



**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**

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347 Preston St, 4th Floor
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Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Feb 12, 2013	2013_178102_0003	001907-12	Follow up

Licensee/Titulaire de permis

**CHARTWELL MASTER CARE LP
100 Milverton Drive, Suite 700, MISSISSAUGA, ON, L5R-4H1**

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

**BALLYCLIFFE LODGE NURSING HOME
70 STATION STREET, AJAX, ON, L1S-1R9**

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

WENDY BERRY (102)

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): January 10 and 11, 2013.

During the course of the inspection, the inspector(s) spoke with the Administrator, the Environmental Services Manager, a Chartwell Corporate Environmental Consultant, a Chartwell Corporate Project Manager, several registered and non registered nursing staff, other program staff, several visitors and several residents.

During the course of the inspection, the inspector(s) followed up on two compliance orders; checked preventative and other maintenance records; toured resident and non resident areas of the home; checked a number of incremental HVAC system units; reviewed documentation related to a remediation project; reviewed posted Resident Council meeting minutes.

The following Inspection Protocols were used during this inspection:
Accommodation Services - Maintenance

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES	
Legend	Legendé
WN – Written Notification	WN – Avis écrit
VPC – Voluntary Plan of Correction	VPC – Plan de redressement volontaire
DR – Director Referral	DR – Aiguillage au directeur
CO – Compliance Order	CO – Ordre de conformité
WAO – Work and Activity Order	WAO – Ordres : travaux et activités



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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.)

The following constitutes written notification of non-compliance under paragraph 1 of section 152 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.

Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.

WN #1: The Licensee has failed to comply with O.Reg 79/10, s. 90. Maintenance services

Specifically failed to comply with the following:

s. 90. (2) The licensee shall ensure that procedures are developed and implemented to ensure that,

(a) electrical and non-electrical equipment, including mechanical lifts, are kept in good repair, and maintained and cleaned at a level that meets manufacturer specifications, at a minimum; O. Reg. 79/10, s. 90 (2).

s. 90. (2) The licensee shall ensure that procedures are developed and implemented to ensure that,

(c) heating, ventilation and air conditioning systems are cleaned and in good state of repair and inspected at least every six months by a certified individual, and that documentation is kept of the inspection; O. Reg. 79/10, s. 90 (2).

Findings/Faits saillants :



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1. Electrical heating and air conditioning system incremental units are provided in residents' bedrooms and other areas throughout the long term care home. The units are interconnected by a piping system which is connected to a boiler for heating and a chiller for air conditioning.

During inspection # 2012_028102_0032 conducted on July 24 and 25, 2012, it was determined that the incremental units were not maintained and cleaned at a level that meets manufacturers' specifications. Compliance order #001 was issued with a compliance date of September 21, 2012, which was extended to October 21, 2012 and then to November 16, 2012 at the request of the licensee.

On October 22, 2012, a faxed document, with a total of 4 pages including the cover sheet, was received from the Administrator of Ballycliffe Lodge. The document sets out an action plan for complying with compliance order# 001 noted above. Information provided in the plan identifies that a tender process will be used to procure a general contractor for initial cleaning and maintenance of the incremental units and that the work will be completed by December 31, 2012.

On October 23, 2012 a telephone conversation was held with a representative of the licensee regarding the faxed document. The amended compliance date of November 16, 2012 for the compliance orders was confirmed during this discussion.

During a follow up inspection conducted on January 10 and 11, 2013, 5 incremental units were identified by the home's management as having been removed, cleaned, serviced as needed, and moisture related remediation work conducted by a contractor in rooms 117, 119, 217, 218 and 306 following the inspection on July 24 and 25, 2012. Action was not identified to have been taken to resolve excess sludge/biofilm and standing water accumulation in the drip tray of the incremental unit in an identified room which was noted in the grounds of compliance orders 001 and 002, inspection # 2012_028102_0032.

