



**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**

**Health System Accountability and
Performance Division
Performance Improvement and
Compliance Branch**

Ottawa Service Area Office
347 Preston St, 4th Floor
OTTAWA, ON, K1S-3J4
Telephone: (613) 569-5602
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**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

Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Mar 5, 2014	2014_158101_0011	T-785-13	Critical Incident System

Licensee/Titulaire de permis

EXTENDICARE TORONTO INC
3000 STEELES AVENUE EAST, SUITE 700, MARKHAM, ON, L3R-9W2

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

EXTENDICARE GUILDWOOD
60 GUILDWOOD PARKWAY, SCARBOROUGH, ON, M1E-1N9

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

AMANDA WILLIAMS (101)

Inspection Summary/Résumé de l'inspection



**Ministry of Health and
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The purpose of this inspection was to conduct a Critical Incident System inspection.

This inspection was conducted on the following date(s): February 20 and 21, 2014.

This inspection was conducted in response to Critical Incident Report # 2164-000018-13 related to loss of power in the home as the result of an ice storm.

During the course of the inspection, the inspector(s) spoke with the Administrator, Director of Care, Environmental Manager, Clinical Coordinator, registered nursing staff and maintenance staff.

During the course of the inspection, the inspector(s) reviewed the home's emergency plans and records; conducted a visual inspection of the home's generator hook-up, emergency supplies, resources and equipment.

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

Findings of Non-Compliance were found during this inspection.



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
<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. 230. Emergency plans

Specifically failed to comply with the following:

- s. 230. (3) In developing the plans, the licensee shall,**
- (a) consult with the relevant community agencies, partner facilities and resources that will be involved in responding to the emergency; and O. Reg. 79/10, s. 230 (3).**
 - (b) ensure that hazards and risks that may give rise to an emergency impacting the home are identified and assessed, whether the hazards and risks arise within the home or in the surrounding vicinity or community. O. Reg. 79/10, s. 230 (3).**

s. 230. (4) The licensee shall ensure that the emergency plans provide for the



following:

- 1. Dealing with,**
 - i. fires,**
 - ii. community disasters,**
 - iii. violent outbursts,**
 - iv. bomb threats,**
 - v. medical emergencies,**
 - vi. chemical spills,**
 - vii. situations involving a missing resident, and**
 - viii. loss of one or more essential services. O. Reg. 79/10, s. 230 (4).**

s. 230. (4) The licensee shall ensure that the emergency plans provide for the following:

- 3. Resources, supplies and equipment vital for the emergency response being set aside and readily available at the home. O. Reg. 79/10, s. 230 (4).**

s. 230. (7) The licensee shall,

- (a) test the emergency plans related to the loss of essential services, fires, situations involving a missing resident, medical emergencies and violent outbursts on an annual basis, including the arrangements with the community agencies, partner facilities and resources that will be involved in responding to an emergency; O. Reg. 79/10, s. 230 (7).**
- (b) test all other emergency plans at least once every three years, including arrangements with community agencies, partner facilities and resources that will be involved in responding to an emergency; O. Reg. 79/10, s. 230 (7).**
- (c) conduct a planned evacuation at least once every three years; and O. Reg. 79/10, s. 230 (7).**
- (d) keep a written record of the testing of the emergency plans and planned evacuation and of the changes made to improve the plans. O. Reg. 79/10, s. 230 (7).**

Findings/Faits saillants :

1. The home has not identified or assessed hazards and risks that may give rise to an emergency impacting the home, whether the hazards and risks arise within the home or in the surrounding vicinity or community. This was confirmed by the Administrator, Director of Care, Environmental Manager and Clinical Coordinator.

One example noted of a potential hazard and risks to the home as the result of the surrounding vicinity is the home's risk for flooding. The home is located in a valley and



is built on a marsh. As a result, the home is at risk for potential flooding. Currently the home does not have a home specific emergency plan in place for flooding. [s. 230. (3)]

2. The home does not have home specific written policies in place that are also available and accessible to staff related to the following emergencies:

- medical emergencies
- loss of one or more essential services (i.e. loss of power, loss of water, loss of heat, loss of gas, etc). [s. 230. (4) 1.]

