



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

**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**

Toronto Service Area Office  
5700 Yonge Street 5th Floor  
TORONTO ON M2M 4K5  
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TORONTO ON M2M 4K5  
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**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>
Jun 22, 2015	2015_189120_0034	T-1376/77/78-14	Follow up

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**Licensee/Titulaire de permis**

VILLA COLOMBO HOMES FOR THE AGED, INC.  
40 PLAYFAIR AVENUE TORONTO ON M6B 2P9

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

VILLA COLOMBO HOMES FOR THE AGED INC.  
40 PLAYFAIR AVENUE TORONTO ON M6B 2P9

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

BERNADETTE SUSNIK (120)

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

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**The purpose of this inspection was to conduct a Follow up inspection.**

**This inspection was conducted on the following date(s): May 12, 2015**

**An inspection (2014-189120-0059) was previously conducted on September 16, 2014 at which time non-compliance was identified and several orders issued related to door security (#001), window safety (002), the resident-staff communication and response system (#003) and security of the building (#005). For this follow-up visit, orders #001 and #002 are being revised as they have been only partially addressed.**

**During the course of the inspection, the inspector(s) spoke with the Administrator, registered staff and maintenance person, verified the location of the activation stations, tested the resident-staff communication and response system, windows, stairwell and exit doors.**

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

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

**2 WN(s)  
0 VPC(s)  
2 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:**

REQUIREMENT/ EXIGENCE	TYPE OF ACTION/ GENRE DE MESURE	INSPECTION # / DE L'INSPECTION	NO	INSPECTOR ID #/ NO DE L'INSPECTEUR
O.Reg 79/10 s. 16.	CO #002	2014_189120_0059		120
LTCHA, 2007 S.O. 2007, c.8 s. 5.	CO #005	2014_189120_0059		120

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

Legend	Legendé
<p>WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order</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 O.Reg 79/10, s. 9. Doors in a home**



Specifically failed to comply with the following:

**s. 9. (1) Every licensee of a long-term care home shall ensure that the following rules are complied with:**

**1. All doors leading to stairways and the outside of the home other than doors leading to secure outside areas that preclude exit by a resident, including balconies and terraces, or doors that residents do not have access to must be,**

- i. kept closed and locked,**
- ii. equipped with a door access control system that is kept on at all times, and**
- iii. equipped with an audible door alarm that allows calls to be cancelled only at the point of activation and,**

**A. is connected to the resident-staff communication and response system, or**  
**B. is connected to an audio visual enunciator that is connected to the nurses' station nearest to the door and has a manual reset switch at each door. O. Reg. 79/10, s. 9. (1).**

**2. All doors leading to non-residential areas must be equipped with locks to restrict unsupervised access to those areas by residents, and those doors must be kept closed and locked when they are not being supervised by staff. O. Reg. 79/10, s. 9; O. Reg. 363/11, s. 1 (1, 2).**

**3. Any locks on bedrooms, washrooms, toilet or shower rooms must be designed and maintained so they can be readily released from the outside in an emergency.**

**4. All alarms for doors leading to the outside must be connected to a back-up power supply, unless the home is not served by a generator, in which case the staff of the home shall monitor the doors leading to the outside in accordance with the procedures set out in the home's emergency plans. O. Reg. 79/10, s. 9; O. Reg. 363/11, s. 1 (1, 2).**

**Findings/Faits saillants :**



1. The licensee did not ensure that all doors that led to a stairway and to unenclosed outdoor areas (that precluded exit by a resident) were equipped with an audible door alarm.

Each of the 3 interior stairwell doors located on each floor of the Fidani and Fusco wings were equally equipped with a key pad and magnetic lock, however none of the stairwell doors were equipped with an audible door alarm at each door. When random stairwell doors were tested on May 12, 2015, no alarm sounded at the door after holding it open beyond the allocated 10-15 second time delay set at each door.

2. The licensee did not ensure that all doors that lead to an unenclosed outdoor area (that precluded exit by a resident) were kept locked.

A set of interior frosted glass doors leading from the long term care home to the banquet hall's main foyer were found unlocked after 2 p.m. on May 12, 2015. Once inside the main foyer of the banquet hall, a set of glass double doors leading to the street were unlocked. No staff were present in the banquet facility at the time of inspection. The multiple interior doors leading to the banquet facility from the long term care home were noted to be locked in the morning on May 12, 2015.