The Environmental Services manager, an Environmental Consultant and a Project Manager were all present at the home during day one of the inspection on January 10, 2013. It was confirmed that the incremental units throughout the home, other than in the 5 bedrooms identified above, were not being maintained and cleaned, other than to check and clean filters on a monthly basis. At the time of inspection, it was stated both verbally and in a written "Operational Plan Submission", dated January 07,



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2013 that the incremental units were all going to be removed and replaced as part of a remediation project involving a "3rd party environmental consultant", with an anticipated completion date of April 19, 2013.

Covers were not being removed from the units to clean or check the condition of the units or to remove the chassis for maintenance. Staff identified that removal of the covers was a potential health risk. Filters were confirmed as being cleaned; however, many of the filters were dislodged from the underside of the units at the time of inspection on January 10 and 11, 2013.

Procedures have not been implemented to ensure that incremental units in use in the home have been maintained and cleaned at a level that meets manufacturers' specifications which poses a potential risk to the health, comfort, safety and well being of residents. [s. 90. (2) (a)]

2. During inspection # 2012_028102_0032 conducted on July 24 and 25, 2012, it was determined that the incremental units were not maintained in a good state of repair and were not kept clean. Compliance order #002 was issued with a compliance date of September 21, 2012, which was extended to October 21, 2012 and then to November 16, 2012 at the request of the licensee.

On October 22, 2012, a faxed document, with a total of 4 pages including the cover sheet, was received from the Administrator of Ballycliffe Lodge. The document sets out an action plan for complying with compliance order # 002 noted above. Information provided in the plan identifies that "contact with the HVAC service provider to be done immediately and contract finalized as soon as possible to be implemented 2013". The planned completion date for the cleaning of the incremental heating/cooling units by a general contractor was identified to be December 31, 2012.

On October 23, 2012 a telephone conversation was held with a representative of the licensee regarding the faxed document. The amended compliance date of November 16, 2012 for the compliance order was confirmed during this discussion.

It was also confirmed during the inspection on January 10 and 11, 2013 that the incremental units, which are part of the homes HVAC system, have not been inspected by a certified individual. Documentation was not available to support that the system units have ever been inspected by a certified individual, other than for



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specific repairs.

A 3rd party consultant who conducted a mould assessment at the site on August 21 to 23, 2012 determined that when the chiller connected to the incremental units is operational and the system is in air conditioning mode, incremental units drip trays and piping connecting the incremental units were a source of moisture damage/contamination of building surfaces throughout the home creating conditions identified to be conducive to mould growth. Pipe insulation was identified to be damaged in a number of areas throughout the home.

Procedures have not been developed and implemented to ensure that the incremental heating and cooling units are cleaned and in a good state of repair; and that the incremental units and the piping system connected to the units, which are part of the home's HVAC system, are inspected at least every 6 months by a certified individual. The current condition of the home's incremental unit heating and air conditioning system continues to be a potential risk to the health, comfort, safety and well being of residents. [s. 90. (2) (c)]

Additional Required Actions:

CO # - 001, 002 will be served on the licensee. Refer to the "Order(s) of the Inspector".

Issued on this 12th day of February, 2013

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

A handwritten signature in black ink, appearing to read "Vandy Bery", is written over a large rectangular box.



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section 154 of the *Long-Term Care
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**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) : WENDY BERRY (102)

Inspection No. /

No de l'inspection : 2013_178102_0003

Log No. /

Registre no: 001907-12

Type of Inspection /

Genre d'inspection: Follow up

Report Date(s) /

Date(s) du Rapport : Feb 12, 2013

Licensee /

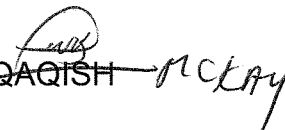
Titulaire de permis : CHARTWELL MASTER CARE LP
100 Milverton Drive, Suite 700, MISSISSAUGA, ON,
L5R-4H1

LTC Home /

Foyer de SLD : BALLYCLIFFE LODGE NURSING HOME
70 STATION STREET, AJAX, ON, L1S-1R9

Name of Administrator /

**Nom de l'administratrice
ou de l'administrateur :**

DUNA QAOISH 

To CHARTWELL MASTER CARE LP, you are hereby required to comply with the following order(s) by the date(s) set out below:



