



**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
Telephone: (416) 325-9660
Facsimile: (416) 327-4486

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

Public Copy/Copie du public

Report Date(s) / Date(s) du apport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Jan 28, 2015	2015_163109_0002	T-1493-14	Complaint

Licensee/Titulaire de permis

2063414 ONTARIO LIMITED AS GENERAL PARTNER OF 2063414 INVESTMENT LP
302 Town Centre Blvd., Suite #200 TORONTO ON L3R 0E8

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

LEISUREWORLD CAREGIVING CENTRE - LAWRENCE
2005 LAWRENCE AVENUE WEST TORONTO ON M9N 3V4

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

SUSAN SQUIRES (109)

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): January 19, 20, 23, 2015.

During the course of the inspection, the inspector(s) spoke with the residents, director of administration, director of resident care, assistant director of resident care, registered nursing staff, personal support workers.

The following Inspection Protocols were used during this inspection:



Dignity, Choice and Privacy

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

1 WN(s)

0 VPC(s)

1 CO(s)

0 DR(s)

0 WAO(s)

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

Legend	Legendé
WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order	WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités
Non-compliance with requirements under the Long-Term Care Homes Act, 2007 (LTCHA) was found. (a requirement under the LTCHA includes the requirements contained in the items listed in the definition of "requirement under this Act" in subsection 2(1) of the LTCHA).	Le non-respect des exigences de la Loi de 2007 sur les foyers de soins de longue durée (LFSLD) a été constaté. (une exigence de la loi comprend les exigences qui font partie des éléments énumérés dans la définition de « exigence prévue par la présente loi », au paragraphe 2(1) de la LFSLD.
The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.	Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.

WN #1: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 3. Residents' Bill of Rights

Specifically failed to comply with the following:

s. 3. (1) Every licensee of a long-term care home shall ensure that the following rights of residents are fully respected and promoted:

14. Every resident has the right to communicate in confidence, receive visitors of his or her choice and consult in private with any person without interference. 2007, c. 8, s. 3 (1).

Findings/Faits saillants :

1. The licensee failed to ensure that resident #1's right to communicate in confidence and receive visitors of his/her choice and consult in private with any person without interference was fully respected and promoted.

Staff and resident interview revealed that resident #1 had been receiving visits from identified friends for over a year. According to the resident the friends were suddenly stopped from visiting him/her and the resident was not given any reason for this decision. The friends told the resident that they could no longer visit or the police would be called. The resident further told the inspector that he/she misses the two friends and wishes that they could visit again.

Staff interview revealed that several residents including resident # 1 enjoyed the visits from the two friends which have been going on for at least the past year up until a specified date, when the management ordered the visitors to be stopped from entering the premises. Staff and management interviews revealed that there were never any prior concerns raised about the friends that visited the residents. One of the friends told the inspector that he/she had complained to the Family Council and to the local MPP about being banned from the home. The friend was told that he/she was considered a security risk to the home.

Interview with one of the friends of resident # 1 and # 2 revealed that he/she was asked by the home's management to stop visiting the home and to stop having any correspondence with any of the residents or their family members. The friend indicated that he/she had not been given a reason for this request.



Interview with a nurse manager and a registered nursing staff member revealed that on a specified date, one of the friends came to visit resident #1 for the residents' birthday. The manager and registered staff member told the inspector that they asked the visitor to leave the premises. The manager and the registered staff member confirmed that they had been directed by a senior manager to ask the visitors to leave when they were seen in the building. This was confirmed by the senior manager. [s. 3. (1) 14.]

2. The licensee failed to ensure that resident #2's right to communicate in confidence and receive visitors of his/her choice and consult in private with any person without interference was fully respected and promoted.

Staff interview revealed that several residents including resident # 2 enjoyed the visits from identified friends which have been going on for at least the past year up until a specified date when management ordered the visitors to be stopped from entering the premises. Staff and management interviews revealed that there were never any prior concerns raised about the 2 friends that visited the residents.

Record review and interview revealed that one family member raised concerns about the correspondence received from one of the friends and asked the management to stop the friends from visiting resident #2.

Review of the family council minutes and interview with the friend indicated that the friend had complained to the family council and to the local MPP about being banned from the home. The friend stated to the inspector that he/she was told by the local MPP that they were considered security risks to the home.

Interview with one of the friends of resident # 2 revealed that he/she was asked by the home's management to stop visiting the home and to stop having any correspondence with any of the residents or their family members. The friend indicated that he/she had not been given a reason for this request.

Interview with resident #2 revealed that the resident used to receive visits from identified individuals that he/she considered to be friends. The resident told the inspector that the establishment made a decision that the friends could no longer visit with him/her and that there was no explanation given to the resident as to why this decision was made. Resident #2 told the inspector that he/she misses the friends and would like them to visit him/her again.



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Record review of a memo from a specified date, reveals the Power of Attorney for resident #2 requested that the two visitors cease to visit the resident.

Interview with the PSW staff revealed that they were not aware of any restrictions for the friends in regards to visiting resident #2.

Additional Required Actions:

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

Issued on this 11th day of February, 2015

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

Original report signed by the inspector.



