



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

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

**Inspection Report under  
the Long-Term Care  
Homes Act, 2007**

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

**Health System Accountability and  
Performance Division  
Performance Improvement and  
Compliance Branch**

**Division de la responsabilisation et de la  
performance du système de santé  
Direction de l'amélioration de la  
performance et de la conformité**

Toronto Service Area Office  
5700 Yonge Street 5th Floor  
TORONTO ON M2M 4K5  
Telephone: (416) 325-9660  
Facsimile: (416) 327-4486

Bureau régional de services de  
Toronto  
5700 rue Yonge 5e étage  
TORONTO ON M2M 4K5  
Téléphone: (416) 325-9660  
Télécopieur: (416) 327-4486

## **Public Copy/Copie du public**

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<b>Report Date(s) / Date(s) du apport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / Registre no</b>	<b>Type of Inspection / Genre d'inspection</b>
May 4, 5, 2015	2015_377502_0005	T-1628-15	Complaint

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

DRS PAUL AND JOHN REKAI CENTRE  
345 SHERBOURNE STREET TORONTO ON M5A 2S3

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

WELLESLEY CENTRAL PLACE  
160 WELLESLEY STREET EAST TORONTO ON M4Y 1J2

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

JULIENNE NGONLOGA (502)

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

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

**This inspection was conducted on the following date(s): February 27, 2015.**

**During the course of the inspection, the inspector(s) spoke with the director of nursing services (DON), director of clinical services and education (DCS&E), resident and family service coordinator, food service manager (FSM), registered dietitian (RD), resident's substitution decision maker (SDM), the Administrator, and community care access centre (CCAC) co-ordinator.**

**The inspector also conducted a review of the resident clinical records, the home's records, and the correspondence between the home and the resident.**

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

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

**1 WN(s)**

**1 VPC(s)**

**1 CO(s)**

**0 DR(s)**

**0 WAO(s)**



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

Legend	Legendé
WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order	WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités
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).	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 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 has failed to comply with subsection 44 (7) of the LTCHA, whereby the licensee refused an applicant's admission without providing sufficient supporting facts to support the grounds provided as a reason to withhold the approval.

In 2010, applicant #001 was diagnosed with an identified medical condition and he/she was prescribed an identified diet.

On an identified date in 2011, applicant #001 applied and was accepted to the home's wait list for both a long stay bed and short stay respite with the above identified diet.

On an identified date in 2012, applicant #001 was admitted to the home for respite care.

On an identified date in 2014, applicant #001 was admitted for respite care and his/her 90-day stay was divided into multiple stays for three or four day's duration. During the stays, applicant #001's substitution decision maker (SDM) was providing meals related to the above mentioned diet to the home.

Applicant #001 was admitted to the home for respite care for an identified time period in 2014. During the admission the SDM was unable to provide the home with the prepared meal.

Correspondence on an identified date in 2014, the home withheld approval for admission for applicant #001 for the following reasons:

- home lacks the nursing expertise necessary to meet applicant #001 care needs related to his/her past medical history,
- recent hospitalizations, and
- unable to meet applicant #001's care needs.

Record review revealed that on an identified date in 2014, the home's registered dietitian (RD) assessed applicant #001 and estimated his/her daily nutritional requirement at 1275 -1550 calories (cal); 40g protein and 1200 millilitres (ml) fluids. The RD ordered an individualized diet for applicant #001. The RD assessment further states that the prescribed diet will provide adequate nutrients to maintain his/her nutrition and hydration status. On four occasions the RD assessed the effectiveness of the diet plan as follows:

- on a specified dated in 2014, applicant #001 has no discomfort.
- on a specified dated in 2014, applicant #001 continues to take nutritional supplement fairly and had no side effect or discomfort.
- on a specified dated in 2015, applicant #001 takes the nutritional supplement however, does not finish it.
- on a specified dated in 2015, applicant #001's SDM agrees to substitute the nutritional supplement with another one.

Interview with the DCS&E on February 27, 2015, revealed that applicant #001 had re-applied for long stay on an identified date in 2015, and the home had made the decision to withhold approval related to food and fluid intake. At that time the letter had not yet been issued to the applicant or to the Community Care Access Centre (CCAC), and the Director had not been contacted.

