



**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**

Public Copy/Copie du public

Name of Inspector (ID #) / Nom de l'inspecteur (No) :	MARGOT BURNS-PROUTY (106)
Inspection No. / No de l'inspection :	2012_051106_0019
Type of inspection / Genre d'inspection:	Follow up
Date of inspection / Date de l'inspection :	Aug 27, 29, 30, Sep 7, 11, 12, 13, 14, 17, 2012
Licensee / Titulaire de permis :	BOARD OF MANAGEMENT OF THE DISTRICT OF KENORA 1220 Valley Drive, KENORA, ON, P9N-2W7
LTC Home / Foyer de SLD :	NORTHWOOD LODGE 51 Highway 105, P.O. Box 420, RED LAKE, ON, P0V-2M0
Name of Administrator / Nom de l'administratrice ou de l'administrateur :	DORIS COGHILL

To BOARD OF MANAGEMENT OF THE DISTRICT OF KENORA, 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

Order # /
Ordre no : 001

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

Linked to Existing Order /
Lien vers ordre existant: 2011_104196_0011, CO #901

Pursuant to / Aux termes de :

LTCHA, 2007 S.O. 2007, c.8, s. 8. (3) Every licensee of a long-term care home shall ensure that at least one registered nurse who is both an employee of the licensee and a member of the regular nursing staff of the home is on duty and present in the home at all times, except as provided for in the regulations. 2007, c. 8, s. 8 (3).

Order / Ordre :

The licensee shall prepare, submit and implement a plan for achieving compliance with s. 8 (3). The compliance plan shall include how the licensee will ensure that the home is staffed by at least one registered nurse, on duty and present in the home at all times.

This plan must be submitted in writing to Inspector Margot Burns-Prouty at 159 Cedar Street, Suite 603, Sudbury ON P3E 6A5 or by fax at 1-705-564-3133 on or before September 24, 2012. Full compliance with this order shall be by December 31, 2012.

Grounds / Motifs :

1. Inspector 106 reviewed the nursing schedule from July 1, 2012 to August 29, 2012 and found that during 33 shifts a registered nurse (RN) was not on duty and present in the home. The shifts where a RN was not on duty and present in the home at all times are as follows:

EVENING Shift (3 pm - 11 pm):

-July 2, 9 10, 14, 15, 16, 20, 23, 24, 30, and 31, 2012
-August 7, 11, 12, 13, 20, and 21, 2012

NIGHT Shift (11 pm - 7 am):

-July 5, 6, 12, 18, 19, 21, 26, and 27, 2012
-August 2, 3, 9, 10, 15, 16, 23, and 24, 2012 (106)

2. On August 30, 2012, staff member # S-100, reported that since December 28, 2012, they have been working as the designate Administrator and DOC, Monday to Friday, while the actual Administrator/DOC is on holidays. The Administrator/DOC is not expected to return from holidays until March 2012. When staff member # S-100 is working as Administrator or DOC there is no other RN working during the day shift.

The licensee failed to ensure that there is at least one registered nurse who is an employee of the licensee and a member of the regular nursing staff on duty and present at all times. [LTCHA, 2007, S. O. 2007, c. 8, s. 8 (3).

A previous compliance order was issued under LTCHA, 2007, S. O. c. 8, s. 8 (3): 2011_104196_0011 dated June 30, 2012. (106)

This order must be complied with by /
Vous devez vous conformer à cet ordre d'ici le : Dec 31, 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 : 002

Order Type /

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

Linked to Existing Order /

Lien vers ordre existant: 2011_104196_0011, CO #902

Pursuant to / Aux termes de :

LTCHA, 2007 S.O. 2007, c.8, s. 73. Every licensee of a long-term care home shall ensure that all the staff of the home, including the persons mentioned in sections 70 to 72,

(a) have the proper skills and qualifications to perform their duties; and

(b) possess the qualifications provided for in the regulations. 2007, c. 8, s. 73..

Order / Ordre :

The licensee shall prepare, submit and implement a plan for achieving compliance with s. 73. The compliance plan shall include how the licensee will ensure that the staff of the home have the proper skills and qualifications to perform their duties and meet the qualifications provided for in the regulations. Specifically, the licensee shall include how it will ensure staff hired in the capacity of Personal Support Workers have the qualifications as identified in the regulations. This plan must be submitted in writing to Inspector Margot Burns-Prouty at 159 Cedar Street, Suite 603, Sudbury ON P3E 6A5 or by fax at 1-705-564-3133 on or before September 24, 2012. Full compliance with this order shall be by December 31, 2012.

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. On August 29, 2012, staff member # S-100 provided inspector 106 with a list of PSWs that were hired since July 1, 2011 and are currently employed by the home. Staff member # S-100 indicated by writing on this list the PSWs who currently have a PSW certificate or are enrolled in a nursing program.

5 PSWs had the words, "enrolled PSW - sept", "enrolled" or "enrolled sept" next to their name, staff member S-100, reported that these PSWs did not currently have a PSW certificate and were enrolled in the PSW course that would be starting Sept 2012.

