



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

**Long-Term Care Homes Division  
Long-Term Care Inspections Branch**  
**Division des foyers de soins de  
longue durée  
Inspection de soins de longue durée**

Central West Service Area Office  
500 Weber Street North  
WATERLOO ON N2L 4E9  
Telephone: (888) 432-7901  
Facsimile: (519) 885-9454

Bureau régional de services du  
Centre-Ouest  
500 rue Weber Nord  
WATERLOO ON N2L 4E9  
Téléphone: (888) 432-7901  
Télécopieur: (519) 885-9454

**Public Copy/Copie du public**

<b>Report Date(s) / Date(s) du Rapport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / No de registre</b>	<b>Type of Inspection / Genre d'inspection</b>
Nov 9, 2018	2018_580568_0017	025259-17	Follow up

**Licensee/Titulaire de permis**

Golden Dawn Senior Citizen Home  
80 Main Street P.O. Box 129 Lion's Head ON N0H 1W0

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

Golden Dawn Nursing Home  
80 Main Street P.O. Box 129 Lion's Head ON N0H 1W0

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

DOROTHY GINTHER (568)

**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): October 9, 10, 2018**

**Follow-up to CO #001 from inspection #2017\_580568\_0021 related to 24/7  
Registered Nursing**

**During the course of the inspection, the inspector(s) spoke with the Acting  
Administrator, Director of Care, Registered Practical Nurse, Personal Support  
Worker, and two Administrative Assistants.**

**The inspectors also observed care being provided to residents, interactions  
between staff and residents; reviewed staff schedules, recruitment strategies  
including on-line websites and relevant policies and procedures.**

**The following Inspection Protocols were used during this inspection:  
Sufficient Staffing**

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

**1 WN(s)  
0 VPC(s)  
1 CO(s)  
1 DR(s)  
0 WAO(s)**



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**NON-COMPLIANCE / NON - RESPECT DES EXIGENCES**

**Legend**

WN – Written Notification  
VPC – Voluntary Plan of Correction  
DR – Director Referral  
CO – Compliance Order  
WAO – Work and Activity Order

**Légende**

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).

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 LTCHA, 2007 S.O. 2007, c.8, s. 8.  
Nursing and personal support services**

**Specifically failed to comply with the following:**

**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 :**



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1. The licensee has failed to ensure that there was at least one registered nurse who was an employee of the licensee and a member of the regular nursing staff on duty and present at all times unless there was an allowable exception to this requirement (see definition/description for list of exceptions as stated in section 45.(1) and 45.1 of the regulation).

The licensee has failed to comply with compliance order #001 from inspection 2017\_580568\_0021 issued October 31, 2017, with a compliance date of December 31, 2017.

Review of the registered staff schedule for a two month period identified the following:

- a) There were three registered nurses (RN) on the schedule.
- b) The registered nurses worked 12 hour shifts.
- c) In a specified month, there were 12/31 (39 per cent) day shifts, and 22/31 (71 per cent) night shifts where there was no RN on duty and present in the home. The following month there were 7/30 (23 per cent) day shifts, and 17/31 (57 per cent) night shifts where there was no RN on duty and present in the home.

The Director of Care (DOC) said it was very challenging to get an RN in the area, but it was their understanding that it was advertised on several websites including the home's.

An Administrative Assistant said that the registered nurse position was currently posted on the Indeed and Jobs Canada website, as well as the home's site.

Review of the Canada Job Bank and the home's websites identified that there were active postings for full time and part time registered nurses at the home. The Indeed website did not have an active posting, but it was renewed while inspectors were in the home.

The Director of Care and Acting Administrator acknowledged that the home did not have a registered nurse who was a member of the regular nursing staff on duty and present in the home at all times.



