

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

Rapport d'inspection en vertu  
de la Loi de 2007 sur les  
foyers de soins de longue  
durée

Long-Term Care Operations Division  
Long-Term Care Inspections Branch

Division des opérations relatives aux  
soins de longue durée  
Inspection de soins de longue durée

Central West Service Area Office  
1st Floor, 609 Kumpf Drive  
WATERLOO ON N2V 1K8  
Telephone: (888) 432-7901  
Facsimile: (519) 885-2015

Bureau régional de services de Centre  
Ouest  
1e étage, 609 rue Kumpf  
WATERLOO ON N2V 1K8  
Téléphone: (888) 432-7901  
Télécopieur: (519) 885-2015

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

Report Date(s)/ Date(s) du Rapport	Inspection No/ No de l'inspection	Log #/ No de registre	Type of Inspection / Genre d'inspection
Apr 27, 2022	2022_792659_0005 (A1)	002043-22, 002322-22	Complaint

**Licensee/Titulaire de permis**

Corporation of the County of Bruce  
30 Park Street Walkerton ON N0G 2V0

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

Gateway Haven Long Term Care Home  
671 Frank Street P.O. Box 10 Warton ON N0H 2T0

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

Amended by JANETM EVANS (659) - (A1)

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

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**This public inspection report has been revised to reflect an amendment in relation to homes request to extend the compliance due date. The Complaint inspection, #2022\_792659\_0005 was completed on March 21-25, 28-31 and April 1, 2022.**

**A copy of the revised report is attached.**

**Issued on this 27th day of April, 2022 (A1)**

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

**Original report signed by the inspector.**

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671 Frank Street P.O. Box 10 Warton ON N0H 2T0

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

Amended by JANETM EVANS (659) - (A1)

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

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

This inspection was conducted on the following date(s): March 21-25, 28-31 and April 1, 2022.

The following intakes were completed for this inspection:

**Inspection Report under  
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**Log #002322-22\ Complaint related to an allegation of refusing admission to the home.**

**Log #002043-22\ Follow up regarding response to a request for admission.**

**This inspection was completed concurrently with Follow up inspection #2022\_792659\_0006.**

**During the course of the inspection, the inspector(s) spoke with the Administrator, Director of Nursing Care (DNC), Assistant Director of Nursing Care (ADNC), Clinical Coordinator, Registered Nurses (RN), Registered Practical Nurses (RPN), Personal Support Workers, Director of Clinical Services Grey Bruce County, Acting DOC Brucelea Haven, Director of Home and Community and Support Services (HCSS), HCCSS Placement Manager, Hospital Unit Manager, Hospital Social Worker (SW), Healthcare Aid (HSA), Administrative Supervisor, screeners, housekeepers, residents and family members.**

**Observations were completed of Infection Prevention and control practices, dining and snack service, staff to resident interactions and general care and cleanliness. A review of records was completed including but not limited to discharge notes, meeting summary or notes, assessments, plans of care, consultant notes, application for admission, and refusal of admission.**

**The following Inspection Protocols were used during this inspection:**

**Admission and Discharge  
Sufficient Staffing**

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**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)**

**The following previously issued Order(s) were found to be in compliance at the time of this inspection:**

**Les Ordre(s) suivants émis antérieurement ont été trouvés en conformité lors de cette inspection:**

<b>REQUIREMENT/ EXIGENCE</b>	<b>TYPE OF ACTION/ GENRE DE MESURE</b>	<b>INSPECTION # / NO DE L'INSPECTION</b>	<b>INSPECTOR ID #/ NO DE L'INSPECTEUR</b>
O.Reg 79/10 s. 162. (3)	CO #002	2021_977754_0032	659

**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).**

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foyers de soins de longue  
durée****Findings/Faits saillants :**

The licensee failed to accept resident #001's application for admission, in the absence of circumstances existing which were provided for in the regulations as being a ground for withholding approval, which included:

- (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).

Specifically, the licensee has failed to review the assessments and information that was required to have been taken into account, under subsection 43 (6), and approve applicant #001's application for admission to the home, unless circumstances existed which were provided for in the regulations as being a ground for withholding approval.

Applicant #001 had been a prior resident of the home.

On a specific date, applicant #001 was transferred to hospital for assessment. They were transferred to another hospital at a later date and admitted for further assessment and treatment.

A few months later, the applicant was discharged from the home and remained in hospital. A month later, they were assigned to an alternative level of care (ALC) bed.

An application for priority readmission was submitted to the home for applicant #001 on an identified date. A response letter to applicant #001's Substitute Decision Maker (SDM) stated the home was unable to ensure the appropriate staff compliment required to provide the applicant with their activities of daily living, therefore they were unable to accept their application at this time.

Applicant #001's family member stated that they wished the applicant to return to Gateway Haven.

The manager of the hospital unit where the applicant was currently residing,

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durée**

stated treatment and interventions had been successful and the applicant was deemed to require an alternative level of care. They had developed a transitional plan to support the applicant's return to the home and Behaviour Support Ontario (BSO) was available to assist with this transition.

The Administrator acknowledged the home had the physical facilities necessary and the nursing expertise necessary to meet the applicant's care requirements. They said they lacked staff and could not provide 1:1 care to the applicant. Their decision to decline the applicant's priority readmission related to their specific care requirements.

The licensee failed to accept resident #001's application for admission, in the absence of circumstances existing which were provided for in the regulations as being a ground for withholding approval. This resulted in applicant #001's having to remain in hospital instead of returning to their former home.