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Order(s) of the Inspector
Pursuant to section 153 and/or
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Order # /	Order Type /
Ordre no : 001	Genre d'ordre : Compliance Orders, s. 153. (1) (a)

Linked to Existing Order /
Lien vers ordre existant: 2012_028102_0032, CO #001;

Pursuant to / Aux termes de :

O.Reg 79/10, s. 90. (2) The licensee shall ensure that procedures are developed and implemented to ensure that,

(a) electrical and non-electrical equipment, including mechanical lifts, are kept in good repair, and maintained and cleaned at a level that meets manufacturer specifications, at a minimum;

(b) all equipment, devices, assistive aids and positioning aids in the home are kept in good repair, excluding the residents' personal aids or equipment;

(c) heating, ventilation and air conditioning systems are cleaned and in good state of repair and inspected at least every six months by a certified individual, and that documentation is kept of the inspection;

(d) all plumbing fixtures, toilets, sinks, grab bars and washroom fixtures and accessories are maintained and kept free of corrosion and cracks;

(e) gas or electric fireplaces and heat generating equipment other than the heating system referred to in clause (c) are inspected by a qualified individual at least annually, and that documentation is kept of the inspection;

(f) hot water boilers and hot water holding tanks are serviced at least annually, and that documentation is kept of the service;

(g) the temperature of the water serving all bathtubs, showers, and hand basins used by residents does not exceed 49 degrees Celsius, and is controlled by a device, inaccessible to residents, that regulates the temperature;

(h) immediate action is taken to reduce the water temperature in the event that it exceeds 49 degrees Celsius;

(i) the temperature of the hot water serving all bathtubs and showers used by residents is maintained at a temperature of at least 40 degrees Celsius;

(j) if the home is using a computerized system to monitor the water temperature, the system is checked daily to ensure that it is in good working order; and

(k) if the home is not using a computerized system to monitor the water temperature, the water temperature is monitored once per shift in random locations where residents have access to hot water. O. Reg. 79/10, s. 90 (2).

Order / Ordre :



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The licensee will develop and implement procedures to ensure that the electrical heating and air conditioning system incremental units located in the long term care home are kept in good repair and are maintained and cleaned at a level that meets manufacturers' specifications.

Grounds / Motifs :

1. Electrical heating and air conditioning system incremental units are provided in residents' bedrooms and other areas throughout the long term care home. The units are interconnected by a piping system which is connected to a boiler for heating and a chiller for air conditioning.

During inspection # 2012_028102_0032 conducted on July 24 and 25, 2012, it was determined that the incremental units were not maintained and cleaned at a level that meets manufacturers' specifications. Compliance order #001 was issued with a compliance date of September 21, 2012, which was extended to October 21, 2012 and then to November 16, 2012 at the request of the licensee.

On October 22, 2012, a faxed document, with a total of 4 pages including the cover sheet, was received from the Administrator of Ballycliffe Lodge. The document sets out an action plan for complying with compliance order# 001 noted above. Information provided in the plan identifies that a tender process will be used to procure a general contractor for initial cleaning and maintenance of the incremental units and that the work will be completed by December 31, 2012.

On October 23, 2012 a telephone conversation was held with a representative of the licensee regarding the faxed document. The amended compliance date of November 16, 2012 for the compliance orders was confirmed during this discussion.

During a follow up inspection conducted on January 10 and 11, 2013, 5 incremental units were identified by the home's management as having been removed, cleaned, serviced as needed, and moisture related remediation work conducted by a contractor in rooms 117, 119, 217, 218 and 306 following the inspection on July 24 and 25, 2012. Action was not identified to have been taken to resolve excess sludge/biofilm and standing water accumulation in the drip tray of the incremental unit in an identified room which was noted in the



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grounds of compliance orders 001 and 002, inspection # 2012_028102_0032.

The Environmental Services manager, an Environmental Consultant and a Project Manager were all present at the home during day one of the inspection on January 10, 2013. It was confirmed that the incremental units throughout the home, other than in the 5 bedrooms identified above, were not being maintained and cleaned, other than to check and clean filters on a monthly basis. At the time of inspection, it was stated both verbally and in a written "Operational Plan Submission", dated January 07, 2013 that the incremental units were all going to be removed and replaced as part of a remediation project involving a "3rd party environmental consultant", with an anticipated completion date of April 19, 2013.

