



**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**

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

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

Hamilton Service Area Office
119 King Street West 11th Floor
HAMILTON ON L8P 4Y7
Telephone: (905) 546-8294
Facsimile: (905) 546-8255

Bureau régional de services de
Hamilton
119 rue King Ouest 11^{ième} étage
HAMILTON ON L8P 4Y7
Téléphone: (905) 546-8294
Télécopieur: (905) 546-8255

Public Copy/Copie du public

Report Date(s) / Date(s) du rapport	Inspection No / No de l'inspection	Log # / No de registre	Type of Inspection / Genre d'inspection
Mar 13, 2018	2018_539120_0011	029010-16	Follow up

Licensee/Titulaire de permis

Schlegel Villages Inc.
325 Max Becker Drive Suite. 201 KITCHENER ON N2E 4H5

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

Erin Mills Lodge Nursing Home
2132 Dundas Street West MISSISSAUGA ON L5K 2K7

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

BERNADETTE SUSNIK (120)

Inspection Summary/Résumé de l'inspection



**Ministry of Health and
Long-Term Care**

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

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

This inspection was conducted on the following date(s): February 27, 2018

An inspection (2016-467591-0007) was previously conducted May 10 to June 7, 2016, and a compliance order was issued on August 2, 2016, for insufficient lighting. A compliance date of December 29, 2017 was given. During this follow up inspection, some of the lighting levels in the home were addressed, however lighting levels did not improve in resident rooms.

During the course of the inspection, the inspector(s) spoke with the Administrator and maintenance supervisor.

During the course of the inspection, the inspector toured the home (both East and West wings) and took illumination measurements.

**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)

0 VPC(s)

1 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 failed to ensure that lighting requirements set out in the lighting table were maintained.

The licensee failed to comply with compliance order #003 from inspection #2016-467591-0007 served on August 2, 2016, with a compliance due date of December 29, 2017.

The licensee was ordered to prepare, submit and implement a plan to the inspector to ensure that the lighting requirements set out in the Table to section 18 were maintained. The plan was to include, but not be limited to:

1. The evaluation of the illumination levels in the home, by a person with adequate



knowledge of illumination standards and measuring techniques, when natural outdoor conditions did not impact the illumination levels inside of the home, and;
2. A plan to address illumination levels that did not meet the minimum requirements in the lighting table under the section titled "all other homes".

The licensee did not submit a plan to the inspector, however, according to the Administrator, the illumination levels in the home were evaluated by a lighting engineer who provided the licensee with recommendations as to where to increase illumination levels in areas that did not meet the minimum lighting requirements.

During this follow up inspection, some of the illumination levels that previously did not meet the minimum lighting requirements, such as in corridors, were verified to have improved. However, other areas, such as in resident rooms and shower rooms, the illumination levels did not improve to meet the minimum required illumination levels. Additional fixtures were added in corridors and the incandescent light bulbs were replaced with light emitting diode (LED) bulbs in fixtures located in shower and resident rooms. However, during the inspection, the illumination levels did not meet the minimum requirements as outlined below and the Administrator was informed.

The home was configured with two home areas, one on the east side of the building with 27 resident rooms and one on the west side of the building with 18 resident rooms. The home was built prior to 2009 and therefore the section of the lighting table that was applied was titled "In all other areas of the home". A hand held digital light meter was used (Amprobe LM-120) to measure the lux levels in one private room and one semi-private room, tub and shower rooms and corridors on both 3 east and 3 west. The light meter was calibrated before use and held a standard 30 inches above and parallel to the floor. Window coverings were drawn in the resident bedrooms measured. The lighting fixture type and number were different on the two different sides of the building. The bedrooms on the east side did not have any central ceiling light fixtures in resident bedrooms with the exception of one room. The bedrooms on the west side were equipped with central ceiling light fixtures however they were not capable of producing enough light to meet the minimum requirement of 215.28 lux.

The minimum required lux for all resident areas is 215.28 lux (bedrooms, washrooms, lounges, dining rooms, showers, tub rooms). The areas specifically measured included areas where activities of daily living occurred such as walking, dressing, bathing, reading and care at bedside. The minimum required lux for all corridors is a continuous and consistent lux of 215.28. The minimum required lux level under any reading light or over



bed light is 376.73 lux. The home's maintenance person accompanied the inspector throughout the two home areas to observe the measurement process.

A) East side

- A semi-private bedroom was measured and was equipped with the same type and number of light fixtures as all of the other semi-private rooms on the east side. The identified room had a small square wall mounted reading light located above each bed consisting of bright light emitting diode (LED) type light bulbs. The reading lights were at or above the minimum requirement of 376 lux. The recessed pot lights with a compact fluorescent light bulb at the entrance to the room was also above the minimum requirement of 215.28 lux. The room did not have a general ceiling light fixture. With all of the lights available to the room on, the foot of one bed was 140 lux and the foot of the second bed was 101 lux. It is being assumed that the other semi-private rooms were not compliant for general room light based on the levels achieved in the semi-private bedroom measured because each room was equipped with the same type of number of light fixtures.

Other bedrooms (such as private rooms) could not be measured due to excessive natural light infiltration which could not be blocked out or due to occupied rooms. However, due to the fact that the rooms were not equipped with a general ceiling light, it was assumed that the illumination levels in the private rooms did not meet the minimum requirement.