Interview with the administrator on March 25, 2015, revealed that the home has agreed

to reconsider applicant #001's application pending receipt of an identified assessment from the CCAC and consultation with the contracted food service provider.

Interview with an identified CCAC placement coordinator on an identified date in 2015, revealed that the applicant had been assessed by a relevant specialist, his/her diet had been upgraded, and a copy of the specialist report had been faxed to the home.

As a result of failing to support the requirement for withholding approval the licensee has also failed to meet the requirement for s. 44(7) as they were unable to demonstrate how the staff of the home lacked the nursing expertise to meet the applicant's care (diet) requirements. [s. 44. (7)]

2. The licensee has failed to comply with subsection 44 (9) (b) and 44 (9) (c) of the LTCHA, whereby the licensee withholds approval for admission, but did not provide in any of the written notices a detailed explanation of the supporting facts, as they relate both to the home and to the applicant's condition and requirements of care, and an explanation of how the supporting facts justify the decision to withhold approval.

Record review of the correspondences between the home and applicant #001, applicant #002, and applicant #003 on identified dates, the home withheld approval for admission for the identified applicants and stated the following reasons:

- unable to meet applicants #001, #002, and #003's care needs,
- home lacks the nursing expertise necessary to meet applicant #002's care needs
- home lacks the nursing expertise necessary to meet applicant #001's care needs related to his/her past medical history, and
- applicant #001 recent hospitalizations.

Interview with the DON confirmed that the written notices given to applicants #001, #002, and #003 did not include a detailed explanation of the supporting facts, as they relate both to the home and to the applicants' condition and requirements of care, and did not include an explanation of how the supporting facts justify the decision to withhold approval for admission to the home. [s. 44. (9)]



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***Additional Required Actions:***

***CO # - 001 will be served on the licensee. Refer to the "Order(s) of the Inspector".  
VPC - pursuant to the Long-Term Care Homes Act, 2007, S.O. 2007, c.8, s.152(2)  
the licensee is hereby requested to prepare a written plan of correction for  
achieving compliance - to ensure that the applicant's admission to the home is  
approved 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,***

***- to ensure that if the licensee withholds approval for admission, the licensee give  
to persons described in subsection (10) a written notice setting out, a detailed  
explanation of the supporting facts, as they relate both to the home and to the  
applicant's condition and requirements of care, and an explanation of how the  
supporting facts justify the decision to withhold approval., to be implemented  
voluntarily.***

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Issued on this 2nd day of June, 2015

**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  
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**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*

**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**

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

**Nom de l'inspecteur (No) :** JULIENNE NGONLOGA (502)

**Inspection No. /**

**No de l'inspection :** 2015\_377502\_0005

**Log No. /**

**Registre no:** T-1628-15

**Type of Inspection /**

**Genre**

Complaint

**d'inspection:**

**Report Date(s) /**

**Date(s) du Rapport :** May 4, 5, 2015

**Licensee /**

**Titulaire de permis :** DRS PAUL AND JOHN REKAI CENTRE  
345 SHERBOURNE STREET, TORONTO, ON,  
M5A-2S3

**LTC Home /**

**Foyer de SLD :** WELLESLEY CENTRAL PLACE  
160 WELLESLEY STREET EAST, TORONTO, ON,  
M4Y-1J2

**Name of Administrator /**

**Nom de l'administratrice**

**ou de l'administrateur :** Rod Cartagena

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To DRS PAUL AND JOHN REKAI CENTRE, you are hereby required to comply with the following order(s) by the date(s) set out below:





**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



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

**Ministère de la Santé et  
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**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**

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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*

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**Order # /**

**Ordre no :** 001

**Order Type /**

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

**Pursuant to / Aux termes de :**

LTCHA, 2007 S.O. 2007, c.8, 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;

(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).

**Order / Ordre :**

**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**

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de l'article 154 de la *Loi de 2007 sur les foyers  
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The licensee shall immediately contact the appropriate placement coordinator to request applicant #001's most current swallowing assessment information. The licensee will reconsider applicant #001's application utilizing this information and taking into consideration the legislative requirements. The home shall also 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.

Should the licensee withhold approval, the licensee must meet the requirements of s. 44 (9) (b) and s. 44 (9) (c) of the LTCHA and provide:

- (b) A written notice setting out, a detailed explanation of the supporting facts, as they relate both to the home and to the applicant's condition and requirements of care, and
- (c) An explanation of how the supporting facts justify the decision to withhold approval.

