



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 prévue le Loi de 2007 les foyers de soins de longue

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

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AMENDED Public Copy/Copie du public

Table with 3 columns: Date(s) of inspection, Inspection No, Type of Inspection. Row 1: Mar 19, 20, 22, 23, 27, 28, 2012; 2012\_095105\_0021\_A1; Other

Licensee/Titulaire de permis

RITZ LUTHERAN VILLA
R.R. 5, MITCHELL, ON, N0K-1N0

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

RITZ LUTHERAN VILLA
PART LOT 16, CON 2, LOGAN TWN, R.R. #5, MITCHELL, ON, N0K-1N0

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

JUNE OSBORN (105)

Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct an Other inspection.

During the course of the inspection, the inspector(s) spoke with the Administrator, the Director of Care, the Assistant Director of Care, the Human Resources Manager, the Finance Manager, two Registered Nurses, four Physicians, five Registered Practical Nurses, two Personal Support Workers, the Staffing Clerk and the Clinical Care Coordinator.

During the course of the inspection, the inspector(s) reviewed the events of the weekend, the critical incident as submitted, the relevant documents pertaining to the medication system, medical records, staffing schedules, and policies and procedures.

The following Inspection Protocols were used during this inspection:

Medication

Sufficient Staffing

Training and Orientation

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON-RESPECT DES EXIGENCES

<b>Legend</b>  WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order	<b>Legendé</b>  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. 76. Training**  
**Specifically failed to comply with the following subsections:**

**s. 76. (2) Every licensee shall ensure that no person mentioned in subsection (1) performs their responsibilities before receiving training in the areas mentioned below:**

- 1. The Residents' Bill of Rights.**
- 2. The long-term care home's mission statement.**
- 3. The long-term care home's policy to promote zero tolerance of abuse and neglect of residents.**
- 4. The duty under section 24 to make mandatory reports.**
- 5. The protections afforded by section 26.**
- 6. The long-term care home's policy to minimize the restraining of residents.**
- 7. Fire prevention and safety.**
- 8. Emergency and evacuation procedures.**
- 9. Infection prevention and control.**
- 10. All Acts, regulations, policies of the Ministry and similar documents, including policies of the licensee, that are relevant to the person's responsibilities.**
- 11. Any other areas provided for in the regulations. 2007, c. 8, s. 76. (2).**

**Findings/Faits saillants :**

1. Staff interview with a Registered Nurse revealed;  
 The staff schedule for March 16, 2012 indicated an agency nurse was to arrive at 1900 hours. The nurse arrived late at 1905 hours, and indicated that she was replacing the scheduled nurse who was sick. This person indicated she had never worked at the home before and had no computer pass words or knowledge of the home.  
 The Registered Nurse who was finishing her shift at 1900 hours March 16, 2012 called the Assistant Director of Care who was on call to alert of the this situation at 1915 hours March 16, 2012. The Director of Care was notified of this situation by the Registered Nurse at 2110 hours March 16, 2012. [LTCHA,2007 S.O.2007, c.8, s.76(2)  
 1.2.3.4.5.6.7.8.9.10.11.]

Interview with the Human Resources Manager revealed there are no orientation policies or procedures for agency staff. The Director of Care was unsure where any such policies were and was unable to provide any.

**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. 75. Screening measures**

Specifically failed to comply with the following subsections:

s. 75. (1) Every licensee of a long-term care home shall ensure that screening measures are conducted in accordance with the regulations before hiring staff and accepting volunteers. 2007, c. 8, s. 75. (1).

s. 75. (2) The screening measures shall include criminal reference checks, unless the person being screened is under 18 years of age. 2007, c. 8, s. 75. (2).

s. 75. (3) For the purposes of subsection (1), a staff member who is agency staff, as that term is defined in subsection 74 (2), is considered to be hired when he or she first works at the home. 2007, c. 8, s. 75. (3).

**Findings/Faits saillants :**

1. The long term care home is unable to provide evidence of screening measures including criminal reference checks for staff of the employment agency.

[LTCHA,2007,S.O.2007,c.8,s.75(1)(2)(3)]

**Additional Required Actions:**

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

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**WN #3: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 74. Continuity of care – limit on temporary, casual or agency staff**

Specifically failed to comply with the following subsections:

s. 74. (2) In subsection (1), "agency staff" means staff who work at the long-term care home pursuant to a contract between the licensee and an employment agency or other third party. 2007, c. 8, s. 74. (2).

**Findings/Faits saillants :**

1. The long term care home is unable to provide a contract between the licensee and the employment agency in question.

**Additional Required Actions:**

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

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**WN #4: The Licensee has failed to comply with O.Reg 79/10, s. 131. Administration of drugs**

Specifically failed to comply with the following subsections:

s. 131. (3) Subject to subsections (4) and (5), the licensee shall ensure that no person administers a drug to a resident in the home unless that person is a physician, dentist, registered nurse or a registered practical nurse. O. Reg. 79/10, s. 131 (3).

