

Issued on this 14th day of February, 2012

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



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

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

Public Copy/Copie du public

Name of Inspector (ID #) /

Nom de l'inspecteur (No) :

WENDY BERRY (102)

Inspection No. /

No de l'inspection :

2012_028102_0006

Type of Inspection /

Genre d'inspection:

Other

Date of Inspection /

Date de l'inspection :

Jan 18, 19, Feb 1, 2, 14, 2012

Licensee /

Titulaire de permis :

Glen Hill Terrace Christian Homes Inc.

200 Glen Hill Drive South, WHITBY, ON, L1N-9W2

LTC Home /

Foyer de SLD :

STRATHAVEN LIFECARE CENTRE

264 King Street East, Bowmanville, ON, L1C-1P9

Name of Administrator / Nom de l'administratrice

ou de l'administrateur :

PATRICK BROWN

To Glen Hill Terrace Christian Homes Inc., you are hereby required to comply with the following order(s) by the date(s) set out below:



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

Order # / Ordre no :

001

Order Type /

Genre d'ordre :

e d'ordre: Compliance Orders, s. 153. (1) (a)

Pursuant to / Aux termes de :

O.Reg 79/10, s. 9. (1) Every licensee of a long-term care home shall ensure that the following rules are complied with:

- 1. All doors leading to stairways and the outside of the home other than doors leading to secure outside areas that preclude exit by a resident, including balconies and terraces, or doors that residents do not have access to must be.
 - i. kept closed and locked,
 - ii.equipped with a door access control system that is kept on at all times, and
 - iii.equipped with an audible door alarm that allows calls to be cancelled only at the point of activation and,
 - A. is connected to the resident-staff communication and response system, or
- B. is connected to an audio visual enunciator that is connected to the nurses' station nearest to the door and has a manual reset switch at each door.
- 1.1. All doors leading to secure outside areas that preclude exit by a resident, including balconies and terraces, must be equipped with locks to restrict unsupervised access to those areas by residents.
- 2. All doors leading to non-residential areas must be equipped with locks to restrict unsupervised access to those areas by residents.
- 3. Any locks on bedrooms, washrooms, toilet or shower rooms must be designed and maintained so they can be readily released from the outside in an emergency.
- 4. All alarms for doors leading to the outside must be connected to a back-up power supply, unless the home is not served by a generator, in which case the staff of the home shall monitor the doors leading to the outside in accordance with the procedures set out in the home's emergency plans. O. Reg. 79/10, s. 9. (1).

Order / Ordre :

All doors leading to stairways and to the outside of the long-term care home that are accessible to residents shall be kept closed and locked. Locking devices must comply with all applicable safety and building codes.

Grounds / Motifs:

- 1. 10 resident accessible doors leading to stairways and the outside of the home were closed but not locked; including but not limited to:
 - •1 lower level door leading from the corridor to the adjoining retirement home was not locked.
 - •5 lower level doors leading from the corridor into stairways were not locked.
 - •4 1st floor doors leading from the corridor into stairways were not locked.
- 2. Not all doors leading to stairways and the outside of the Long term care home were checked during this inspection. [s.9.(1)1.i.]

This order was originally issued as CO # 001, inspection # 2011 102 2605 18May 105135, with a compliance date of December 01, 2011. (102)

This order must be complied with by /

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

Apr 01, 2012



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

Order # / Ordre no :

002

Order Type / Genre d'ordre :

Compliance Orders, s. 153. (1) (a)

Pursuant to / Aux termes de :

O.Reg 79/10, s. 9. (1) Every licensee of a long-term care home shall ensure that the following rules are complied with:

- 1. All doors leading to stairways and the outside of the home other than doors leading to secure outside areas that preclude exit by a resident, including balconies and terraces, or doors that residents do not have access to must be.
 - i. kept closed and locked.
 - ii.equipped with a door access control system that is kept on at all times, and
 - iii equipped with an audible door alarm that allows calls to be cancelled only at the point of activation and,
 - A. is connected to the resident-staff communication and response system, or
- B. is connected to an audio visual enunciator that is connected to the nurses' station nearest to the door and has a manual reset switch at each door.
- 1.1. All doors leading to secure outside areas that preclude exit by a resident, including balconies and terraces, must be equipped with locks to restrict unsupervised access to those areas by residents.
- 2. All doors leading to non-residential areas must be equipped with locks to restrict unsupervised access to those areas by residents.
- 3. Any locks on bedrooms, washrooms, toilet or shower rooms must be designed and maintained so they can be readily released from the outside in an emergency.
- 4. All alarms for doors leading to the outside must be connected to a back-up power supply, unless the home is not served by a generator, in which case the staff of the home shall monitor the doors leading to the outside in accordance with the procedures set out in the home's emergency plans. O. Reg. 79/10, s. 9. (1).