**Grounds / Motifs :**

1. The licensee has failed to comply with subsection 44 (7) of the LTCHA, whereby the licensee refused an applicant's admission without providing sufficient supporting facts to support the grounds provided as a reason to withhold the approval.

In 2010, applicant #001 was diagnosed with an identified medical condition and he/she was prescribed an identified diet.

On an identified date in 2011, applicant #001 applied and was accepted to the home's wait list for both long stay bed and short term respite with the above identified diet.

On an identified date in 2012, applicant #001 was admitted to the home for respite care.

On an identified date in 2014, applicant #001 was admitted for respite care and his/her 90-day stay was divided into multiple stays for three or four day's duration. During the stays, applicant #001's substitution decision maker (SDM)

was providing meals related to the above mention diet to the home.

Applicant #001 was admitted to the home for respite care for an identified time period in 2014. During the the SDM was unable to provide the home with the prepared meal.

Correspondence on an identified date in 2014, the home withheld approval for admission for applicant #001 for the following reasons:

- home lacks the nursing expertise necessary to meet applicant #001's care needs related to his/her past medical history,
- recent hospitalizations, and
- unable to meet applicant #001's care needs.

Record review revealed that on an identified date in 2014, the home's registered dietitian (RD) assessed applicant #001 and estimated his/her daily nutritional requirement at 1275-1550 calories (cal); 40g protein and 1200 millilitres (ml) fluids. The RD ordered an individualized diet for applicant #001. The RD assessment further states that the prescribed diet will provide adequate nutrients to maintain his/her nutrition and hydration status. On four occasions the RD assessed the effectiveness of the diet plan as follows:

- on a specified dated in 2014, applicant #001 has no discomfort.
- on a specified dated in 2014, applicant #001 continues to take the nutritional supplement fairly and had no side effect or discomfort.
- on a specified dated in 2015, applicant #001 takes the nutritional supplement however, does not finish it.
- on a specified dated in 2015, applicant #001's SDM agrees to substitute the nutritional supplement with another one.

Interview with the DCS&E on February 27, 2015, revealed that applicant #001 had re-applied for long stay on an identified date in 2015, and Wellesley Central Place had made the decision to withhold approval related to food and fluid intake. At that time the letter had not yet been issued to the applicant or to the Community Care Access Centre (CCAC), and the Director had not been contacted.

Interview with the administrator on March 25, 2015, revealed that the home has agreed to reconsider applicant #001's application pending receipt of an identified assessment from the CCAC and consultation with the contracted food service



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**Ministère de la Santé et  
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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*

provider.

Interview with an identified CCAC placement coordinator an identified date in 2015, revealed that applicant #001 had been assessed by a relevant specialist, his/her diet had been upgraded, and a copy of the specialist report had been faxed to the home.

As a result of failing to support the requirement for withholding approval the licensee has also failed to meet the requirement for s. 44(7) as they were unable to demonstrate how the staff of the home lacked the nursing expertise to meet the applicant's care (diet) requirements. (502)

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

**Vous devez vous conformer à cet ordre d'ici le : May 22, 2015**



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



**Ministry of Health and  
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**Order(s) of the Inspector**

Pursuant to section 153 and/or  
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**Ministère de la Santé et  
des Soins de longue durée**

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

Aux termes de l'article 153 et/ou  
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When service is made by registered mail, it is deemed to be made on the fifth day after the day of mailing and when service is made by fax, it is deemed to be made on the first business day after the day the fax is sent. If the Licensee is not served with written notice of the Director's decision within 28 days of receipt of the Licensee's request for review, this(these) Order(s) is(are) deemed to be confirmed by the Director and the Licensee is deemed to have been served with a copy of that decision on the expiry of the 28 day period.

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

Health Services Appeal and Review Board and the Director

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

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

Upon receipt, the HSARB will acknowledge your notice of appeal and will provide instructions regarding the appeal process. The Licensee may learn more about the HSARB on the website [www.hsarb.on.ca](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  
Direction de l'amélioration de la performance et de la conformité  
Ministère de la Santé et des Soins de longue durée  
1075, rue Bay, 11<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.





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

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

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

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

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

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

**Issued on this 4th day of May, 2015**

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

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

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