Staff member # S-100 also provided inspector 106 with the nursing schedule from July 1, 2012 to August 29, 2012. Inspector 106 reviewed the nursing schedule and found that PSWs without the required qualifications worked as a PSW on the following days:

Staff member # S-101 worked on the following days as a PSW since July 1, 2012:

-July 1, 3, 4, 5, 6, 7, 8, 10, 11, 12, 16, 17, 19, 23, 24, 27, 28, 29, and 31, 2012
-Aug 1, 2, 3, 5, 7, 8, 9, 13, 14, 15, 16, 17, 21, 22, 23, 25, 26, 28, and 29, 2012

Staff member # S-102 worked on the following days as a PSW, since July 1, 2012:

-July 1, 3, 5, and 10, 2012
-Aug 19, 2012

Staff member # S-103, worked on the following days as a PSW, since July 1, 2012:

-July 11, 12, 13, 15, 16, 17, 19, 20, 23, 25, 26, 27, and 30, 2012
-August 1, 2, 3, 7, 9, 11, 12, 14, 15, 17, and 18, 2012.

Staff member # S-104, worked on the following days as a PSW, since July 1, 2012:

-July 1, 2, 4, 6, 7, 8, 9, 10, 11, 12, 16, 17, 18, 20, 22, 24, 25, 28, 29, 30, and 31, 2012
-August 1, 3, 6, 7, 8, 9, 10, 14, 15, 17, 20, 21, 22, 24, 26, 27, 28, and 29, 2012.

Staff member # S-105, worked on the following days as a PSW, since July 1, 2012:

-July 2, 3, 4, 5, 6, 8, 10, 12, 13, 14, 15, 17, 18, 19, 21, 22, 23, 24, 25, 27, 28, 30, and 31, 2012
-Aug 1, 20, 21, 24, 25, 27, 28, and 29, 2012.

The licensee failed to ensure that all staff of the home have the proper skills and qualifications to perform their duties and possess the qualifications provided for in the regulations. [LTCHA, 2007, S. O. 2007, c. 8, s. 73] (106)

A previous compliance order was issued under LTCHA, 2007, S. O. c. 8, s. 73: 2011_104196_0011 dated June 30, 2012. (106)

This order must be complied with by /

Vous devez vous conformer à cet ordre d'ici le : Dec 31, 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.



**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
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

Dire
a/s
Dire
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8e é
Tor
Tél

The written request for review must be served personally, by registered mail, or by fax upon:

Director
c/o Appeals Clerk
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

La Commission accusera réception des avis d'appel et transmettra des instr
permis peuvent se renseigner sur la Commission d'appel et de révision des

Issued on this 17th day of September, 2012

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

**Name of Inspector /
Nom de l'inspecteur :** MARGOT BURNS-PROUTY

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



**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**

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

Sudbury Service Area Office
159 Cedar Street, Suite 603
SUDBURY, ON, P3E-6A5
Telephone: (705) 564-3130
Facsimile: (705) 564-3133

Bureau régional de services de Sudbury
159, rue Cedar, Bureau 603
SUDBURY, ON, P3E-6A5
Téléphone: (705) 564-3130
Télécopieur: (705) 564-3133

Public Copy/Copie du public

Date(s) of inspection/Date(s) de l'inspection	Inspection No/ No de l'inspection	Type of inspection/Genre d'inspection
Aug 27, 29, 30, Sep 7, 11, 12, 13, 14, 17, 2012	2012_051106_0019	Follow up
Licensee/Titulaire de permis		
BOARD OF MANAGEMENT OF THE DISTRICT OF KENORA 1220 Valley Drive, KENORA, ON, P9N-2W7		
Long-Term Care Home/Foyer de soins de longue durée		
NORTHWOOD LODGE 51 Highway 105, P.O. Box 420, RED LAKE, ON, P0V-2M0		
Name of inspector(s)/Nom de l'inspecteur ou des inspecteurs		
MARGOT BURNS-PROUTY (106)		

Inspection Summary/Résumé de l'Inspection

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

During the course of the inspection, the inspector(s) spoke with Assistant Director of Care (ADOC), Registered Nurses (RN), Registered Practical Nurses (RPN), Personal Support Workers (PSW), Family Members, and Residents.

During the course of the inspection, the inspector(s) conducted a walk-through of resident home areas and various common areas, observed care provided to residents in the home.

The following inspection Protocols were used during this inspection:

Sufficient Staffing

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
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. 8. Nursing and personal support services

Specifically failed to comply with the following subsections:

s. 8. (3) Every licensee of a long-term care home shall ensure that at least one registered nurse who is both an employee of the licensee and a member of the regular nursing staff of the home is on duty and present in the home at all times, except as provided for in the regulations. 2007, c. 8, s. 8 (3).

Findings/Faits saillants :

1. On August 30, 2012, staff member # S-100, reported that since December 28, 2012 they have been working as the designate Administrator and DOC, Monday to Friday, day shift, while the actual Administrator/DOC is on holidays. The Administrator/DOC is not expected to return from holidays until March 2013. When staff member #S-100 is working as Administrator or DOC there is no other RN working during the day shift.