Covers were not being removed from the units to clean or check the condition of the units or to remove the chassis for maintenance. Staff identified that removal of the covers was a potential health risk. Filters were confirmed as being cleaned; however, many of the filters were dislodged from the underside of the units at the time of inspection on January 10 and 11, 2013.

Procedures have not been implemented to ensure that incremental units in use in the home have been maintained and cleaned at a level that meets manufacturers' specifications which poses a potential risk to the health, comfort, safety and well being of residents.

(102)

This order must be complied with by /
Vous devez vous conformer à cet ordre d'ici le : May 20, 2013



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Order(s) of the Inspector
Pursuant to section 153 and/or
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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: 2012_028102_0032, CO #002;

Pursuant to / Aux termes de :

O.Reg 79/10, s. 90. (2) The licensee shall ensure that procedures are developed and implemented to ensure that,

(a) electrical and non-electrical equipment, including mechanical lifts, are kept in good repair, and maintained and cleaned at a level that meets manufacturer specifications, at a minimum;

(b) all equipment, devices, assistive aids and positioning aids in the home are kept in good repair, excluding the residents' personal aids or equipment;

(c) heating, ventilation and air conditioning systems are cleaned and in good state of repair and inspected at least every six months by a certified individual, and that documentation is kept of the inspection;

(d) all plumbing fixtures, toilets, sinks, grab bars and washroom fixtures and accessories are maintained and kept free of corrosion and cracks;

(e) gas or electric fireplaces and heat generating equipment other than the heating system referred to in clause (c) are inspected by a qualified individual at least annually, and that documentation is kept of the inspection;

(f) hot water boilers and hot water holding tanks are serviced at least annually, and that documentation is kept of the service;

(g) the temperature of the water serving all bathtubs, showers, and hand basins used by residents does not exceed 49 degrees Celsius, and is controlled by a device, inaccessible to residents, that regulates the temperature;

(h) immediate action is taken to reduce the water temperature in the event that it exceeds 49 degrees Celsius;

(i) the temperature of the hot water serving all bathtubs and showers used by residents is maintained at a temperature of at least 40 degrees Celsius;

(j) if the home is using a computerized system to monitor the water temperature, the system is checked daily to ensure that it is in good working order; and

(k) if the home is not using a computerized system to monitor the water temperature, the water temperature is monitored once per shift in random locations where residents have access to hot water. O. Reg. 79/10, s. 90 (2).

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The licensee will develop and implement procedures to ensure that heating, ventilation and air conditioning (HVAC) systems, which includes the incremental heating and cooling system units throughout the long term care home, are cleaned, in a good state of repair and are inspected at least every six months by a certified individual, and that documentation of the inspection is kept.

Grounds / Motifs :

1. Electrical heating and air conditioning system incremental units are provided in residents' bedrooms and other areas throughout the long term care home. The units are interconnected by pipes which carry water to the units for both heating and cooling functions depending on the season.

During inspection # 2012_028102_0032 conducted on July 24 and 25, 2012, it was determined that the incremental units were not maintained in a good state of repair and were not kept clean. Compliance order #002 was issued with a compliance date of September 21, 2012, which was extended to October 21, 2012 and then to November 16, 2012 at the request of the licensee.

On October 22, 2012, a faxed document, with a total of 4 pages including the cover sheet, was received from the Administrator of Ballycliffe Lodge. The document sets out an action plan for complying with compliance order # 002 noted above. Information provided in the plan identifies that "contact with the HVAC service provider to be done immediately and contract finalized as soon as possible to be implemented 2013". The planned completion date for the cleaning of the incremental heating/cooling units by a general contractor was identified to be December 31, 2012.

On October 23, 2012 a telephone conversation was held with a representative of the licensee regarding the faxed document. The amended compliance date of November 16, 2012 for the compliance order was confirmed during this discussion.