3. The home lost power on December 21, 2013. It was confirmed by the Administrator and Director of Care that the home did not have written and home specific emergency plans in place related to loss of power at the time of the incident. Verbal directions for actions to take was provided to staff by the Administrator and Director of Care. [s. 230. (4) 1.]

4. The home does not have a sufficient or dedicated supply of resources, supplies or equipment set aside and readily available in the home in cases of vital emergencies. The following items, but not limited to, were observed to not be set aside and readily available in cases of vital emergencies:

- blankets
- peri-wipes and cloths
- linens
- continent products
- non-perishable food
- cleaning and disinfecting products [s. 230. (4) 3.]

5. The following emergency plans have not been tested on an annual basis along with the written record of the test completed:

- loss of one or more essential services
- situations involving a missing resident
- medical emergency
- violent outbursts

This was confirmed by the Administrator and Director of Care. [s. 230. (7)]



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Additional Required Actions:

CO # - 001, 003 will be served on the licensee. Refer to the "Order(s) of the Inspector".

VPC - pursuant to the Long-Term Care Homes Act, 2007, S.O. 2007, c.8, s.152(2) the licensee is hereby requested to prepare a written plan of correction for achieving compliance to ensure the home has a sufficient amount of resources, equipment and supplies set aside within the home in cases of vital emergencies, to be implemented voluntarily.

WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 19. Generators Specifically failed to comply with the following:

s. 19. (4) The licensee of a home to which subsection (2) or (3) applies shall ensure, not later than six months after the day this section comes into force, that the home has guaranteed access to a generator that will be operational within three hours of a power outage and that can maintain everything required under clauses (1) (a), (b) and (c). O. Reg. 79/10, s. 19 (4).

Findings/Faits saillants :



1. The home lost power on December 21, 2013 at 10:45pm and were unable to have a generator connected to the home that could maintain all the essential services until December 23, 2013 at 1:45am, a total of 27 hours from the time of power loss.

The Administrator submitted a Critical Incident Report #2164-000018-13 to the Ministry of Health outlining the incident and actions taken as a result of the power loss in the home on December 21, 2013. An on-site interview with Administrator and Director of Care confirmed that the home did not have a generator connected to the home that could maintain the essential services in the home for 27 hours as the result of the following:

On December 21 at 10:45pm the home lost power due to an ice storm. For the first four to five hours the home ran on an on-site small generator that provided basic emergency lighting. The generator ran out of diesel at approximately 3:45am on December 22, 2013. At this time the home managed with flashlights and emergency supplies until another generator could be connected.

On December 22 at approximately 4pm an off-site generator arrived from Toromont (generator supply company). An Electrician with Robertson Bright Inc. hooked up the generator to the home. Once the off-site generator was connected to the home and turned on, it was identified that the generator did not have the capacity to maintain all the essential services in the home (230kW generator). Until a larger generator could be obtained, the home chose to connect some of the essential services (kitchen units-stove, freezer, fridge; partial lighting in hallways; lighting in resident rooms; heating in resident rooms; resident-staff communication and response system; and fire alarms including magnetic door locks). The generator was able to run with the limited connections for approximately 30 minutes before it began to generate smoke and eventually became unsafe. The generator was turned off. The home was without generator power from this point in time until 1:45am December 23, 2013 when a larger off-site generator arrived at the home. This larger capacity generator (400kW) was connected to the home and maintained all the essential services from this point in time forward until power was restored in the community for an extended period of time. [s. 19. (4)]

Additional Required Actions:

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



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Loi de 2007 sur les foyers de
soins de longue durée**

Issued on this 5th day of March, 2014

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

A handwritten signature in black ink, appearing to be "J. D. Williams". The signature is written in a cursive style with a large initial "J" and "D".