Order / Ordre :

All resident accessible doors leading to stairways and to the outside of the long-term care home are to be equipped with a door access control system that is to be kept on at all times.

Grounds / Motifs:

- 1. 11 resident accessible doors leading to stairways and to the outside of the home were not equipped with a door access control system:
- •1 of the 2 double main entrance doors facing King Street East at the front of the long-term care home, 1st floor. The door was equipped with a padlock on January 19, 2012, which is not a door access control system.
 - •1 lower level door leading from the corridor to the adjoining retirement home.
 - •5 lower level doors leading from the corridor into stairways.
 - •4 1st floor doors leading from the corridor into stairways.
- 2. Not all doors leading to stairways and the outside of the Long term care home were checked during this inspection. [s.9.(1)1.i.i]

This order was originally issued as CO # 002, inspection # 2011 102 2605 18May 105135, with a compliance date of December 01, 2011. (102)

This order must be complied with by /

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

Apr 01, 2012



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

Order#/ Ordre no:

003

Order Type / Genre d'ordre :

Compliance Orders, s. 153. (1) (a)

Pursuant to / Aux termes de :

O.Reg 79/10, s. 9. (1) Every licensee of a long-term care home shall ensure that the following rules are complied with:

- 1. All doors leading to stairways and the outside of the home other than doors leading to secure outside areas that preclude exit by a resident, including balconies and terraces, or doors that residents do not have access to must be.
 - i. kept closed and locked,
 - ii.equipped with a door access control system that is kept on at all times, and
 - iii.equipped with an audible door alarm that allows calls to be cancelled only at the point of activation and,
 - A. is connected to the resident-staff communication and response system, or
- B. is connected to an audio visual enunciator that is connected to the nurses' station nearest to the door and has a manual reset switch at each door.
- 1.1. All doors leading to secure outside areas that preclude exit by a resident, including balconies and terraces, must be equipped with locks to restrict unsupervised access to those areas by residents.
- 2. All doors leading to non-residential areas must be equipped with locks to restrict unsupervised access to those areas by residents.
- 3. Any locks on bedrooms, washrooms, toilet or shower rooms must be designed and maintained so they can be readily released from the outside in an emergency.
- 4. All alarms for doors leading to the outside must be connected to a back-up power supply, unless the home is not served by a generator, in which case the staff of the home shall monitor the doors leading to the outside in accordance with the procedures set out in the home's emergency plans. O. Reg. 79/10, s. 9. (1).

Order / Ordre:

All doors leading to stairways and to the outside of the long-term care home that are accessible to residents must be equipped with an audible door alarm that allows calls to be cancelled only at the point of activation and be connected to the resident-staff communication and response system, or be connected to an audio visual enunciator that is connected to the nurses' station nearest to the door and has a manual reset switch at each door.

Grounds / Motifs:



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

- 1. 9 of the observed resident accessible doors leading to stairways and the outside of the home were not equipped with an audible door alarm that allows calls to be cancelled only at the point of activation and is connected to the resident-staff communication and response system, or is connected to an audio visual enunciator that is connected to the nurses' station nearest to the door and has a manual reset switch at each door:
 - •5 lower level doors leading from the corridor into stairways
- •1st floor door leading from the corridor into a stairway in the vicinity of the main entrance lobby (the door is equipped with a magnetic lock and a keypad)
 - •1st floor double main entrance doors facing King Street East at the front of the long-term care home
- Some of the alarms that are provided on doors to stairways and the outside are connected to an audio visual enunciator that is not connected to the nurses station nearest to the door. An audio visual enunciator for some of the doors is provided at a 1st floor reception desk within the main entrance lobby, including the lower level door leading to the retirement home..
- 2. Not all doors leading to stairways and the outside of the Long term care home were checked during this inspection [s.9.(1)1.iii.]

This order was originally issued as CO # 003, inspection # 2011 102 2605 18May 105135, with a compliance date of December 01, 2011. (102)

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

Apr 01, 2012



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

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

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
55 St. Clair Avenue West
Suite 800, 8th Floor
Toronto, ON M4V 2Y2
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 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
55 St. Clair Avenue West
Suite 800, 8th Floor
Toronto, ON M4V 2Y2
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.



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

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
55, avenue St. Clair Ocuest
8e étage, bureau 800
Toronto (Ontario) M4V 2Y2
Télécopieur : 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.

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
55, avenue St. Clair Ouest
8e étage, bureau 800
Toronto (Ontario) M4V 2Y2
Télécopieur : 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 14th day of February, 2012

Signature of Inspector / Signature de l'inspecteur

Name of Inspector / Nom de l'inspecteur :

WENDY BERRY

Service Area Office /

Bureau régional de services :

Ottawa Service Area Office

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