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***Additional Required Actions:***

***CO # - 001 will be served on the licensee. Refer to the “Order(s) of the Inspector”.  
DR # 001 – The above written notification is also being referred to the Director for further action by the Director.***

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**Issued on this 14th day of November, 2018**

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

**Original report signed by the inspector.**



**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

**Long-Term Care Homes Division  
Long-Term Care Inspections Branch**

**Division des foyers de soins de longue durée  
Inspection de soins de longue durée**

**Public Copy/Copie du public**

**Name of Inspector (ID #) /**

**Nom de l'inspecteur (No) :** DOROTHY GINTHER (568)

**Inspection No. /**

**No de l'inspection :** 2018\_580568\_0017

**Log No. /**

**No de registre :** 025259-17

**Type of Inspection /**

**Genre d'inspection:** Follow up

**Report Date(s) /**

**Date(s) du Rapport :** Nov 9, 2018

**Licensee /**

**Titulaire de permis :** Golden Dawn Senior Citizen Home

80 Main Street, P.O. Box 129, Lion's Head, ON,  
N0H-1W0

**LTC Home /**

**Foyer de SLD :**

Golden Dawn Nursing Home

80 Main Street, P.O. Box 129, Lion's Head, ON,  
N0H-1W0

**Name of Administrator /**

**Nom de l'administratrice**

**ou de l'administrateur :** Kevin Jones



**Ministry of Health and  
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**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

To Golden Dawn Senior Citizen Home, 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  
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**Order # /**

**Ordre no :** 001

**Order Type /**

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

**Linked to Existing Order /** 2017\_580568\_0021, CO #001;  
**Lien vers ordre existant:**

**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 must be compliant with s. 8. (3) of the LTCHA.

Specifically the licensee must:

Ensure that there is at least one registered nurse who is both an employee of the licensee and a member of the regular nursing staff of the home on duty and present in the home at all times.

**Grounds / Motifs :**

1. The licensee has failed to comply with compliance order #001 from inspection 2017\_580568\_0021 issued October 31, 2017, with a compliance date of December 31, 2017.

The licensee was ordered to ensure that at least one registered nurse who was both an employee of the licensee and a member of the regular nursing staff of the home was on duty and present in the home at all times.

The licensee failed to comply with the order to have at least one registered nurse, who was an employee of the home, on duty and present in the home at all times.

Review of the registered staff schedule for a two month period identified the following:

a) There were three registered nurses (RN) on the schedule.



**Ministry of Health and  
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**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

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- b) The registered nurses worked 12 hour shifts.
- c) In a specified month, there were 12/31 (39 per cent) day shifts, and 22/31 (71 per cent) night shifts where there was no RN on duty and present in the home. The following month there were 7/30 (23 per cent) day shifts, and 17/31 (57 per cent) night shifts where there was no RN on duty and present in the home.

The Director of Care (DOC) said it was very challenging to get an RN in the area, but it was their understanding that it was advertised on several websites including the home's.

An Administrative Assistant said that the registered nurse position was currently posted on the Indeed and Jobs Canada website, as well as the home's site.

Review of the Canada Job Bank and the home's websites identified that there were active postings for full time and part time registered nurses at the home. The Indeed website did not have an active posting, but it was renewed while inspectors were in the home.

The Director of Care and Acting Administrator acknowledged that the home did not have a registered nurse who was a member of the regular nursing staff on duty and present in the home at all times.

The severity of harm was a level 2, potential for harm. The scope was a pattern, with 45 per cent of shifts where there was no RN present in the home. The home had a level 5 history with multiple non-compliances and one related order to the current area of concern:

Compliance order (CO) #001 issued October 31, 2017, with a compliance due date of December 31, 2017 (2017\_580568\_0021)

CO #001 issued November 1, 2016, with a compliance due date of February 28, 2017 (2016\_325568\_0020)  
(568)

**This order must be complied with /  
Vous devez vous conformer à cet ordre d'ici le :** Jan 11, 2019



**Ministry of Health and  
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**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

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

**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, commercial courier or by fax upon:

Director  
c/o Appeals Coordinator  
Long-Term Care Inspections Branch  
Ministry of Health and Long-Term Care  
1075 Bay Street, 11th Floor  
Toronto, ON M5S 2B1  
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, when service is made by a commercial courier it is deemed to be made on the second business day after the day the courier receives the document, 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:



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**Health Services Appeal and Review Board and the Director**

Attention Registrar  
Health Services Appeal and Review Board  
151 Bloor Street West, 9th Floor  
Toronto, ON M5S 1S4

Director  
c/o Appeals Coordinator  
Long-Term Care Inspections 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](http://www.hsarb.on.ca).



