



Ministry of Health and Long-Term Care

Ministère de la Santé et des Soins de longue durée

Inspection Report under the Long-Term Care Homes Act, 2007

Rapport d'inspection sous la Loi de 2007 sur les foyers de soins de longue durée

Health System Accountability and Performance Division
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Division de la responsabilisation et de la performance du système de santé
Direction de l'amélioration de la performance et de la conformité

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Table with 4 columns: Report Date(s) / Date(s) du Rapport, Inspection No / No de l'inspection, Log # / Registre no, Type of Inspection / Genre d'inspection. Row 1: Mar 7, 2013, 2013_171155_0009, L-000100-13, Complaint

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

SHARON PERRY (155)

Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct a Complaint inspection.

This inspection was conducted on the following date(s): March 4, 2013.

During the course of the inspection, the inspector(s) spoke with Director of Care, Activation Director, Registered Practical Nurse, Personal Support Worker, and 4 Residents.

During the course of the inspection, the inspector(s) toured the resident living area, reviewed November 2012 to March 2013 activation program calendars, reviewed resident/family surveys, and reviewed clinical records.

The following Inspection Protocols were used during this inspection: Recreation and Social Activities



**Safe and Secure Home
Sufficient Staffing**

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

<p>Legend</p> <p>WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order</p>	<p>Legendé</p> <p>WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités</p>
<p>Non-compliance with requirements under the Long-Term Care Homes Act, 2007 (LTCHA) was found. (A requirement under the LTCHA includes the requirements contained in the items listed in the definition of "requirement under this Act" in subsection 2(1) of the LTCHA.)</p> <p>The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.</p>	<p>Le non-respect des exigences de la Loi de 2007 sur les foyers de soins de longue durée (LFSLD) a été constaté. (Une exigence de la loi comprend les exigences qui font partie des éléments énumérés dans la définition de « exigence prévue par la présente loi », au paragraphe 2(1) de la LFSLD.</p> <p>Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.</p>

**WN #1: The Licensee has failed to comply with O.Reg 79/10, s. 17.
Communication and response system**



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Specifically failed to comply with the following:

- s. 17. (1) Every licensee of a long-term care home shall ensure that the home is equipped with a resident-staff communication and response system that,
- (a) can be easily seen, accessed and used by residents, staff and visitors at all times; O. Reg. 79/10, s. 17 (1).
 - (b) is on at all times; O. Reg. 79/10, s. 17 (1).
 - (c) allows calls to be cancelled only at the point of activation; O. Reg. 79/10, s. 17 (1).
 - (d) is available at each bed, toilet, bath and shower location used by residents; O. Reg. 79/10, s. 17 (1).
 - (e) is available in every area accessible by residents; O. Reg. 79/10, s. 17 (1).
 - (f) clearly indicates when activated where the signal is coming from; and O. Reg. 79/10, s. 17 (1).
 - (g) in the case of a system that uses sound to alert staff, is properly calibrated so that the level of sound is audible to staff. O. Reg. 79/10, s. 17 (1).
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Findings/Faits saillants :

1. There is no resident-staff communication and response system available in the Auditorium, Activity room/Family room, and the Dining room. This was confirmed by staff. [s. 17. (1) (e)]

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 ensure that the home is equipped with a resident-staff communication and response system that, is available in every area accessible by residents, to be implemented voluntarily.



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Issued on this 7th day of March, 2013

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

A handwritten signature in cursive script that reads "Sharon Perry".