According to the administrator, the magnetic locks and accompanying key pads that were recently installed in the banquet facility for doors leading to the exterior were not activated at the time of inspection as they were pending fire department approval. [s. 9. (1)]

***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. 17. Communication and response system**



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

- s. 17. (1) Every licensee of a long-term care home shall ensure that the home is equipped with a resident-staff communication and response system that,**
- (a) can be easily seen, accessed and used by residents, staff and visitors at all times; O. Reg. 79/10, s. 17 (1).**
  - (b) is on at all times; O. Reg. 79/10, s. 17 (1).**
  - (c) allows calls to be cancelled only at the point of activation; O. Reg. 79/10, s. 17 (1).**
  - (d) is available at each bed, toilet, bath and shower location used by residents; O. Reg. 79/10, s. 17 (1).**
  - (e) is available in every area accessible by residents; O. Reg. 79/10, s. 17 (1).**
  - (f) clearly indicates when activated where the signal is coming from; and O. Reg. 79/10, s. 17 (1).**
  - (g) in the case of a system that uses sound to alert staff, is properly calibrated so that the level of sound is audible to staff. O. Reg. 79/10, s. 17 (1).**

**Findings/Faits saillants :**

1. The licensee did not ensure that the resident-staff communication and response system (RSCRS) clearly indicated when activated where the signal was coming from.

On May 12, 2015, the activation stations that were located in the main floor areas such as the hair salon, chapel, banquet facility and main foyer could not be activated as they were not connected to the RSCRS. The licensee was previously required to install activation stations in these areas and ensure that they were connected to the RSCRS by March 31, 2015. The administrator reported that the system was pending approvals and was not fully functional at the time of inspection.

2. The licensee did not ensure that the resident-staff communication and response system that used sound to alert staff was properly calibrated so that the level of sound was audible to staff.

The existing RSCRS located on both the Fidani and Fusco wings operated by using sound throughout the floor to alert staff that a door was breached or an activation station was pulled. In order to accommodate additional activation stations and door alarms that were required to be installed over the last 5 months (main floor and within the two wings), a secondary system, running in parallel to the existing RSCRS was installed. The secondary system was noted to be for the most part, a visual system consisting of a digital marquee on each floor near each nurse station. The main floor did not have a visual or audio system to alert staff, but was routed to the 2nd floor RSCRS. However, the main floor activation stations could not be tested as the system was not connected fully. During the test of the system on Fusco 3rd floor on May 12, 2015, the only sound emitted from the system came from the marquee near the nurse's desk. No sound could be heard in the corridors. After 10 minutes, no staff appeared to check on the door that was breached. Staff were not equipped with pagers or phones to alert them to a breach of a door or a newly installed activation station. Staff were in the dining room and did not hear the sound at the marquee location. According to the administrator, their plan was to equip nursing staff with a portable phone which would ring to alert them of a triggered door alarm or activation station for the main floor only, but not other floors or wings. [s. 17(1)(g)]

***Additional Required Actions:***

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



**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**

**Issued on this 22nd 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  
Long-Term Care**

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

**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) :** BERNADETTE SUSNIK (120)

**Inspection No. /**

**No de l'inspection :** 2015\_189120\_0034

**Log No. /**

**Registre no:** T-1376/77/78-14

**Type of Inspection /**

**Genre**

Follow up

**d'inspection:**

**Report Date(s) /**

**Date(s) du Rapport :** Jun 22, 2015

**Licensee /**

**Titulaire de permis :** VILLA COLOMBO HOMES FOR THE AGED, INC.  
40 PLAYFAIR AVENUE, TORONTO, ON, M6B-2P9

**LTC Home /**

**Foyer de SLD :** VILLA COLOMBO HOMES FOR THE AGED INC.  
40 PLAYFAIR AVENUE, TORONTO, ON, M6B-2P9

**Name of Administrator /**

**Nom de l'administratrice**

**ou de l'administrateur :** Tracey Comeau

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To VILLA COLOMBO HOMES FOR THE AGED, INC., you are hereby required to  
comply with the following order(s) by the date(s) set out below:

