

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

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 Sudbury Service Area Office 159 Cedar Street Suite 403 SUDBURY ON P3E 6A5 Telephone: (705) 564-3130 Facsimile: (705) 564-3133 Bureau régional de services de Sudbury 159 rue Cedar Bureau 403 SUDBURY ON P3E 6A5 Téléphone: (705) 564-3130 Télécopieur: (705) 564-3133

Public Copy/Copie du public

Report Date(s) /
Date(s) du apport

Inspection No / No de l'inspection

Log # / Registre no Type of Inspection / Genre d'inspection

May 1, 2015

2014_332575_0013

S-000314-14

Complaint

Licensee/Titulaire de permis

MANITOUWADGE GENERAL HOSPITAL

1 HEALTH CARE CRESCENT MANITOUWADGE ON POT 2CO

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

MANITOUWADGE GENERAL HOSPITAL

1 HEALTH CARE CRESCENT MANITOUWADGE ON POT 2CO

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

LINDSAY DYRDA (575)

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): July 29, 2014. Additional information was collected on July 31, August 8, September 2, December 16, 2014 and January 27, 2015 through a request to the licensee.

During the course of the inspection, the inspector(s) spoke with the Administrator (CEO), Director of Care, Finance staff, a Family Member and the Resident.

The inspector(s) also conducted a tour of the home, reviewed relevant health care records, and consulted with staff of the Health System Accountability and Performance Division responsible for rate reductions.

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

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

- 2 WN(s)
- 0 VPC(s)
- 1 CO(s)
- 0 DR(s)
- 0 WAO(s)



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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 O.Reg 79/10, s. 253. Reduction in basic accommodation charge

Findings/Faits saillants:

1. As outlined in section 253 (4) and section 253 (5) of O.Reg 79/10, of the Long Term Care Homes Act (LTCHA), 2007, where a long-stay resident applies to the Director for a reduction in basic accommodation, homes are required to verify that all parts of the application are provided by the resident, the application is submitted in a form and manner acceptable to the Director, ensure that the information is recorded correctly and ensure that an application for a reduced amount payable is not submitted that the



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licensee knows, ought to know or reasonably suspects to be false or incomplete.

The licensee failed to ensure resident #001's applications were completed and submitted accordingly.

On July 29, 2014 inspector #575 toured the home, interviewed staff, reviewed resident #001's health care record, and collected relevant documents.

The Community Care Access Centre (CCAC) Long-Term Care (LTC) application for resident #001 stated that the applicant requested basic accommodation. The application indicated that a rate reduction would be required and an application would need to be completed upon admission (*Note: a rate reduction is effective from July 1 to June 30 of the following year).

According to the documents provided by the home, the resident completed an application for a reduction in LTC home accommodation fees; an additional form was filled out (no date) for resident #001 for a resident without a Notice of Assessment (NOA), however the NOA was available. The form was not signed and the date of birth was crossed out. Additionally, two different forms were reviewed by the inspector and were not completed as required.

Then, approximately six months later, the home applied for a Director's Discretion for an adjustment to a rate reduction start date. The inspector reviewed the notice of the Director's approval which stated the start term for the rate reduction and that the current rate reduction would end by June 30. According to this letter, the rate reduction should have been retroactive to the date specified by the Director, however the inspector noted that for a period of approximately three months, the resident was charged their original rate instead of the rate reduction.

For the next rate reduction period, no application for reduction in LTC home basic accommodation was completed or submitted by the home. A staff member confirmed to the inspector that a rate reduction was not submitted for this period. During this period, the resident was charged the full accommodation amount.

During an interview, the resident's substitute decision-maker (SDM) stated that no rate reduction or other forms were filled out because a staff member told them that everything was electronically filed, so the SDM stated that they assumed that they did not have to apply for rate reduction and no staff advised them of any other forms.



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In a document provided to the inspector by the home, the inspector noted that the resident and the SDM met with the home regarding rate reduction. The home then met with staff and directed that all efforts be made to determine any eligible rate reduction for which the resident might qualify.

For the next rate reduction period, no application for reduction in LTC home basic accommodation was completed or submitted by the home. During this period, the resident was charged the full accommodation amount.

Approximately three years after admission, the resident was given a letter by the home that indicated that the resident had an outstanding balance and that if payments were not made collections actions would be taken.