2. Inspector 106 reviewed the nursing schedule from July 1, 2012 to August 29, 2012 and found that during 33 shifts a registered nurse (RN) was not on duty and present in the home during various evening and night shifts. The shifts where a RN was not on duty and present in the home at all times are as follows:

EVENING Shift (3 pm - 11 pm):

-July 2, 9 10, 14, 15, 16, 20, 23, 24, 30, and 31, 2012
 -August 7, 11, 12, 13, 20, and 21, 2012

NIGHT Shift (11 pm – 7 am):

-July 5, 6, 12, 18, 19, 21, 26, and 27, 2012
 -August 2, 3, 9, 10, 15, 16, 23, and 24, 2012

The licensee failed to ensure that there is at least one registered nurse who is an employee of the licensee and a member of the regular nursing staff on duty and present at all times. [LTCHA, 2007, S. O. 2007, c. 8, s. 8 (3).

A previous compliance order was issued under LTCHA, 2007, S. O. c. 8, s. 8 (3): 2011_104196_0011 dated June 30, 2012. (106)

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 O.Reg 79/10, s. 31. Nursing and personal support services

Specifically failed to comply with the following subsections:

s. 31. (2) Every licensee of a long-term care home shall ensure that there is a written staffing plan for the programs referred to in clauses (1) (a) and (b). O. Reg. 79/10, s. 31 (2).

Findings/Faits saillants :

1. On August 29, 2012, inspector 106 asked staff member # S-100 to provide the written staffing plan. Staff member # S-100 provided the inspector with the schedules for the nursing staff from June 25, 2012 thru October 7, 2012 and policy # NUR 285, titled "Scheduling". Policy # NUR 285, provides direction as to the process staff are to follow when calling staff to replace "sick calls", however, neither this document nor the schedules provided meet the requirements set out in the Act and regulation. The licensee failed to ensure that there is a written staffing plan referred to in clauses (1) (a) and (b). [O. Reg. 70/10, s. 31 (2)] (106)

WN #3: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 73. Staff qualifications
Every licensee of a long-term care home shall ensure that all the staff of the home, including the persons
mentioned in sections 70 to 72,

- (a) have the proper skills and qualifications to perform their duties; and**
 - (b) possess the qualifications provided for in the regulations. 2007, c. 8, s. 73..**
-

Findings/Faits saillants :

1. On August 29, 2012, staff member # S-100 provided inspector 106 with a list of PSWs that were hired since July 1, 2011 and are currently employed by the home. Staff member # S-100 indicated by writing on this list the PSWs who currently have a PSW certificate or are enrolled in a nursing program.

5 PSWs had the words, "enrolled PSW - sept", "enrolled" or "enrolled sept" next to their name, staff member S-100, reported that these PSWs did not currently have a PSW certificate and were enrolled in the PSW course that would be starting Sept 2012.

Staff member # S-100 also provided inspector 106 with the nursing schedule from July 1, 2012 to August 29, 2012. Inspector 106 reviewed the nursing schedule and found that PSWs without the required qualifications worked as a PSW on the following days:

Staff member # S-101 worked on the following days as a PSW since July 1, 2012:

-July 1, 3, 4, 5, 6, 7, 8, 10, 11, 12, 16, 17, 19, 23, 24, 27, 28, 29, and 31, 2012

-Aug 1, 2, 3, 5, 7, 8, 9, 13, 14, 15, 16, 17, 21, 22, 23, 25, 26, 28, and 29, 2012

Staff member # S-102 worked on the following days as a PSW, since July 1, 2012:

-July 1, 3, 5, and 10, 2012

-Aug 19, 2012

Staff member # S-103, worked on the following days as a PSW, since July 1, 2012:

-July 11, 12, 13, 15, 16, 17, 19, 20, 23, 25, 26, 27, and 30, 2012

-August 1, 2, 3, 7, 9, 11, 12, 14, 15, 17, and 18, 2012.

Staff member # S-104, worked on the following days as a PSW, since July 1, 2012:

-July 1, 2, 4, 6, 7, 8, 9, 10, 11, 12, 16, 17, 18, 20, 22, 24, 25, 28, 29, 30, and 31, 2012

-August 1, 3, 6, 7, 8, 9, 10, 14, 15, 17, 20, 21, 22, 24, 26, 27, 28, and 29, 2012.

Staff member # S-105, worked on the following days as a PSW, since July 1, 2012:

-July 2, 3, 4, 5, 6, 8, 10, 12, 13, 14, 15, 17, 18, 19, 21, 22, 23, 24, 25, 27, 28, 30, and 31, 2012

-Aug 1, 20, 21, 24, 25, 27, 28, and 29, 2012.

The licensee failed to ensure that all staff of the home have the proper skills and qualifications to perform their duties and possess the qualifications provided for in the regulations. [LTCHA, 2007, S. O. 2007, c. 8, s. 73] (106)

A previous compliance order was issued under LTCHA, 2007, S. O. c. 8, s. 73: 2011_104196_0011 dated June 30, 2012. (106)

Additional Required Actions:

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

Issued on this 17th day of September, 2012



**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**

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

A handwritten signature in black ink, appearing to be "J. Smith", written within the signature box.