



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

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

**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

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

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

Bureau régional de services d'Ottawa  
347, rue Preston, 4<sup>ème</sup> étage  
OTTAWA, ON, K1S-3J4  
Téléphone: (613) 569-5602  
Télécopieur: (613) 569-9670

**Public Copy/Copie du public**

<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>
Nov 23, 2012	2012_195166_0011	O-002352- 12	Complaint

**Licensee/Titulaire de permis**

**INA GRAFTON GAGE HOME OF TORONTO  
40 Bell Estate Road, SCARBOROUGH, ON, M1L-0E2**

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

**INA GRAFTON GAGE HOME  
40 Bell Estate Road, SCARBOROUGH, ON, M1L-0E2**

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

**CAROLINE TOMPKINS (166)**

**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): November 13, 15 2012

During the course of the inspection, the inspector(s) spoke with the Executive Director, the Director of Care, the Executive Assistant, the licensee's Consultant and the licensee's Bookkeeper.

During the course of the inspection, the inspector(s) reviewed the financial files including the resident charges and the trust account authorization agreements for five identified residents and the account summary of the Ina Grafton Trust from July 1 2012 to November 14 2012.

The following Inspection Protocols were used during this inspection:  
Prevention of Abuse, Neglect and Retaliation

#### Trust Accounts

Findings of Non-Compliance were found during this inspection.

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#### NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

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

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

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

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

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

**WN #1: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 19. Duty to protect**

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

**s. 19. (1) Every licensee of a long-term care home shall protect residents from abuse by anyone and shall ensure that residents are not neglected by the licensee or staff. 2007, c. 8, s. 19 (1).**

**Findings/Faits saillants :**

The licensee failed to protect the residents from financial abuse by the misuse of the residents' trust account funds.

The Ina Grafton Trust summary dated July 1/12 - November 14 /12 identifies a transfer of funds from the trust account to the licensee's account. July 11/12 a transfer in the amount of \$30,000.00 and on July 12/12 another transfer in the amount of \$7,000.00.

The transfer of funds from the residents' trust account was authorized by the Board Chair, and was used to support payroll for staff at the home. These monies were transferred back to the Ina Grafton Trust on July 23/12.

There is no evidence that authorization to transfer funds from the trust account was given by any of the residents who have money in the trust account fund.[s.19.(1)]



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***Additional Required Actions:***

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

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**WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 241. Trust accounts**



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

**s. 241. (4) No licensee shall,**

(a) hold more than \$5,000 in a trust account for any resident at any time; O. Reg. 79/10, s. 241 (4).

(b) commingle resident funds held in trust with any other funds held by the licensee; or O. Reg. 79/10, s. 241 (4).

(c) charge a resident, or a person acting on behalf of a resident, a transaction fee for withdrawals, deposits, or anything else related to money held in trust. O. Reg. 79/10, s. 241 (4).

**s. 241. (5) Every licensee shall establish a written policy and procedures for the management of resident trust accounts and the petty cash trust money, which must include,**

(a) a system to record the written authorizations required under subsection (8); and O. Reg. 79/10, s. 241 (5).

(b) the hours when the resident, or the person acting on behalf of the resident, can make deposits to or withdrawals from the resident's funds in a trust account and make withdrawals from the petty cash trust money. O. Reg. 79/10, s. 241 (5).

**s. 241. (6) The licensee shall provide a copy of the written policy and procedures to every resident and person acting on behalf of a resident who asks to have money deposited into a trust account. O. Reg. 79/10, s. 241 (6).**

**s. 241. (10) The licensee shall have every trust account established under subsection (1) audited annually,**

(a) by a public accountant licensed under the Public Accounting Act, 2004; or O. Reg. 79/10, s. 241 (10).

(b) in the case of a municipal home or a joint home approved under Part VIII of the Act, by the municipal auditor who audits the books of account and ledgers of the home. O. Reg. 79/10, s. 241 (10).

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**Findings/Faits saillants :**



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The licensee failed to follow the legislative requirement which prohibits the charging of a transaction fee from residents' funds held in trust.

Review of the trust account statement dated July 1 2012 to November 14 2012, reports that a service charge was debited to the trust account monthly. [r.241.(4)(c)]

The licensee failed to establish a written policy and procedures for the management of resident trust accounts and petty cash trust money.

Interview with Administrator, the Director of Care and the Bookkeeper confirms that the licensee does not have policies and procedures for the management of the trust accounts and the petty cash trust money.[r.241.(5)(a)(b)]

The licensee failed to provide a copy of the written policy and procedures to every resident and person acting on behalf of a resident who asks to have money deposited into a trust account.

Interview with Administrator, the Director of Care and the Bookkeeper confirms that the licensee does not have policies and procedures for the management of the trust accounts and the petty cash trust money and therefore has no policies to provide to every resident and person acting on behalf of a resident who asks to have money deposited into a trust account.[r.241.(6)]

The licensee failed to have every trust account audited annually.