**Findings/Faits saillants :**

1. The Physicians Orders Audit Report of March 16, 2012-March 23, 2012 reveals that medications were administered by the person who reported to work from the staffing agency, to six residents.

Staff interview with a Registered Practical Nurse confirmed these were the medications given by the person who reported to work from the staffing agency.

**Additional Required Actions:**

**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 be implemented voluntarily.**

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**WN #5: The Licensee has failed to comply with O.Reg 79/10, s. 46. Every licensee of a long-term care home shall ensure that every member of the staff who performs duties in the capacity of registered nurse, registered practical nurse or registered nurse in the extended class has the appropriate current certificate of registration with the College of Nurses of Ontario. O. Reg. 79/10, s. 46.**

**Findings/Faits saillants :**

1. The Critical Incident Report C555-000014-12 submitted by the Director of Care reveals Friday March 16th, 2012 an RN from a staffing agency came into the facility to work from 1900-0700. This RN worked overnight and on Saturday morning March 17th, 2012 the home was contacted by OPP, and informed that the nurse was detained in police custody. She had been pulled over for an infraction of the highway motor vehicle act. This nurse's identification and personal information that was given to the police did not add up and it caused them to investigate fully. The Director of Care came into the facility on Saturday March 17th, 2012 and checked the narcotic counts and other medications to ensure nothing was given that was not to be given. The police contacted the home again Saturday March 17th @ 1600 and asked that all families be called and informed of the breach of security. The person in police custody who came into the facility on Friday night is not an RN, she has falsely assumed the identity of an RN.

Staff interview with the Administrator confirms the home expects the staffing agency to verify registration of its employees and only provide Registered Nurses who are currently certified with the College of Nurses of Ontario.

**Additional Required Actions:**

**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 be implemented voluntarily.**

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**WN #6: The Licensee has failed to comply with O.Reg 79/10, s. 8. Policies, etc., to be followed, and records Specifically failed to comply with the following subsections:**

**s. 8. (1) Where the Act or this Regulation requires the licensee of a long-term care home to have, institute or otherwise put in place any plan, policy, protocol, procedure, strategy or system, the licensee is required to ensure that the plan, policy, protocol, procedure, strategy or system,**  
**(a) is in compliance with and is implemented in accordance with applicable requirements under the Act; and**  
**(b) is complied with. O. Reg. 79/10, s. 8 (1).**

**Findings/Faits saillants :**

1. Pharmacy Policy 6-7 Shift Change Narcotic Count date 02/05 indicates "Two registered staff (outgoing and incoming), together:

a)count the actual quantity of medications remaining

b) confirm actual quantity is the same as the amount recorded on the 'Individual Narcotic Medication Record'

c)record the date, time, quantity of medication and sign in the appropriate spaces on the 'Shift Change Narcotic' form.

The Shift Change Narcotic Count form March 16, 2012 was missing the 2300 hour narcotic count.

Staff interview with Registered Practical Nurse confirmed this count was not done.[O.Reg. 79/10, s.8(1)(b)]



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  
prévus le Loi de 2007 les  
foyers de soins de longue

Issued on this ~~28th day of March, 2012~~ 4<sup>th</sup> day of May, 2012 *JP*

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

A handwritten signature in cursive script, appearing to read "June 13/12".



**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*

**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**

*A m e n d e d*) **Public Copy/Copie du public**

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<b>Name of Inspector (ID #) / Nom de l'inspecteur (No) :</b>	JUNE OSBORN (105)
<b>Inspection No. / No de l'inspection :</b>	2012_095105_0021 <i>— A /</i>
<b>Type of Inspection / Genre d'inspection:</b>	Other
<b>Date of Inspection / Date de l'inspection :</b>	Mar 19, 20, 22, 23, 27, 28, 2012
<b>Licensee / Titulaire de permis :</b>	RITZ LUTHERAN VILLA R.R. 5, MITCHELL, ON, N0K-1N0
<b>LTC Home / Foyer de SLD :</b>	RITZ LUTHERAN VILLA PART LOT 16, CON 2, LOGAN TWN, R.R. #5, MITCHELL, ON, N0K-1N0
<b>Name of Administrator / Nom de l'administratrice ou de l'administrateur :</b>	BOB PETRUSHEWSKY

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To RITZ LUTHERAN VILLA, 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

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**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. 76. (2) Every licensee shall ensure that no person mentioned in subsection (1) performs their responsibilities before receiving training in the areas mentioned below:

1. The Residents' Bill of Rights.
2. The long-term care home's mission statement.
3. The long-term care home's policy to promote zero tolerance of abuse and neglect of residents.
4. The duty under section 24 to make mandatory reports.
5. The protections afforded by section 26.
6. The long-term care home's policy to minimize the restraining of residents.
7. Fire prevention and safety.
8. Emergency and evacuation procedures.
9. Infection prevention and control.
10. All Acts, regulations, policies of the Ministry and similar documents, including policies of the licensee, that are relevant to the person's responsibilities.
11. Any other areas provided for in the regulations. 2007, c. 8, s. 76. (2).