**Ministry of Health and
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**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

Name of Inspector (ID #) /

Nom de l'inspecteur (No) : AMANDA WILLIAMS (101)

Inspection No. /

No de l'inspection : 2014_158101_0011

Log No. /

Registre no: T-785-13

Type of Inspection /

Genre

d'inspection:

Critical Incident System

Report Date(s) /

Date(s) du Rapport : Mar 5, 2014

Licensee /

Titulaire de permis :

EXTENDICARE TORONTO INC
3000 STEELES AVENUE EAST, SUITE 700,
MARKHAM, ON, L3R-9W2

LTC Home /

Foyer de SLD :

EXTENDICARE GUILDWOOD
60 GUILDWOOD PARKWAY, SCARBOROUGH, ON,
M1E-1N9

Name of Administrator /

Nom de l'administratrice

ou de l'administrateur : ANDRE BARROS

To EXTENDICARE TORONTO INC, you are hereby required to comply with the following order(s) by the date(s) set out below:



**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



**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

Order # /
Ordre no : 001

Order Type /
Genre d'ordre : Compliance Orders, s. 153. (1) (a)

Pursuant to / Aux termes de :

O.Reg 79/10, s. 230. (4) The licensee shall ensure that the emergency plans provide for the following:

1. Dealing with,
 - i. fires,
 - ii. community disasters,
 - iii. violent outbursts,
 - iv. bomb threats,
 - v. medical emergencies,
 - vi. chemical spills,
 - vii. situations involving a missing resident, and
 - viii. loss of one or more essential services.
2. Evacuation of the home, including a system in the home to account for the whereabouts of all residents in the event that it is necessary to evacuate and relocate residents and evacuate staff and others in case of an emergency.
3. Resources, supplies and equipment vital for the emergency response being set aside and readily available at the home.
4. Identification of the community agencies, partner facilities and resources that will be involved in responding to the emergency. O. Reg. 79/10, s. 230 (4).

Order / Ordre :

The licensee shall ensure that medical emergencies and loss of one or more essential services emergency plans are:

- (1) present in the home;
- (2) are in writing;
- (3) are home specific; and
- (4) staff are made aware of and trained in the following plans (but not limited to).

Grounds / Motifs :



**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

1. The home lost power on December 21, 2013. It was confirmed by the Administrator and Director of Care that the home did not have written and home specific emergency plans in place related to loss of power at the time of the incident. Verbal directions for actions to take was provided to staff by the Administrator and Director of Care. (101)

2. The home does not have home specific policies in writing in place that are also available and accessible to staff related to the following emergencies:

- medical emergencies
- loss of one or more essential services (examples include but not limited to loss of power, loss of water, loss of heat, loss of gas). (101)

This order must be complied with by /

Vous devez vous conformer à cet ordre d'ici le : Mar 24, 2014



**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

Order # /

Ordre no : 002

Order Type /

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

Pursuant to / Aux termes de :

O.Reg 79/10, s. 19. (4) The licensee of a home to which subsection (2) or (3) applies shall ensure, not later than six months after the day this section comes into force, that the home has guaranteed access to a generator that will be operational within three hours of a power outage and that can maintain everything required under clauses (1) (a), (b) and (c). O. Reg. 79/10, s. 19 (4).

Order / Ordre :

The licensee shall prepare, submit and implement a plan outlining how the home will ensure they have guaranteed access to a generator that will be operational within three hours of a power outage and that can maintain the following services and equipment in the home:

- heating system
- emergency lighting in hallways, corridors, stairways and exits;
- essential services, including dietary services equipment required to store food at safe temperatures and prepare and deliver meals and snacks, the resident-staff communication and response system, elevators and life support, safety and emergency equipment.

The plan shall outline the home's immediate, short-term and long-term strategies to ensure resident safety until the time in which a generator can be connected to the home and maintain the above listed essential services.

The plan shall be submitted to Amanda Williams by Monday March 24, 2014.
Please email your plan to Amanda.Williams@ontario.ca

Grounds / Motifs :



**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
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**Ministère de la Santé et
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Ordre(s) de l'inspecteur
Aux termes de l'article 153 et/ou
de l'article 154 de la *Loi de 2007 sur les foyers
de soins de longue durée*, L.O. 2007, chap. 8

1. The home lost power on December 21, 2013 at 10:45pm and were unable to have a generator connected to the home that could maintain all the essential services until December 23, 2013 at 1:45am, a total of 27 hours from the time of power loss.