-The east side shower room was equipped with two separate shower stalls, without any separate light fixtures within the shower stalls. The walls were covered in dark green tiles (which absorbed a lot of light). Just outside both stalls, a fluorescent ceiling fixture was provided which was 410 lux, however the lux inside of each stall dropped to 160 lux. This measurement did not include closing the privacy curtain for each stall. The lighting level just above the toilet and above the bath tub were also both at 160 lux, despite the fluorescent fixtures in the room. The minimum requirement for areas at the tub, shower and toilet was not met.

B) West Side

- A private bedroom was measured and was equipped with the same number and type of light fixtures as all of the other private rooms on the west side. The identified room had an over bed reading light equipped with a fluorescent tube, no entry light and a round central ceiling mounted light with opaque lens. The entrance area was 30 lux. The lux



directly under the central light was 70. The over bed light was adequate at approximately 380 lux.

- A semi-private bedroom was equipped with one ceiling light (and one LED bulb) and an over bed reading light for each bed. The lux under the ceiling light fixture was 200. The over bed lights were adequate at 376 lux. The foot of one bed was 126 lux. The entrance area did not have a light fixture and was 39 lux.

- The shower/tub room was equipped with one tub and one open, roll in shower. The light fixtures provided included one burnt out light directly over the shower area and 3 semi-flush ceiling mounted fixtures. The lux over the tub was 150 and the lux in the roll in shower was 108.

The maintenance person acknowledged that the above areas that were measured were insufficient and did not meet the required minimum levels for those areas and reported that the outstanding areas would be reviewed with the management team. [s. 18.]

Additional Required Actions:

CO # - 001 will be served on the licensee. Refer to the "Order(s) of the Inspector".

Issued on this 14th day of March, 2018

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

Original report signed by the inspector.



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**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*

**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) : BERNADETTE SUSNIK (120)

Inspection No. /

No de l'inspection : 2018_539120_0011

Log No. /

No de registre : 029010-16

Type of Inspection /

Genre d'inspection: Follow up

Report Date(s) /

Date(s) du Rapport : Mar 13, 2018

Licensee /

Titulaire de permis : Schlegel Villages Inc.
325 Max Becker Drive, Suite. 201, KITCHENER, ON,
N2E-4H5

LTC Home /

Foyer de SLD : Erin Mills Lodge Nursing Home
2132 Dundas Street West, MISSISSAUGA, ON,
L5K-2K7

Name of Administrator /

Nom de l'administratrice

ou de l'administrateur : Mary Whalen

To Schlegel Villages Inc., you are hereby required to comply with the following order(s)
by the date(s) set out below:

Order(s) of the InspectorPursuant 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 :** 001**Order Type /****Genre d'ordre :** Compliance Orders, s. 153. (1) (a)**Linked to Existing Order /****Lien vers ordre
existant:** 2016_467591_0007, CO #003;**Pursuant to / Aux termes de :**

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

Order / Ordre :



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*

The licensee must be compliant with O. Reg 79/10, s. 18.

The licensee shall complete the following:

1. Increase the general illumination levels in all resident rooms on the east and west side of the long term care home so that the centre of each room and areas in and around the sides and foot of the beds are at a minimum of 215.28 lux.
2. Install additional lighting at the entrance to all resident rooms on the west side of the long term care home so that the illumination level is 215.28 lux along the path of travel from the entrance to the bed area.
3. Increase the level of illumination in both shower/tub rooms on both the east and west side of the long term care home so that the illumination level is a minimum of 215.28 lux within the general room and over toilets, sinks, tubs and in the shower enclosure/area.

Grounds / Motifs :

1. This Compliance Order is based upon three factors where there has been a finding of non-compliance in keeping with s.299(1) of Ontario Regulation 79/10. The factors include scope (pervasiveness), severity (of the harm or risk of harm) and history of non-compliance. In relation to s. 18 of Ontario Regulation 79/10, the severity of the issue was determined to be a level 2, as the non-compliance had the potential to cause harm to residents. The scope of the issue was determined to be a level 2 (pattern) as all resident rooms were affected, but not the whole home. The home had a level 4 history of on-going non-compliance with this section of the Regulation that included: A compliance order issued on August 2, 2016 (2016-467591-0007).

The licensee failed to ensure that lighting requirements set out in the lighting table were maintained.

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natural outdoor conditions did not impact the illumination levels inside of the home, and;

2. A plan to address illumination levels that did not meet the minimum requirements in the lighting table under the section titled "all other homes".

The licensee did not submit a plan to the inspector, however, according to the Administrator, the illumination levels in the home were evaluated by a lighting engineer who provided the licensee with recommendations as to where to increase illumination levels in areas that did not meet the minimum lighting requirements.

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- A semi-private bedroom was equipped with one ceiling light (and one LED bulb) and an over bed reading light for each bed. The lux under the ceiling light fixture was 200. The over bed lights were adequate at 376 lux. The foot of one bed was 126 lux. The entrance area did not have a light fixture and was 39 lux.

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The maintenance person acknowledged that the above areas that were measured were insufficient and did not meet the required minimum levels for those areas and reported that the outstanding areas would be reviewed with the management team.

(120)

This order must be complied with by /

Vous devez vous conformer à cet ordre d'ici le : Jun 30, 2018



**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

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



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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:

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
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.



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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)
151, rue Bloor Ouest, 9e étage
Toronto ON M5S 2T5

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.hsarb.on.ca.

Issued on this 13th day of March, 2018

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



**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*

Name of Inspector /

BERNADETTE SUSNIK

Nom de l'inspecteur :

Service Area Office /

Bureau régional de services : Hamilton Service Area Office