



**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
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Public Copy/Copie du public

Report Date(s) / Date(s) du rapport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Aug 19, 2016	2016_189120_0053	017942-15	Follow up

Licensee/Titulaire de permis

DEEM MANAGEMENT SERVICES LIMITED
2 QUEEN STREET EAST SUITE 1500 TORONTO ON M5C 3G5

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

HAMILTON CONTINUING CARE
125 WENTWORTH STREET SOUTH HAMILTON ON L8N 2Z1

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

BERNADETTE SUSNIK (120)

Inspection Summary/Résumé de l'inspection



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

This inspection was conducted on the following date(s): August 11, 2016

Non compliance (Voluntary Plan of Compliance) related to insufficient illumination in the home was previously issued for an inspection (2014-189120-0019) conducted March 19 & 20, 2014. No changes to the levels of illumination were evident during a subsequent inspection (2015-201167-0009) conducted May 21-June 3, 2015 and an Order was therefore issued. The conditions in the Order was originally to be met by December 31, 2015 but were extended to July 15, 2016 due to contractor delays. For this follow-up visit, the illumination levels were not fully complied with and the Order remains outstanding.

During the course of the inspection, the inspector(s) spoke with the Administrator, maintenance person and Environmental Services Supervisor.

During the course of the inspection, the inspector toured the home and took illumination measurements in resident bedrooms, washrooms, common areas, corridors and bathing areas.

**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

Legend	Legendé
WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order	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 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 did not ensure that the lighting requirements set out in the lighting Table to this section were maintained.

The home was built prior to 2009 and therefore the lighting Table requirements under the title "All Other Homes" were applied. A portable analogue light meter was used to take illumination measurements in various areas of the home. Some areas could not be evaluated due to excessive natural light infiltration. Every area measured where windows were available was prepared by turning on the lights ahead of measuring for at least 5 minutes and the window blinds or curtains closed to exclude natural light infiltration. Exterior conditions at the time of the inspection were semi bright. The light meter was



held parallel to the floor and a standard 30 inches above the floor. Only those areas where activity took place such as walking, eating, reading, dressing, toileting and grooming were measured.

Illumination levels were previously measured in March 2014 and again in May 2015. The levels did not meet the minimum requirements and an Order was issued following an inspection in May 2015. The Order directed the licensee to increase the illumination levels as required by the lighting Table. The licensee hired an electrician to install additional fixtures in some areas, replace non-functional ballasts or exchange existing bulbs with more energy efficient styles or with different levels of illumination output. However, the levels were not evaluated or documented during the project to ensure compliance with the lighting Table by using a light meter. The issues identified below were noted during this inspection and remain outstanding.

A) The longest corridor on the 3rd floor did not meet the minimum requirement of providing a consistent and continuous level of 215.28 lux along its length but it is being excluded from this requirement due to design barriers (sprinklers, pipes, bulk heads, support beams etc). The 1st floor corridor outside room #111 was 100 lux between the available light fixtures which were spaced 12 feet apart. No particular obstacles were noted to prevent an additional light fixture from being installed or from installing any wall scones.

B) Resident bathrooms #106 and #206 both were equipped with a glass lens over a bulb mounted on the ceiling. Directly under the light, the lux was 110. The minimum required lux level is 215.28. Most of the resident washrooms were equipped with a wall mounted fixture above the vanity with 3 bright bulbs laid out in an horizontal row. The fixture was not designed with a lens to cover the bulbs and minimize the glare. The brightness was noted to be uncomfortable during the measurement process. Although the illumination levels were above the minimum required levels over the vanity, some of the larger washrooms with two access doors did not meet the minimum requirement over the toilet area, which was furthest away from the light fixture and approximately 150 lux.

C) The hair salon was equipped with two small ceiling fixtures which were previously 50-100 lux. The fixtures were equipped with newer bulbs and the lux was measured to be over 215 under them. However, the area above the hair sink was 190 lux. The required level is 215.28 lux.

D) The 2nd floor tub/shower room was previously 100 lux at the sink, tub area and in the

shower area. The existing fixtures were provided with newer bulbs and the lux was adequate over the tub and in the shower, however the lux was 175 at the hand sink. The minimum requirement is 215.28 lux.

E) The 1st and 2nd floor lounges were previously measured and noted to be well below the required level of 215.28 lux. During this inspection, no changes to the type or number of light fixtures was noted. Both lounges were equipped with 1 central ceiling fan with 3 or 4 light bulbs. The lux was 175-185 under the light in the 1st floor lounge and over 300 lux under the light in the 2nd floor lounge. The lux levels dropped as the meter was taken away from the central light source in the 2nd floor lounge. The 1st floor lounge was also equipped with 3 wall mounted light fixtures with fluorescent tubes on one side of the room. These could not be illuminated as the room was full of residents, but according to the levels taken in March 2014, they did not contribute substantially to increasing the overall room illumination levels. The 2nd floor lounge was also equipped with 2 small wall sconces which did not appear to be functional but would not be of any benefit in increasing overall illumination levels.