The Administrator submitted a Critical Incident Report #2164-000018-13 to the Ministry of Health outlining the incident and actions taken as a result of the power loss in the home on December 21, 2013. An on-site interview with Administrator and Director of Care confirmed that the home did not have a generator connected to the home that could maintain the essential services in the home for 27 hours as the result of the following:

On December 21 at 10:45pm the home lost power due to an ice storm. For the first four to five hours the home ran on an on-site small generator that provided basic emergency lighting. The generator ran out of diesel at approximately 3:45am on December 22, 2013. At this time the home managed with flashlights and emergency supplies until another generator could be connected. On December 22 at approximately 4pm an off-site generator arrived from Toromont (generator supply company). An Electrician with Robertson Bright Inc. hooked up the generator to the home. Once the off-site generator was connected to the home and turned on, it was identified that the generator did not have the capacity to maintain all the essential services in the home (230kW generator). Until a larger generator could be obtained, the home chose to connect some of the essential services (kitchen units- stove, freezer, fridge; partial lighting in hallways; lighting in resident rooms; heating in resident rooms; resident-staff communication and response system; and fire alarms including magnetic door locks). The generator was able to run with the limited connections for approximately 30 minutes before it began to generate smoke and eventually became unsafe. The generator was turned off. The home was without generator power from this point in time until 1:45am December 23, 2013 when a larger off-site generator arrived at the home. This larger capacity generator (400kW) was connected to the home and maintained all the essential services from this point in time forward until power was restored in the community for an extended period of time. (101)



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

Pursuant to section 153 and/or
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Ordre(s) de l'inspecteur

Aux termes de l'article 153 et/ou
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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 :**

Mar 31, 2014



**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
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Ordre(s) de l'inspecteur
Aux termes de l'article 153 et/ou
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de soins de longue durée*, L.O. 2007, chap. 8

Order # / Ordre no : 003	Order Type / Genre d'ordre : Compliance Orders, s. 153. (1) (a)
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Pursuant to / Aux termes de :

O.Reg 79/10, s. 230. (3) In developing the plans, the licensee shall,
(a) consult with the relevant community agencies, partner facilities and resources that will be involved in responding to the emergency; and
(b) ensure that hazards and risks that may give rise to an emergency impacting the home are identified and assessed, whether the hazards and risks arise within the home or in the surrounding vicinity or community. O. Reg. 79/10, s. 230 (3).

Order / Ordre :

The licensee shall ensure that hazards and risks that may give rise to an emergency impacting the home are identified and assessed, whether the hazards and risks arise within the home or in the surrounding vicinity or community.

The identified hazards and risks shall be developed into a written plan in consultation with community agencies, partner facilities and resources that will be involved in responding to the emergency. Staff shall be educated and trained once the plans have been developed then tested.

Grounds / Motifs :



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

Pursuant to section 153 and/or
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**Ministère de la Santé et
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Ordre(s) de l'inspecteur

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

1. The home has not identified or assessed hazards and risks that may give rise to an emergency impacting the home, whether the hazards and risks arise within the home or in the surrounding vicinity or community. This was confirmed by the Administrator, Director of Care, Environmental Manager and Clinical Coordinator.

One example noted of a potential hazard and risks to the home as the result of the surrounding vicinity is the home's risk for flooding. The home is located in a valley and is built on a marsh. As a result, the home is at risk for potential flooding. Currently the home does not have a home specific emergency plan in place for flooding. (101)

This order must be complied with by /

Vous devez vous conformer à cet ordre d'ici le : May 30, 2014



**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
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Ordre(s) de l'inspecteur
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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
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Order(s) of the Inspector

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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.



**Ministry of Health and
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Pursuant to section 153 and/or
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Ordre(s) de l'inspecteur
Aux termes de l'article 153 et/ou
de l'article 154 de la *Loi de 2007 sur les foyers
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^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.



**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

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 5th day of March, 2014

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

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

AMANDA WILLIAMS

Service Area Office /

Bureau régional de services : Ottawa Service Area Office