**Order(s) of the Inspector**Pursuant to section 153 and/or  
section 154 of the *Long-Term Care  
Homes Act, 2007, S.O. 2007, c.8***Ordre(s) de l'inspecteur**Aux termes de l'article 153 et/ou  
de l'article 154 de la *Loi de 2007 sur les foyers  
de soins de longue durée, L.O. 2007, chap. 8***Order # /****Ordre no :** 001**Order Type /****Genre d'ordre :** Compliance Orders, s. 153. (1) (a)**Linked to Existing Order /****Lien vers ordre  
existant:** 2014\_189120\_0059, CO #001;**Pursuant to / Aux termes de :**

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

1. All doors leading to stairways and the outside of the home other than doors leading to secure outside areas that preclude exit by a resident, including balconies and terraces, or doors that residents do not have access to must be,

i. kept closed and locked,  
ii. equipped with a door access control system that is kept on at all times, and  
iii. equipped with an audible door alarm that allows calls to be cancelled only at the point of activation and,

A. is connected to the resident-staff communication and response system, or

B. is connected to an audio visual enunciator that is connected to the nurses' station nearest to the door and has a manual reset switch at each door.

1.1. All doors leading to secure outside areas that preclude exit by a resident, including balconies and terraces, must be equipped with locks to restrict unsupervised access to those areas by residents.

2. All doors leading to non-residential areas must be equipped with locks to restrict unsupervised access to those areas by residents, and those doors must be kept closed and locked when they are not being supervised by staff.

3. Any locks on bedrooms, washrooms, toilet or shower rooms must be designed and maintained so they can be readily released from the outside in an emergency.

4. All alarms for doors leading to the outside must be connected to a back-up power supply, unless the home is not served by a generator, in which case the staff of the home shall monitor the doors leading to the outside in accordance with the procedures set out in the home's emergency plans. O. Reg. 79/10, s. 9; O. Reg. 363/11, s. 1 (1, 2).

**Order / Ordre :**



**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*

The licensee shall complete the following:

1. Equip all 3 interior stairwell doors on each floor of the Fusco and Fidani wings with an audible back up door alarm (either at the key pad or vicinity)
2. Equip the main floor stairwell door located near the elevators which leads up to the Fusco wing with an audible back up door alarm.
3. Equip the main floor stairwell door located near the back exit to parking lot with an audible door alarm. (either at the key pad or vicinity)

All doors listed in #2 & #3 above shall be connected to the resident-staff communication and response system located either on the Fidani second floor or the Fusco second floor (or both if responsibility to monitor the alarms will be alternated).

4. Keep the banquet doors locked leading to the banquet facility to prohibit access to residents (unless supervised) until the glass doors leading to the outside of the home (leading to the street) are able to be kept locked.

**Grounds / Motifs :**



**Order(s) of the Inspector**

Pursuant to section 153 and/or  
section 154 of the *Long-Term Care  
Homes Act, 2007, S.O. 2007, c.8*

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

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

1. The licensee did not ensure that all doors that led to a stairway and to unenclosed outdoor areas (that precluded exit by a resident) were equipped with an audible door alarm.

Each of the 3 interior stairwell doors located on each floor of the Fidani and Fusco wings were equally equipped with a key pad and magnetic lock, however none of the stairwell doors were equipped with an audible door alarm at each door. When random stairwell doors were tested on May 12, 2015, no alarm sounded at the door after holding it open beyond the allocated 10-15 second time delay set at each door.

2. The licensee did not ensure that all doors that lead to an unenclosed outdoor area (that precluded exit by a resident) were kept locked.

A set of interior frosted glass doors leading from the long term care home to the banquet hall's main foyer were found unlocked after 2 p.m. on May 12, 2015. Once inside the main foyer of the banquet hall, a set of glass double doors leading to the street were unlocked. No staff were present in the banquet facility at the time of inspection. The multiple interior doors leading to the banquet facility from the long term care home were noted to be locked in the morning on May 12, 2015.