**Order / Ordre :**

The licensee shall prepare, submit, and implement a plan for achieving compliance with LTCHA, 2007 S.O. 2007, c.8, s.76(2)1.2.3.4.5.6.7.8.9.10.11. to ensure that no person mentioned in subsection(1) performs their responsibilities before receiving training in the areas mentioned below:

1. The Resident's Bill of Rights.
2. The long term care home's mission statement.
3. The long term care home's policy to promote zero tolerance of abuse and neglect of residents.
4. The duty under section 24 to make mandatory reports.
5. The protections afforded by section 26.
6. The long term care home's policy to minimize the restraining of residents.
7. Fire Prevention and safety.
8. Emergency and evacuation procedures.
9. Infection prevention and control.
10. All Acts, regulations, policies of the Ministry and similar documents, including policies of the licensee, that are relevant to the person's responsibilities.
11. Any other areas provided for in the regulations.

The plan shall also include the responsibilities of the on-call manager.

Please submit the plan to [LondonSAO.moh@ontario.ca](mailto:LondonSAO.moh@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  
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. Staff interview with a Registered Nurse revealed:

The staff schedule for March 16, 2012 indicated an agency nurse was to arrive at 1900 hours. The nurse arrived late at 1905 hours, and indicated that she was replacing the scheduled nurse who was sick. This person indicated she had never worked at the home before and had no computer pass words or knowledge of the home.

Interview with the Human Resources Manager revealed there are no orientation policies or procedures for agency staff. The Director of Care was unsure where any such policies were and was unable to provide. (105)

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

**Vous devez vous conformer à cet ordre d'ici le :** Apr 09, 2012

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<b>Order # /</b>	<b>Order Type /</b>
<b>Ordre no :</b> 002	<b>Genre d'ordre :</b> Compliance Orders, s. 153. (1) (b)

**Pursuant to / Aux termes de :**

LTCHA, 2007 S.O. 2007, c.8, s. 75. Screening measures

**Order / Ordre :**

The licensee shall prepare, submit, and implement a plan to ensure:

s.75(1)that screening measures are conducted in accordance with the regulations before hiring staff and accepting volunteers.

s.75(2)The screening measures shall include criminal reference checks, unless the person being screened is under 18 years of age..

s.75(3) For the purposes of subsection (1), a staff member who is agency staff, as that term is defined in subsection 74(2), is considered to be hired when he or she first works at the home.

**Grounds / Motifs :**

1. The long term care home is unable to provide evidence of screening measures including criminal reference checks for staff of the employment agency.

Please submit the plan to LondonSAO.moh@ontario.ca. (105)

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

**Vous devez vous conformer à cet ordre d'ici le :** Apr 09, 2012





**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*

**Order # /**  
**Ordre no :** 003      **Order Type /**  
**Genre d'ordre :** Compliance Orders, s. 153. (1) (a)

**Pursuant to / Aux termes de :**

LTCHA, 2007 S.O. 2007, c.8, s. 74. (2) In subsection (1),  
"agency staff" means staff who work at the long-term care home pursuant to a contract between the licensee and  
an employment agency or other third party. 2007, c. 8, s. 74. (2).

**Order / Ordre :**

The licensee shall ensure contracts are maintained between the long term care home and any employment  
agency or other third party.

**Grounds / Motifs :**

1. The long term care home is unable to provide a contract between the licensee and the employment agency in  
question. (105)

**This order must be complied with by /**  
**Vous devez vous conformer à cet ordre d'ici le :** Apr 03, 2012



**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

**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  
55 St. Clair Avenue West  
Suite 800, 8th Floor  
Toronto, ON M4V 2Y2  
Fax: 416-327-7603

When service is made by registered mail, it is deemed to be made on the fifth day after the day of mailing 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  
55 St. Clair Avenue West  
Suite 800, 8th Floor  
Toronto, ON M4V 2Y2  
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**

**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

**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  
55, avenue St. Clair Ouest  
8e étage, bureau 800  
Toronto (Ontario) M4V 2Y2  
Télécopieur : 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.

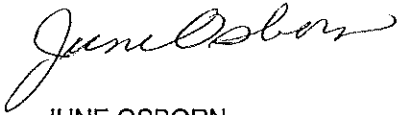
En vertu de l'article 164 de la Loi de 2007 sur les foyers de soins de longue durée, le titulaire de permis a le droit d'interjeter appel, auprès de la Commission d'appel et de révision des services de santé, de la décision rendue par le directeur au sujet d'une demande de réexamen d'un ordre ou d'ordres 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  
55, avenue St. Clair Ouest  
8e étage, bureau 800  
Toronto (Ontario) M4V 2Y2  
Télécopieur : 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 ~~28th day of March, 2012~~ 4th day of May, 2012 *jo*

Signature of Inspector /  
Signature de l'inspecteur : 

Name of Inspector /  
Nom de l'inspecteur : JUNE OSBORN

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