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Order(s) of the Inspector

Pursuant to section 153 and/or
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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) : SUSAN SQUIRES (109)

Inspection No. /

No de l'inspection : 2015_163109_0002

Log No. /

Registre no: T-1493-14

Type of Inspection /

Genre

d'inspection:

Complaint

Report Date(s) /

Date(s) du Rapport : Jan 28, 2015

Licensee /

Titulaire de permis : 2063414 ONTARIO LIMITED AS GENERAL PARTNER
OF 2063414 INVESTMENT LP
302 Town Centre Blvd., Suite #200, TORONTO, ON,
L3R-0E8

LTC Home /

Foyer de SLD :

LEISUREWORLD CAREGIVING CENTRE -
LAWRENCE
2005 LAWRENCE AVENUE WEST, TORONTO, ON,
M9N-3V4

Name of Administrator /

Nom de l'administratrice

ou de l'administrateur :

Hyacinth Daley



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

To 2063414 ONTARIO LIMITED AS GENERAL PARTNER OF 2063414
INVESTMENT LP, 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) (b)**Pursuant to / Aux termes de :**

LTCHA, 2007 S.O. 2007, c.8, s. 3. (1) Every licensee of a long-term care home shall ensure that the following rights of residents are fully respected and promoted:

1. Every resident has the right to be treated with courtesy and respect and in a way that fully recognizes the resident's individuality and respects the resident's dignity.
2. Every resident has the right to be protected from abuse.
3. Every resident has the right not to be neglected by the licensee or staff.
4. Every resident has the right to be properly sheltered, fed, clothed, groomed and cared for in a manner consistent with his or her needs.
5. Every resident has the right to live in a safe and clean environment.
6. Every resident has the right to exercise the rights of a citizen.
7. Every resident has the right to be told who is responsible for and who is providing the resident's direct care.
8. Every resident has the right to be afforded privacy in treatment and in caring for his or her personal needs.
9. Every resident has the right to have his or her participation in decision-making respected.
10. Every resident has the right to keep and display personal possessions, pictures and furnishings in his or her room subject to safety requirements and the rights of other residents.
11. Every resident has the right to,
 - i. participate fully in the development, implementation, review and revision of his or her plan of care,
 - ii. give or refuse consent to any treatment, care or services for which his or her consent is required by law and to be informed of the consequences of giving or refusing consent,
 - iii. participate fully in making any decision concerning any aspect of his or her care, including any decision concerning his or her admission, discharge or transfer to or from a long-term care home or a secure unit and to obtain an independent opinion with regard to any of those matters, and
 - iv. have his or her personal health information within the meaning of the Personal

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Health Information Protection Act, 2004 kept confidential in accordance with that Act, and to have access to his or her records of personal health information, including his or her plan of care, in accordance with that Act.

12. Every resident has the right to receive care and assistance towards independence based on a restorative care philosophy to maximize independence to the greatest extent possible.

13. Every resident has the right not to be restrained, except in the limited circumstances provided for under this Act and subject to the requirements provided for under this Act.

14. Every resident has the right to communicate in confidence, receive visitors of his or her choice and consult in private with any person without interference.

15. Every resident who is dying or who is very ill has the right to have family and friends present 24 hours per day.

16. Every resident has the right to designate a person to receive information concerning any transfer or any hospitalization of the resident and to have that person receive that information immediately.

17. Every resident has the right to raise concerns or recommend changes in policies and services on behalf of himself or herself or others to the following persons and organizations without interference and without fear of coercion, discrimination or reprisal, whether directed at the resident or anyone else,

i. the Residents' Council,

ii. the Family Council,

iii. the licensee, and, if the licensee is a corporation, the directors and officers of the corporation, and, in the case of a home approved under Part VIII, a member of the committee of management for the home under section 132 or of the board of management for the home under section 125 or 129,

iv. staff members,

v. government officials,

vi. any other person inside or outside the long-term care home.

18. Every resident has the right to form friendships and relationships and to participate in the life of the long-term care home.

19. Every resident has the right to have his or her lifestyle and choices respected.

20. Every resident has the right to participate in the Residents' Council.

21. Every resident has the right to meet privately with his or her spouse or another person in a room that assures privacy.

22. Every resident has the right to share a room with another resident according to their mutual wishes, if appropriate accommodation is available.

23. Every resident has the right to pursue social, cultural, religious, spiritual and

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other interests, to develop his or her potential and to be given reasonable assistance by the licensee to pursue these interests and to develop his or her potential.

24. Every resident has the right to be informed in writing of any law, rule or policy affecting services provided to the resident and of the procedures for initiating complaints.

25. Every resident has the right to manage his or her own financial affairs unless the resident lacks the legal capacity to do so.

26. Every resident has the right to be given access to protected outdoor areas in order to enjoy outdoor activity unless the physical setting makes this impossible.

27. Every resident has the right to have any friend, family member, or other person of importance to the resident attend any meeting with the licensee or the staff of the home. 2007, c. 8, s. 3 (1).

Order / Ordre :

The licensee shall prepare, submit and implement a plan to ensure that resident #1 and #2's right to receive visitors of his or her choice without interference is fully respected and promoted.