According to the administrator, the magnetic locks and accompanying key pads that were recently installed in the banquet facility for doors leading to the exterior were not activated at the time of inspection as they were pending fire department approval. (120)

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

**Vous devez vous conformer à cet ordre d'ici le : Jul 15, 2015**



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

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

**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

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**Order # /**

**Ordre no :** 002

**Order Type /**

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

**Linked to Existing Order /**

**Lien vers ordre  
existant:** 2014\_189120\_0059, CO #003;

**Pursuant to / Aux termes de :**

O.Reg 79/10, s. 17. (1) Every licensee of a long-term care home shall ensure that the home is equipped with a resident-staff communication and response system that,

(a) can be easily seen, accessed and used by residents, staff and visitors at all times;

(b) is on at all times;

(c) allows calls to be cancelled only at the point of activation;

(d) is available at each bed, toilet, bath and shower location used by residents;

(e) is available in every area accessible by residents;

(f) clearly indicates when activated where the signal is coming from; and

(g) in the case of a system that uses sound to alert staff, is properly calibrated so that the level of sound is audible to staff. O. Reg. 79/10, s. 17 (1).

**Order / Ordre :**



**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*

The licensee shall complete the following:

1. Amend or alter the secondary resident-staff and communication and response system recently installed on floors 2-5 of the Fusco and Fidani wings so that if sound will be used to alert staff of an activated station or door alarm, that the sound can be heard throughout the home area (i.e. either using speakers or additional marquees) of each floor by all staff and that the location of the activated station is clearly indicated to all staff

OR

Equip designated staff members on each floor 2-5 with a pager or phone that will immediately alert them with a display of the location of an activated station or door alarm on their corresponding floor. For designated staff on the 2nd floor, the display of the location of an activated station from the craft room in the basement and activation stations and door alarms located on the main floor. Consideration should be given to similarly equipping main floor reception and security staff with a phone or pager and be called upon as first responders.

2. The licensee shall establish clear protocols for lines of communication between main floor reception and security and the 2nd floor staff regarding roles and responsibilities in responding to activated stations or door alarms originating from the main floor or basement craft room.

**Grounds / Motifs :**

1. The licensee did not ensure that the resident-staff communication and response system (RSCRS) clearly indicated when activated where the signal was coming from.

On May 12, 2015, the activation stations that were located in the main floor areas such as the hair salon, chapel, banquet facility and main foyer could not be activated as they were not connected to the RSCRS. The licensee was previously required to install activation stations in these areas and ensure that they were connected to the RSCRS by March 31, 2015. The administrator reported that the system was pending approvals and was not fully functional at the time of inspection.

2. The licensee did not ensure that the resident-staff communication and response system that used sound to alert staff was properly calibrated so that the level of sound was audible to staff.

The existing RSCRS located on both the Fidani and Fusco wings operated by using sound throughout the floor to alert staff that a door was breached or an activation station was pulled. In order to accommodate additional activation stations and door alarms that were required to be installed over the last 5 months (main floor and within the two wings), a secondary system, running in parallel to the existing RSCRS was installed. The secondary system was noted to be for the most part, a visual system consisting of a digital marquee on each floor near each nurse station. The main floor did not have a visual or audio system to alert staff, but was routed to the 2nd floor RSCRS. However, the main floor activation stations could not be tested as the system was not connected fully. During the test of the system on Fusco 3rd floor on May 12, 2015, the only sound emitted from the system came from the marquee near the nurse's desk. No sound could be heard in the corridors. After 10 minutes, no staff appeared to check on the door that was breached. Staff were not equipped with pagers or phones to alert them to a breach of a door or a newly installed activation station. Staff were in the dining room and did not hear the sound at the marquee location. According to the administrator, their plan was to equip nursing staff with a portable phone which would ring to alert them of a triggered door alarm or activation station for the main floor only, but not other floors or wings.

(120)



**Ministry of Health and  
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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*

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

**Vous devez vous conformer à cet ordre d'ici le : Jul 15, 2015**





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

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

**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

### **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  
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**

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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*

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).



**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*

## **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.



**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*

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 22nd day of June, 2015**

**Signature of Inspector /**

**Signature de l'inspecteur :**

**Name of Inspector /**

**Nom de l'inspecteur :** BERNADETTE SUSNIK

**Service Area Office /**

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