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**RENSEIGNEMENTS RELATIFS AUX RÉEXAMENS DE DÉCISION ET AUX APPELS**

**PRENEZ AVIS :**

Le/la titulaire de permis a le droit de faire une demande de réexamen par le directeur de cet ordre ou de ces ordres, et de demander que le directeur suspende cet ordre ou ces ordres conformément à l'article 163 de la Loi de 2007 sur les foyers de soins de longue durée.

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

La demande écrite doit comporter ce qui suit :

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

La demande de réexamen présentée par écrit doit être signifiée en personne, par courrier recommandé, par messagerie commerciale ou par télécopieur, au :

Directeur  
a/s du coordonnateur/de la coordonnatrice en matière d'appels  
Direction de l'inspection des foyers de soins de longue durée  
Ministère de la Santé et des Soins de longue durée  
1075, rue Bay, 11e étage  
Toronto ON M5S 2B1  
Télécopieur : 416-327-7603



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Quand la signification est faite par courrier recommandé, elle est réputée être faite le cinquième jour qui suit le jour de l'envoi, quand la signification est faite par messagerie commerciale, elle est réputée être faite le deuxième jour ouvrable après le jour où la messagerie reçoit le document, et lorsque la signification est faite par télécopieur, elle est réputée être faite le premier jour ouvrable qui suit le jour de l'envoi de la télécopie. Si un avis écrit de la décision du directeur n'est pas signifié au/à la titulaire de permis dans les 28 jours de la réception de la demande de réexamen présentée par le/la titulaire de permis, cet ordre ou ces ordres sont réputés être confirmés par le directeur, et le/la titulaire de permis est réputé(e) avoir reçu une copie de la décision en question à l'expiration de ce délai.

Le/la titulaire de permis a le droit d'interjeter appel devant la Commission d'appel et de révision des services de santé (CARSS) de la décision du directeur relative à une demande de réexamen d'un ordre ou des ordres d'un inspecteur ou d'une inspectrice conformément à l'article 164 de la Loi de 2007 sur les foyers de soins de longue durée. La CARSS est un tribunal autonome qui n'a pas de lien avec le ministère. Elle est créée par la loi pour examiner les questions relatives aux services de santé. Si le/la titulaire décide de faire une demande d'audience, il ou elle doit, dans les 28 jours de la signification de l'avis de la décision du directeur, donner par écrit un avis d'appel à la fois à :

la Commission d'appel et de révision des services de santé et au directeur

À l'attention du/de la registrateur(e)  
Commission d'appel et de révision  
des services de santé  
151, rue Bloor Ouest, 9e étage  
Toronto ON M5S 1S4

Directeur  
a/s du coordonnateur/de la coordonnatrice en matière  
d'appels  
Direction de l'inspection des foyers de soins de longue durée  
Ministère de la Santé et des Soins de longue durée  
1075, rue Bay, 11e étage  
Toronto ON M5S 2B1  
Télécopieur : 416-327-7603

À la réception de votre avis d'appel, la CARSS en accusera réception et fournira des instructions relatives au processus d'appel. Le/la titulaire de permis peut en savoir davantage sur la CARSS sur le site Web [www.hsb.on.ca](http://www.hsb.on.ca).

**Issued on this 9th day of November, 2018**

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

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

**Service Area Office /  
Bureau régional de services :** Central West Service Area Office