For the next rate reduction period, an application for reduction in LTC home basic accommodation was completed. The form used total income instead of net income and was not signed by the resident or the SDM (application incorrect and incomplete). A staff member indicated that the resident did not qualify for a rate reduction during this period.

In a letter addressed to the home, the SDM indicated that they had requested a rate reduction on many occasions and they did receive a reduction at one year, however, the rate continued to increase.

In response to the above letter, the home indicated that the rate calculations are submitted on the government web site based on the financial information provided by the resident and the approval of the rate reduction is determined by this process. The response letter also indicated that rate reductions are legislated under the Nursing Home Act (NHA), the Long-Term Care Homes Act, 2007 (LTCHA) and Ontario Regulation 79/10. The letter further referenced the NHA....and indicated that the home is doing everything possible to assist the resident in receiving a rate reduction.

Approximately one month after the above response letter, another letter addressed to the resident and SDM (from the home) indicated that approval for rate reduction was granted (after revising the resident's income). The rate was then retroactive to the start of the rate reduction period.

Then, approximately five months later, a staff member told the inspector that they had recalculated the resident's rate using an additional form (not used previously) and the rate



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calculator identified a different rate, lower than what the resident was being charged. Therefore, the home suspended the resident's payments until the home could verify the correct payment amount.

During an interview, the CEO told the inspector that upon admission the resident was charged inappropriate rates for LTC. They stated that the home had attempted to call the Ministry for help regarding rates, however was often unsuccessful. They stated that the home had high turnover of staff during the first year the resident was admitted to the home and the staff responsible for rate calculations just continued to calculate the rates based on how the staff member before them did. The CEO stated that in the meantime, the home had suspended payments until the rate was sorted out. They further stated that sometimes the resident and/or SDM did not fill out the paperwork, or it was incorrect.

The inspector interviewed the SDM regarding the rates charged for accommodation for the resident. Upon admission, the SDM told the inspector that they were not advised of the rates and rate options and the staff at the home did not explain the forms. The SDM told the inspector that they received no support from the home. They stated that the forms were provided to them and they were told to fill them out as best they could.

Since the resident's admission, the home has continually submitted incorrect and incomplete forms for a rate reduction in an unacceptable manner to the Director and did not provide adequate support to the resident and the SDM. [s. 253.]

Additional Required Actions:

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

WN #2: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 78. Information for residents, etc.



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Specifically failed to comply with the following:

- s. 78. (1) Every licensee of a long-term care home shall ensure that, (a) a package of information that complies with this section is given to every resident and to the substitute decision-maker of the resident, if any, at the time that the resident is admitted; 2007, c. 8, s. 78. (1).
- (b) the package of information is made available to family members of residents and persons of importance to residents; 2007, c. 8, s. 78. (1).
- (c) the package of information is revised as necessary; 2007, c. 8, s. 78. (1).
- (d) any material revisions to the package of information are provided to any person who has received the original package and who is still a resident or substitute decision-maker of a resident; 2007, c. 8, s. 78. (1).
- (e) the contents of the package and of the revisions are explained to the person receiving them. 2007, c. 8, s. 78. (1).

Findings/Faits saillants:

1. On July 29, 2014 inspector #575 toured the home, interviewed staff, reviewed resident #001's health care record, and collected documents.

The inspector reviewed the home's 'Long Term Care/Alternate Level of Care Resident Admission Contract' and noted that the contract was not signed by the resident or SDM on admission. The admission documents were not provided to the resident and/or the SDM at the time of admission to the LTC home. An admission contract renewal form was signed by the SDM approximately three years after admission.

Therefore, the licensee has failed to ensure that the admission package was given to the resident and SDM (if any) at the time of admission. [s. 78. (1) (a)]

2. The inspector reviewed the home's 'Long Term Care/Alternate Level of Care Resident Admission Contract' and noted that the contract was not signed by the resident or the SDM on admission. The admission documents were not provided to the resident and/or the SDM at the time of admission to the LTC home. An admission contract renewal form was signed by the SDM approximately three years after admission.

During an interview, the SDM stated that some contents of the admission package (regarding rate reductions) were not explained to them. Further, they indicated that one of the forms had their name and birthdate, however the form was not filled out by them



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because it was not their handwriting.

The SDM told the inspector that no support was provided by the staff at the home. They stated that the forms were just given to them and they were told to fill them out as best they could. They further indicated that when they asked for help the home never had an answer.

