



**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**

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

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

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## **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>
Oct 4, 2017	2017_568538_0007	016946-17	Complaint

### **Licensee/Titulaire de permis**

GOLDEN YEARS NURSING HOMES (CAMBRIDGE) INC  
704 EAGLE STREET NORTH P.O. BOX 3277 CAMBRIDGE ON N3H 4T3

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

GOLDEN YEARS NURSING HOME  
704 EAGLE STREET NORTH P.O. BOX 3277 CAMBRIDGE ON N3H 4T3

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

NANCY JOHNSON (538)

## **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): August 17, 2017.**

**This off-site inspection was related to authorization for admission to the home.**

**During the course of the inspection, the inspector(s) spoke with the Director of Care, two Patient Service Managers, and the Director of Patient Services from the Waterloo Wellington Local Health Integration Network (WWLHIN).**

**The following Inspection Protocols were used during this inspection:  
Admission and Discharge**



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

1 WN(s)

1 VPC(s)

0 CO(s)

0 DR(s)

0 WAO(s)

### 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

#### Legendé

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.



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**WN #1: The Licensee has failed to comply with O.Reg 79/10, s. 162. Approval by licensee**

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

**s. 162. (3) Subject to subsections (4) and (5), the licensee shall, within five business days after receiving the request mentioned in clause (1) (b), do one of the following:**

- 1. Give the appropriate placement co-ordinator the written notice required under subsection 44 (8) of the Act. O. Reg. 79/10, s. 162 (3).**
- 2. If the licensee is withholding approval for the applicant's admission, give the written notice required under subsection 44 (9) of the Act to the persons mentioned in subsection 44 (10) of the Act. O. Reg. 79/10, s. 162 (3).**

**Findings/Faits saillants :**

1. The licensee has failed to respond to the home within five business days after receiving the request to determine whether to give or withhold approval for the applicant's admission to the home.

During phone interviews with the Patient Services Managers, and the Director of Patient Services of the Waterloo Wellington Local Health Integration Network (WWLHIN), they stated that the home was not meeting their obligation in regards to responding to applications for admission or refusal to the home within five business days.

During a phone interview with the Director of Resident Care (DORC), the DORC shared on an identified date, there were five Long Term Care Home (LTCH) applications that had not been reviewed within the five business days as required.

A review of documentation information provided by the WWLHIN from the Client Health Records Information System (CHRIS) showed on an identified date, there were 17 applicants in LTCH applied status. There were 15 applications with greater than five days in applied status on the identified date. The documentation stated that the average wait time was 55.12 days for the applications to be reviewed.

In an interview with the DORC, the DORC stated that the home was not responding to LTCH applications within five business days.

The scope of the issue was widespread. There was no history of non-compliance with this legislation. The severity was determined to be a level two with potential for actual harm to the applicant as the applicants were assessed as requiring long term care. [s. 162. (3)]

***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 by responding to the home within five business days after receiving the request to determine whether to give or withhold approval for the applicant's admission to the home, to be implemented voluntarily.***



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**Issued on this 5th day of October, 2017**

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

**Original report signed by the inspector.**