Documentation and interview with the Administrator confirms that the Ina Grafton trust account has not been audited since 2010.[r.241.(10)(a)]

***Additional Required Actions:***

***CO # - 002, 003, 004 will be served on the licensee. Refer to the "Order(s) of the Inspector".***

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Ministère de la Santé et des  
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Rapport d'inspection sous la  
Loi de 2007 sur les foyers de  
soins de longue durée

Issued on this 26th day of November, 2012

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



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**

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

**Nom de l'inspecteur (No) :** CAROLINE TOMPKINS (166)

**Inspection No. /**

**No de l'inspection :** 2012\_195166\_0011

**Log No. /**

**Registre no:** O-002352-12

**Type of Inspection /**

**Genre d'inspection:** Complaint

**Report Date(s) /**

**Date(s) du Rapport :** Nov 23, 2012

**Licensee /**

**Titulaire de permis :** INA GRAFTON GAGE HOME OF TORONTO  
40 Bell Estate Road, SCARBOROUGH, ON, M1L-0E2

**LTC Home /**

**Foyer de SLD :** INA GRAFTON GAGE HOME  
40 Bell Estate Road, SCARBOROUGH, ON, M1L-0E2

**Name of Administrator /**

**Nom de l'administratrice  
ou de l'administrateur :**

SARA ROONEY *Denise Bedard-Elrigde*

To INA GRAFTON GAGE HOME OF TORONTO, you are hereby required to comply  
with the following order(s) by the date(s) set out below:



Ministry of Health and  
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Ministère de la Santé et  
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Pursuant to section 153 and/or  
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**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

**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. 19. (1) Every licensee of a long-term care home shall protect residents from abuse by anyone and shall ensure that residents are not neglected by the licensee or staff. 2007, c. 8, s. 19 (1).

**Order / Ordre :**

The licensee , specifically, the Board of Directors shall ensure that the residents' trust account at Ina Grafton Gage Home is protected. The Board of Directors is to be provided with education in regards to residents' trust accounts in accordance with legislative requirements, outlined in LTCHA, 2007- Ontario Regulation 79/10 s. 241. The Board will confirm to the MOHLTC completion of the education and that procedures are in place to ensure that residents' trust accounts are managed in accordance with the legislative requirements.

**Grounds / Motifs :**

1. The Ina Grafton Trust summary dated July 1/12 - November 14 /12 identifies a transfer of funds from the trust account to the licensee's account.

July 11/12 a transfer in the amount of \$30,000.00 and on July 12/12 another transfer in the amount of \$7,000.00.

The transfer of funds from the residents' trust account was authorized by the Board Chair, and was used to support payroll for staff at the home. These monies were transferred back to the Ina Grafton Trust on July 23/12.

There is no evidence that authorization to transfer funds from the trust account was given by any of the residents who have money in the trust account fund.account. (166)

**This order must be complied with /**

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

Dee 21, 2012 February 28, 13



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

Pursuant to section 153 and/or  
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de l'article 154 de la *Loi de 2007 sur les foyers  
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**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. 241. (10) The licensee shall have every trust account established under subsection (1) audited annually,

- (a) by a public accountant licensed under the Public Accounting Act, 2004; or
- (b) in the case of a municipal home or a joint home approved under Part VIII of the Act, by the municipal auditor who audits the books of account and ledgers of the home. O. Reg. 79/10, s. 241 (10).

**Order / Ordre :**

The licensee ensure that an audit of the residents' trust account is completed annually.

**Grounds / Motifs :**

1. Documentation and interview with the Administrator confirms that the Ina Grafton trust account has not been audited since 2010. (166)

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

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

Dec 21, 2012 - February 28, 2013



**Ministry of Health and  
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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

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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

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**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. 241. (5) Every licensee shall establish a written policy and procedures for the management of resident trust accounts and the petty cash trust money, which must include,

- (a) a system to record the written authorizations required under subsection (8); and
- (b) the hours when the resident, or the person acting on behalf of the resident, can make deposits to or withdrawals from the resident's funds in a trust account and make withdrawals from the petty cash trust money. O. Reg. 79/10, s. 241 (5).

**Order / Ordre :**

The licensee shall establish written policies and procedures for the management of resident trust accounts and the petty cash trust money. The licensee must communicate with the residents , who have money in trust, and keep the residents apprised of the policies and procedures that are being developed.

**Grounds / Motifs :**

1. Interview with Administrator, the Director of Care and the Bookkeeper confirms that the licensee does not have policies and procedures for the management of the trust accounts and the petty cash trust money. (166)

**This order must be complied with /**

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

*c1  
Jan 07, 2013 February 28 13*



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**Order(s) of the Inspector**

Pursuant to section 153 and/or  
section 154 of the *Long-Term Care  
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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  
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**Order # /**

**Ordre no :** 004

**Order Type /**

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

**Pursuant to / Aux termes de :**

O.Reg 79/10, s. 241. (4) No licensee shall,  
(a) hold more than \$5,000 in a trust account for any resident at any time;  
(b) commingle resident funds held in trust with any other funds held by the  
licensee; or  
(c) charge a resident, or a person acting on behalf of a resident, a transaction fee  
for withdrawals, deposits, or anything else related to money held in trust. O. Reg.  
79/10, s. 241 (4).

**Order / Ordre :**

The licensee shall payback to the residents' trust account, money charged for  
the service charges and refrain from debiting any service charges to the  
residents' trust account.

**Grounds / Motifs :**

1. Review of the trust account statement dated July 1 2012 to November 14  
2012 , establishes that a monthly service charge is debited to the trust account  
monthly. (166)

**This order must be complied with /**

**Vous devez vous conformer à cet ordre d'ici le : Nov 26, 2012**



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Pursuant to section 153 and/or  
section 154 of the *Long-Term Care  
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**REVIEW/APPEAL INFORMATION**

**TAKE NOTICE:**

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

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

The written request for review must include,

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

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

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



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

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

Health Services Appeal and Review Board and the Director

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

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

Upon receipt, the HSARB will acknowledge your notice of appeal and will provide instructions regarding the appeal process. The Licensee may learn more about the HSARB on the website [www.hsarb.on.ca](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, 11e 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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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.hsarbo.ca](http://www.hsarbo.ca).

**Issued on this 23rd day of November, 2012**

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

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

CAROLINE TOMPKINS

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