During a follow up inspection conducted on January 10 and 11, 2013, 5 incremental units were identified by the home's management as having been removed, cleaned, serviced as needed, and moisture related remediation work conducted by a contractor in rooms 117, 119, 217, 218 and 306 following the inspection on July 24 and 25, 2012. Action was not identified to have been



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taken to resolve excess sludge/biofilm and standing water accumulation in the drip tray of the incremental unit in an identified room which was noted in the grounds of compliance orders 001 and 002, inspection # 2012_028102_0032.

The Environmental Services manager, an Environmental Consultant and a Project Manager were all present at the home during day one of the inspection on January 10, 2013. It was confirmed that the incremental units throughout the home, other than in the 5 bedrooms identified above, were not being maintained and cleaned, other than to check and clean filters on a monthly basis. At the time of inspection, it was stated both verbally and in a written "Operational Plan Submission", dated January 07, 2013 that the incremental units were all going to be removed and replaced as part of a remediation project involving a "3rd party environmental consultant", with an anticipated completion date of April 19, 2013.

It was also confirmed during the inspection on January 10 and 11, 2013 that the incremental units, which are part of the homes HVAC system, have not been inspected by a certified individual. Documentation was not available to support that the system units have ever been inspected by a certified individual, other than for specific repairs.

A 3rd party consultant who conducted a mould assessment at the site on August 21 to 23, 2012 determined that when the chiller connected to the incremental units is operational and the system is in air conditioning mode, incremental units drip trays and piping connecting the incremental units were a source of moisture damage/contamination of building surfaces throughout the home creating conditions identified to be conducive to mould growth. Pipe insulation was identified to be damaged in a number of areas throughout the home.

Covers are not being removed from the incremental units to clean or check the condition of the units or to remove the chassis for maintenance. Staff identified that removal of the covers was a potential health risk. Filters were confirmed as being cleaned; however, many of the filters were dislodged from the underside of the units at the time of inspection on January 10 and 11, 2013.

Procedures have not been developed and implemented to ensure that the incremental heating and cooling units are cleaned and in a good state of repair; and that the incremental units and the piping system connected to the units, which are part of the home's HVAC system, are inspected at least every 6



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months by a certified individual. The current condition of the home's incremental unit heating and air conditioning system continues to be a potential risk to the health, comfort, safety and well being of residents.

(102)

This order must be complied with by /

Vous devez vous conformer à cet ordre d'ici le : May 20, 2013



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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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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.



**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^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**

Order(s) of the Inspector

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

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

Ordre(s) de l'inspecteur

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

En vertu de l'article 164 de la Loi de 2007 sur les foyers de soins de longue durée, le titulaire de permis a le droit d'interjeter appel, auprès de la Commission d'appel et de révision des services de santé, de la décision rendue par le directeur au sujet d'une demande de réexamen d'un ordre ou d'ordres donnés par un inspecteur. La Commission est un tribunal indépendant du ministère. Il a été établi en vertu de la loi et il a pour mandat de trancher des litiges concernant les services de santé. Le titulaire de permis qui décide de demander une audience doit, dans les 28 jours qui suivent celui où lui a été signifié l'avis de décision du directeur, faire parvenir un avis d'appel écrit aux deux endroits suivants :

À l'attention du registraire
Commission d'appel et de révision
des services de santé
151, rue Bloor Ouest, 9e étage
Toronto (Ontario) M5S 2T5

Directeur
a/s Coordinateur des appels
Direction de l'amélioration de la performance et de la
conformité
Ministère de la Santé et des Soins de longue durée
1075, rue Bay, 11e étage
Ontario, ON
M5S-2B1
Fax: 416-327-7603

La Commission accusera réception des avis d'appel et transmettra des instructions sur la façon de procéder pour interjeter appel. Les titulaires de permis peuvent se renseigner sur la Commission d'appel et de révision des services de santé en consultant son site Web, au www.hsarb.on.ca.

Issued on this 12th day of February, 2013

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

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

WENDY BERRY

**Service Area Office /
Bureau régional de services :** Ottawa Service Area Office