During an interview, the CEO told the inspector that upon admission the resident was charged inappropriate rates for LTC. They stated that the home had attempted to call the Ministry for help regarding rates, however they were often unsuccessful. They stated that the home has had high turnover of staff during the first year the resident was admitted to the home and the staff responsible for rate calculations just continued to calculate the rates based on how the staff member before them did.

As indicated above, the licensee failed to explain the contents of the admission package including items required under s. 78. (2) (j), a statement of the reductions, available under the regulations, in the amount that qualified residents can be charged for each type of accommodation offered in the LTC home and requirements under O.Reg 79/10, s. 224. (1) 4, the method to apply to the Director for a reduction in the charge for basic accommodation and the supporting documentation that may be required, including the resident's Notice of Assessment issued under the Income Tax Act (Canada) for the resident's most recent taxation year. [s. 78. (1) (e)]

Issued on this 6th day of May, 2015

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

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): LINDSAY DYRDA (575)

Inspection No. /

No de l'inspection : 2014_332575_0013

Log No. /

Registre no: S-000314-14

Type of Inspection /

Genre Complaint

d'inspection:

Report Date(s) /

Date(s) du Rapport : May 1, 2015

Licensee /

Titulaire de permis : MANITOUWADGE GENERAL HOSPITAL

1 HEALTH CARE CRESCENT, MANITOUWADGE, ON,

P0T-2C0

LTC Home /

Foyer de SLD: MANITOUWADGE GENERAL HOSPITAL

1 HEALTH CARE CRESCENT, MANITOUWADGE, ON,

P0T-2C0

Name of Administrator / Nom de l'administratrice

ou de l'administrateur : Jocelyn Bourgoin

To MANITOUWADGE GENERAL HOSPITAL, 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(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

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Order # / Order Type /

Ordre no: 001 Genre d'ordre: Compliance Orders, s. 153. (1) (b)

Pursuant to / Aux termes de :

O.Reg 79/10, s. 253. Reduction in basic accommodation charge

Order / Ordre:

The licensee shall prepare, submit and implement a plan ensuring that where a long-stay resident applies to the Director for a reduction in basic accommodation, the home verifies that all parts of the application are provided to the resident, the application is submitted in a form and manner acceptable to the Director, ensure that the information is recorded correctly and ensure that an application for a reduced amount payable is not submitted that the licensee knows, ought to know or reasonably suspects to be false or incomplete.

This plan is to include but not be limited to ensuring that the admission package provided to every resident and to the substitute decision-maker of the resident (if any) required pursuant to the Long-Term Care Homes Act (LTCHA), 2007 S.O. 2007, c.8, s.78., includes the requirements identified under section 78. (2). (j), and under O.Reg 79/10, s.224 (1) 4., and the contents are explained to the person receiving the package. This plan shall also include ensuring that the staff responsible for submitting rate reduction applications are trained and know how to properly apply and submit the application and also include an audit of all past and current rate reduction applications to ensure that the applications have been completed properly and that residents with rate reductions are being charged and have been charged the appropriate rates.

This plan may be submitted in writing to Long-Term Care Homes Inspector Lindsay Dyrda at 159 Cedar Street, Suite 403, Sudbury, Ontario, P3E 6A5. Alternatively, the plan may be faxed to the inspector's attention at (705) 564-3133. This plan must be received by May 22, 2015 and fully implemented by June 22, 2015.

Grounds / Motifs:

1. As outlined in section 253 (4) and section 253 (5) of O.Reg 79/10, of the Long Term Care Homes Act (LTCHA), 2007, where a long-stay resident applies to the



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Director for a reduction in basic accommodation, homes are required to verify that all parts of the application are provided by the resident, the application is submitted in a form and manner acceptable to the Director, ensure that the information is recorded correctly and ensure that an application for a reduced amount payable is not submitted that the licensee knows, ought to know or reasonably suspects to be false or incomplete.

The licensee failed to ensure resident #001's applications were completed and submitted accordingly.

On July 29, 2014 inspector #575 toured the home, interviewed staff, reviewed resident #001's health care record, and collected relevant documents.

The Community Care Access Centre (CCAC) Long-Term Care (LTC) application for resident #001 stated that the applicant requested basic accommodation. The application indicated that a rate reduction would be required and an application would need to be completed upon admission (*Note: a rate reduction is effective from July 1 to June 30 of the following year).

