



**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**

Ottawa Service Area Office
347 Preston St Suite 420
OTTAWA ON K1S 3J4
Telephone: (613) 569-5602
Facsimile: (613) 569-9670

Bureau régional de services d'Ottawa
347 rue Preston bureau 420
OTTAWA ON K1S 3J4
Téléphone: (613) 569-5602
Télécopieur: (613) 569-9670

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Report Date(s) / Date(s) du rapport	Inspection No / No de l'inspection	Log # / No de registre	Type of Inspection / Genre d'inspection
Mar 25, 2018	2018_717531_0007	007401-17	Other

Licensee/Titulaire de permis

Belcrest Nursing Homes Limited
250 Bridge Street West BELLEVILLE ON K8P 5N3

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

Belmont Long Term Care Facility
250 Bridge Street West BELLEVILLE ON K8P 5N3

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

SUSAN DONNAN (531)

Inspection Summary/Résumé de l'inspection



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The purpose of this inspection was to conduct an Other inspection.

This inspection was conducted on the following date(s): March 6 and 7, 2018.

Log #007401-17 related to lighting requirements.

During the course of the inspection, the inspector(s) spoke with the Administrator and the Director of Care.

During the course of the inspection, the Inspector measured lighting levels in the corridors and common areas of the home.

**The following Inspection Protocols were used during this inspection:
Safe and Secure Home**

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

<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. 18. Every licensee of a long-term care home shall ensure that the lighting requirements set out in the Table to this section are maintained. O. Reg. 79/10, s. 18.

TABLE**Homes to which the 2009 design manual applies****Location - Lux****Enclosed Stairways - Minimum levels of 322.92 lux continuous consistent lighting throughout****All corridors - Minimum levels of 322.92 lux continuous consistent lighting throughout****In all other areas of the home, including resident bedrooms and vestibules, washrooms, and tub and shower rooms. - Minimum levels of 322.92 lux****All other homes****Location - Lux****Stairways - Minimum levels of 322.92 lux continuous consistent lighting throughout****All corridors - Minimum levels of 215.28 lux continuous consistent lighting throughout****In all other areas of the home - Minimum levels of 215.28 lux****Each drug cabinet - Minimum levels of 1,076.39 lux****At the bed of each resident when the bed is at the reading position - Minimum levels of 376.73 lux****O. Reg. 79/10, s. 18, Table; O. Reg. 363/11, s. 4****Findings/Faits saillants :**

1. The licensee has failed to ensure that the lighting requirements set out in the Table to section 18 are maintained, specifically related to lighting levels in the corridors and common areas of the home.

During the Resident Quality Inspection in April of 2017, the inspectors noted low lighting levels in the corridors and common areas of the resident home areas.

On March 6 and 7, 2018 the illumination levels throughout the corridors and common areas of the four resident care areas of the long term care home were measured by inspector #531.



The area of the long term care home in which the identified corridors and common areas were located was built prior to 2009 and therefore the section of the lighting table that was applied is titled "all other homes". A minimum level of 215.28 lux of continuous consistent lighting throughout the corridors and the common areas of the home.

A hand held digital light meter was used (Amprobe LM-120, operating error < 10%) to measure lux levels over the course of the inspection. Lux levels were measured in the corridors, dining rooms, activity rooms, television lounge, the chapel, sun rooms and the bath and shower rooms.

The light meter sensor was held a standard 30 inches above and parallel to the floor. If the lights were not on when the Inspector arrived to measure the lux, they were turned on and allowed to warm up for at least 10 minutes before measurements were made. Lamps were not included as they were not provided by the home. When measuring lux in the corridors and common areas the doors were closed and window coverings where provided were drawn in order to eliminate the influence of the natural filtered lighting on the meter readings.

Lux levels were measured between 0900 hours and 1600 hours. The weather conditions were a mix of sunshine and clouds outdoors.

The corridors were equipped with a wall mounted approximately 24 cm semi circular, frosted covered light fixtures which illuminated upwards, spaced approximately 300-400 cm apart.

The activity, television lounges, were equipped with approximately six 30cm. x 8cm wall mounted metal cast tube sconce, pot light that illuminated downwards and two approximately 30 cm ceiling mounted frosted covered dome light fixtures.

The dining rooms were equipped with wall and ceiling mounted 30cm x 8cm metal cast tube sconce light fixtures.

A minimum level of 215.28 lux of continuous consistent lighting was not provided in corridors throughout the resident care home areas. Levels of illumination were measured at less than 50 to 75% of the required lighting levels throughout the corridors.

Levels of illumination throughout the activity/ tv lounge, were measured at 50% of the required lighting level of 215.28 lux, unless immediately underneath or in close proximity



to the provided ceiling or wall mounted light fixtures.

The levels of illumination in the dining rooms, were measured at 50 to 75% of the required lighting level of 215.28 lux between and over the dining tables.

The Environmental Service Supervisor was unavailable for an interview.

On March 7, 2018 the Administrator accompanied Inspector #531 in measuring the lux levels in the corridors and resident common areas and acknowledged that the minimum required amount of 215.28 lux was not achieved in the identified areas of the home. [s. 18.] [s. 18.]

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 lighting requirements set out in the Table, s. 18 are maintained at a minimum of 215. 28 lux in the corridors and common areas of the home, to be implemented voluntarily.

Issued on this 25th day of March, 2018

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

Original report signed by the inspector.