The plan shall include but not be limited to the following:

The licensee will explore whether resident #1 and #2 are capable of making their own decisions in determining which visitors they would like to receive.

The licensee will meet with residents #1 and #2 to determine how they will promote and respect their wishes to receive visits from the two friends and implement accordingly.

The licensee will communicate with resident's #1 and #2 to ensure that they understand why restrictions, if any, are imposed on the two visitors, what the restrictions might be and the reasons for the licensee's actions.

Please submit the plan to susan.squires@ontario.ca on or before February 2, 2015.

Grounds / Motifs :

1. The licensee failed to ensure that resident #2's right to communicate in confidence and receive visitors of his/her choice and consult in private with any person without interference was fully respected and promoted.

Staff interview revealed that several residents including resident # 2 enjoyed the visits from friends which have been going on for at least the past year up until a specified date when management ordered the visitors to be stopped from entering the premises. Staff and management interviews revealed that there

were never any prior concerns raised about the 2 friends that visited the residents.

Record review and interview revealed that one family member raised concerns about the correspondence received from one of the friends and asked the management to stop the friends from visiting resident #2.

Review of the Family Council minutes and interview with the friend indicated that the friend had complained to the Family Council and to the local MPP about being banned from the home. The friend stated to the inspector that he/she was told by the local MPP that they were considered security risks to the home.

Interview with one of the friends of resident # 2 revealed that he/she was asked by the home's management to stop visiting the home and to stop having any correspondence with any of the residents or their family members. The friend indicated that he/she had not been given a reason for this request.

Interview with resident #2 revealed that the resident used to receive visits from the individuals that he/she considered to be friends. The resident told the inspector that the establishment made a decision that the two friends could no longer visit with him/her and that there was no explanation given to the resident as to why this decision was made. Resident #2 told the inspector that he/she misses the two friends and would like them to visit him/her again.

Record review of a memo from a specified date, reveals the Power of Attorney for resident #2 requested that the two visitors cease to visit the resident.

Interview with the PSW staff revealed that they were not aware of any restrictions for the two friends in regards to visiting resident #2.

(109)

2. The licensee failed to ensure that resident #1's right to communicate in confidence and receive visitors of his/her choice and consult in private with any person without interference was fully respected and promoted.

Staff and resident interview revealed that resident #1 had been receiving visits from two friends for over a year. The two friends would visit with resident #1 and take the resident to the first floor for coffee, do crossword puzzles together, and attend scheduled activity programs in the home. The resident described one of



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the friends as someone who was like a brother. According to the resident, the friends were suddenly stopped from visiting him/her and the resident was not given any reason for this decision. The friends told the resident that they could no longer visit or the police would be called. The resident further told the inspector that he/she misses the friends and wishes that they could visit again.

Staff interview revealed that several residents including resident # 1 enjoyed the visits from the friends which have been going on for at least the past year up until a specified date, when the management ordered the visitors to be stopped from entering the premises. Staff and management interviews revealed that there were never any prior concerns raised about the friends that visited the residents. The friend told the inspector that he/she had complained to the Family Council and to the local MPP about being banned from the home. The friend was told that he/she was considered a security risk to the home.

Interview with one of the friends of resident # 1 and # 2 revealed that he/she was asked by the home's management to stop visiting the home and to stop having any correspondence with any of the residents or their family members. The friend indicated that he/she had not been given a reason for this request.

Interview with a nurse manager and a registered nursing staff member revealed that on a specified date, one of the friends came to visit resident #1 for the residents' birthday. The manager and registered staff member told the inspector that they asked the visitor to leave the premises. The manager and the registered staff member confirmed that they had been directed by a senior manager to ask the two visitors to leave when they were seen in the building. This was confirmed by the senior manager.

(109)

This order must be complied with by /

Vous devez vous conformer à cet ordre d'ici le : Feb 20, 2015



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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.



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RENSEIGNEMENTS SUR LE RÉEXAMEN/L'APPEL

PRENDRE AVIS

En vertu de l'article 163 de la Loi de 2007 sur les foyers de soins de longue durée, le titulaire de permis peut demander au directeur de réexaminer l'ordre ou les ordres qu'il a donné et d'en suspendre l'exécution.

La demande de réexamen doit être présentée par écrit et est signifiée au directeur dans les 28 jours qui suivent la signification de l'ordre au titulaire de permis.

La demande de réexamen doit contenir ce qui suit :

- a) les parties de l'ordre qui font l'objet de la demande de réexamen;
- b) les observations que le titulaire de permis souhaite que le directeur examine;
- c) l'adresse du titulaire de permis aux fins de signification.

La demande écrite est signifiée en personne ou envoyée par courrier recommandé ou par télécopieur au:

Directeur
a/s Coordinateur des appels
Direction de l'amélioration de la performance et de la conformité
Ministère de la Santé et des Soins de longue durée
1075, rue Bay, 11^e 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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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 28th day of January, 2015

Signature of Inspector /

Signature de l'inspecteur :

Name of Inspector /

Nom de l'inspecteur : SUSAN SQUIRES

Service Area Office /

Bureau régional de services : Toronto Service Area Office