According to the documents provided by the home, the resident completed an application for a reduction in LTC home accommodation fees; an additional form was filled out (no date) for resident #001 for a resident without a Notice of Assessment (NOA), however the NOA was available. The form was not signed and the date of birth was crossed out. Additionally, two different forms were reviewed by the inspector and were not completed as required.

Then, approximately six months later, the home applied for a Director's Discretion for an adjustment to a rate reduction start date. The inspector reviewed the notice of the Director's approval which stated the start term for the rate reduction and that the current rate reduction would end by June 30. According to this letter, the rate reduction should have been retroactive to the date specified by the Director, however the inspector noted that for a period of approximately three months, the resident was charged their original rate instead of the rate reduction.

For the next rate reduction period, no application for reduction in LTC home basic accommodation was completed or submitted by the home. A staff member confirmed to the inspector that a rate reduction was not submitted for this period. During this period, the resident was charged the full accommodation



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amount.

During an interview, the resident's substitute decision-maker (SDM) stated that no rate reduction or other forms were filled out because a staff member told them that everything was electronically filed, so the SDM stated that they assumed that they did not have to apply for rate reduction and no staff advised them of any other forms.

In a document provided to the inspector by the home, the inspector noted that the resident and the SDM met with the home regarding rate reduction. The home then met with staff and directed that all efforts be made to determine any eligible rate reduction for which the resident might qualify.

For the next rate reduction period, no application for reduction in LTC home basic accommodation was completed or submitted by the home. During this period, the resident was charged the full accommodation amount.

Approximately three years after admission, the resident was given a letter by the home that indicated that the resident had an outstanding balance and that if payments were not made collections actions would be taken.

For the next rate reduction period, an application for reduction in LTC home basic accommodation was completed. The form used total income instead of net income and was not signed by the resident or the SDM (application incorrect and incomplete). A staff member indicated that the resident did not qualify for a rate reduction during this period.

In a letter addressed to the home, the SDM indicated that they had requested a rate reduction on many occasions and they did receive a reduction at one year, however, the rate continued to increase.

In response to the above letter, the home indicated that the rate calculations are submitted on the government web site based on the financial information provided by the resident and the approval of the rate reduction is determined by this process. The response letter also indicated that rate reductions are legislated under the Nursing Home Act (NHA), the Long-Term Care Homes Act, 2007 (LTCHA) and Ontario Regulation 79/10. The letter further referenced the NHA....and indicated that the home is doing everything possible to assist the resident in receiving a rate reduction.



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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

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Approximately one month after the above response letter, another letter addressed to the resident and SDM (from the home) indicated that approval for rate reduction was granted (after revising the resident's income). The rate was then retroactive to the start of the rate reduction period.

Then, approximately five months later, a staff member told the inspector that they had re-calculated the resident's rate using an additional form (not used previously) and the rate calculator identified a different rate, lower than what the resident was being charged. Therefore, the home suspended the resident's payments until the home could verify the correct payment amount.

During an interview, the CEO told the inspector that upon admission the resident was charged inappropriate rates for LTC. They stated that the home had attempted to call the Ministry for help regarding rates, however was often unsuccessful. They stated that the home had high turnover of staff during the first year the resident was admitted to the home and the staff responsible for rate calculations just continued to calculate the rates based on how the staff member before them did. The CEO stated that in the meantime, the home had suspended payments until the rate was sorted out. They further stated that sometimes the resident and/or SDM did not fill out the paperwork, or it was incorrect.

The inspector interviewed the SDM regarding the rates charged for accommodation for the resident. Upon admission, the SDM told the inspector that they were not advised of the rates and rate options and the staff at the home did not explain the forms. The SDM told the inspector that they received no support from the home. They stated that the forms were provided to them and they were told to fill them out as best they could.

Since the resident's admission, the home has continually submitted incorrect and incomplete forms for a rate reduction in an unacceptable manner to the Director and did not provide adequate support to the resident and the SDM. [s. 253.] (575)



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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Ordre(s) de l'inspecteur

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

Jun 22, 2015



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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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



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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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

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.



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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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.



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

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.

Issued on this 1st day of May, 2015

Signature of Inspector / Signature de l'inspecteur :

Name of Inspector /

Nom de l'inspecteur : Lindsay Dyrda

Service Area Office /

Bureau régional de services : Sudbury Service Area Office