Sources: HCCSS (SW LHIN) client notes, BSO assessments, progress notes, January 28, 2022 letter to POA declining application, interviews with Administrator, Director of HCCSS, HCCSS Placement Manager, Hospital Unit Manager, and family. [s. 44. (7) (c)]

***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 / Le/les ordre(s) suivant(s) ont été modifiés: CO# 001**

**Issued on this 27th day of April, 2022 (A1)**

**Inspection Report under  
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de la Loi de 2007 sur les  
foyers de soins de longue  
durée**

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

**Original report signed by the inspector.**

**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  
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Long-Term Care Operations Division  
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soins de longue durée  
Inspection de soins de longue durée

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**Name of Inspector (ID #) /  
Nom de l'inspecteur (No) :** Amended by JANETM EVANS (659) - (A1)

**Inspection No. /  
No de l'inspection :** 2022\_792659\_0005 (A1)

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

**Log No. /  
No de registre :** 002043-22, 002322-22 (A1)

**Type of Inspection /  
Genre d'inspection :** Complaint

**Report Date(s) /  
Date(s) du Rapport :** Apr 27, 2022(A1)

**Licensee /  
Titulaire de permis :** Corporation of the County of Bruce  
30 Park Street, Walkerton, ON, N0G-2V0

**LTC Home /  
Foyer de SLD :** Gateway Haven Long Term Care Home  
671 Frank Street, P.O. Box 10, Warton, ON,  
N0H-2T0

**Name of Administrator /  
Nom de l'administratrice  
ou de l'administrateur :** Megan Garland

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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

To Corporation of the County of Bruce, 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

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

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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

**Order # /**

**No d'ordre:** 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**

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

The licensee must comply with s. 44 (7).

Specifically, the licensee must:

- 1) Immediately contact the appropriate placement coordinator to request applicant #001's most current assessment information.
- 2) Reconsider applicant #001's application utilizing this information and taking into consideration the legislative requirements.
- 3) The home shall also cease the practice of withholding an applicant's approval unless - the home lacks the physical facilities necessary to meet the applicant's care requirements, the staff of the home lack the nursing expertise to meet the applicant's care requirements, or - circumstances exist which are provided for in the regulations as being grounds for withholding approval.
- 4) Should the Licensee withhold approval, the Licensee must meet the requirements of s. 51(9) of the FLTCA, 2021 and provide: (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.

**Grounds / Motifs :**

1. The licensee failed to accept resident #001's application for admission, in the absence of circumstances existing which were provided for in the regulations as being a ground for withholding approval, which included:

- (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).

Specifically, the licensee has failed to review the assessments and information that was required to have been taken into account, under subsection 43 (6), and approve applicant #001's application for admission to the home, unless circumstances existed which were provided for in the regulations as being a ground for withholding

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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

approval.

Applicant #001 had been a prior resident of the home.

On a specific date, applicant #001 was transferred to hospital for assessment. They were transferred to another hospital at a later date and admitted for further assessment and treatment.

A few months later, the applicant was discharged from the home and remained in hospital. A month later, they were assigned to an alternative level of care (ALC) bed.

An application for priority readmission was submitted to the home for applicant #001 on an identified date. A response letter to applicant #001's Substitute Decision Maker (SDM) stated the home was unable to ensure the appropriate staff compliment required to provide the applicant with their activities of daily living, therefore they were unable to accept their application at this time.

Applicant #001's family member stated that they wished the applicant to return to Gateway Haven.

The manager of hospital unit where the applicant was currently residing, stated treatment and interventions had been successful and the applicant was deemed to require an alternative level of care. They had developed a transitional plan to support the applicant's return to the home and Behaviour Support Ontario (BSO) was available to assist with this transition.

The Administrator acknowledged the home had the physical facilities necessary and the nursing expertise necessary to meet the applicant's care requirements. They said they lacked staff and could not provide 1:1 care to the applicant. Their decision to decline the applicant's priority readmission related to their specific care requirements.

The licensee failed to accept resident #001's application for admission, in the absence of circumstances existing which were provided for in the regulations as being a ground for withholding approval. This resulted in applicant #001's having to remain in hospital instead of returning to their former home.

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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

Sources: HCCSS (SW LHIN) client notes, BSO assessments, progress notes,  
January 28, 2022 letter to POA declining application, interviews with Administrator,  
Director of HCCSS, HCCSS Placement Manager, Hospital Unit Manager, and family.  
[s. 44. (7) (c)]

An order was made taking the following into consideration:

Severity: There was harm to applicant #001's well being with the applicant having to  
remain in hospital instead of return to their former home.

Scope: This was an isolated incident.

Compliance history: There was previous non compliance to different subsections in  
the past 36 months.

(659)

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

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

May 20, 2022(A1)

**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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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 Long-Term Care  
438 University Avenue, 8th Floor  
Toronto, ON M7A 1N3  
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:

**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 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 Long-Term Care  
438 University Avenue, 8th Floor  
Toronto, ON M7A 1N3  
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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section 154 of the *Long-Term  
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2007, c. 8

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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 des Soins de longue durée  
438, rue University, 8<sup>e</sup> étage  
Toronto ON M7A 1N3  
Télécopieur : 416-327-7603

**Order(s) of the Inspector**

Pursuant to section 153 and/or  
section 154 of the *Long-Term  
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l'article 154 de la *Loi de 2007 sur les  
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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 des Soins de longue durée  
438, rue University, 8e étage  
Toronto ON M7A 1N3  
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 27th day of April, 2022 (A1)**

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

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

Amended by JANETM EVANS (659) - (A1)

**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

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

Central West Service Area Office