F) In resident bedrooms, depending on the number of beds in the room, one or more ceiling mounted light fixtures were provided. No apparent changes to the number or type of fixtures was noted from the previous inspections made. When measured, all light fixtures, including over bed lights were turned on. The areas measured included around the bed, at the head of the bed, the path from the front door to the bed and areas in front of the wardrobes. The lux was not sufficient in providing the required minimum level of 215.28 lux throughout the rooms measured and in some cases, the over bed or reading light was insufficient as well.

Bedrooms #305, #207, #208 and #209 were all similarly furnished with two beds placed along one wall. One side of each bed was along the wall. The entrances were not equipped with a light fixture and the first 5 feet into the room was 50 lux which gradually increased to 200 lux to where the first and only fluorescent ceiling light was mounted. The wall side and exposed side of each bed was adequately lit and above 215.28 lux. The levels dropped to 100 lux when 2-3 feet away from the ceiling light fixture, on either side. The over bed lights were equipped with 2 fluorescent tubes and were adequate and above the minimum level of 376.73 lux.

Bedrooms #106 and #206 were both similarly furnished with 4 beds, each with the head of the bed against a wall, two beds on one wall and 2 on an opposite wall. Two ceiling light fixtures were provided in each room, one located between beds 1 and 2 and



one located between beds 3 and 4. Insufficient levels were noted between beds 2 and 3 (110 lux), in front of the wardrobes (100 lux) and at the foot of and one side of bed 3 (110 lux). A resident in one of the bedrooms complained of excessive brightness of the ceiling light.

Bedroom #101 and #201 were similarly furnished with 4 beds, all with the head of the bed against the same wall. Only one ceiling light fixture was provided near bed #2 which was 400 lux. The over bed light fixtures consisted of one fluorescent tube which were 150-200 lux, well below the required level of 376.73 lux. The entrance area was 50 lux which gradually increased until standing under the ceiling light. The only bed that met the minimum requirement at the foot and sides of the bed was #2 (near the ceiling light). The other 3 beds were measured to be under 150 lux on all sides of the bed.

G) The 3rd floor dining room was equipped with one central fluorescent ceiling light fixture and two wall sconces. The tables located on either side of the entrance and furthest from the light fixture were both 110 lux (centre of table). The minimum required level is 215.28 lux. [s. 18.]

Additional Required Actions:

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

Issued on this 19th day of August, 2016

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

Original report signed by the inspector.



**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

**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 : 2016_189120_0053

Log No. /

Registre no: 017942-15

Type of Inspection /

Genre

Follow up

d'inspection:

Report Date(s) /

Date(s) du Rapport : Aug 19, 2016

Licensee /

Titulaire de permis : DEEM MANAGEMENT SERVICES LIMITED
2 QUEEN STREET EAST, SUITE 1500, TORONTO,
ON, M5C-3G5

LTC Home /

Foyer de SLD : HAMILTON CONTINUING CARE
125 WENTWORTH STREET SOUTH, HAMILTON, ON,
L8N-2Z1

Name of Administrator /

Nom de l'administratrice

ou de l'administrateur : Enesia Malapela

To DEEM MANAGEMENT SERVICES LIMITED, 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
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Ordre(s) de l'inspecteur

Aux termes de l'article 153 et/ou
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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
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Order # /
Ordre no : 001 **Order Type /**
Genre d'ordre : Compliance Orders, s. 153. (1) (a)

Linked to Existing Order /
Lien vers ordre 2015_201167_0009, CO #004;
existant:

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

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de l'article 154 de la *Loi de 2007 sur les foyers
de soins de longue durée, L.O. 2007, chap. 8*

1. The licensee shall consult with a person who has expertise in the field of illumination such as but not limited to, a lighting engineer, to evaluate all resident bedrooms, lounges, dining rooms, tub rooms, hair salon and 1st floor corridor for illumination levels. The illumination values shall be recorded and submitted for review, along with a work plan that identifies where illumination levels need to be increased as per the lighting Table.
2. The work plan shall be implemented once the inspector has reviewed the work plan and provided a written response.

The work plan and illumination values shall be emailed to Bernadette.susnik@ontario.ca by October 31, 2016. The work plan shall be implemented by December 30, 2016 unless otherwise specified.

Grounds / Motifs :

1. The licensee did not ensure that the lighting requirements set out in the lighting Table to this section were maintained.

The home was built prior to 2009 and therefore the lighting Table requirements under the title "All Other Homes" were applied. A portable analogue light meter was used to take illumination measurements in various areas of the home. Some areas could not be evaluated due to excessive natural light infiltration. Every area measured where windows were available was prepared by turning on the lights ahead of measuring for at least 5 minutes and the window blinds or curtains closed to exclude natural light infiltration. Exterior conditions at the time of the inspection were semi bright. The light meter was held parallel to the floor and a standard 30 inches above the floor. Only those areas where activity took place such as walking, eating, reading, dressing, toileting and grooming were measured.

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C) The hair salon was equipped with two small ceiling fixtures which were previously 50-100 lux. The fixtures were equipped with newer bulbs and the lux was measured to be over 215 under them. However, the area above the hair sink was 190 lux. The required level is 215.28 lux.

D) The 2nd floor tub/shower room was previously 100 lux at the sink, tub area and in the shower area. The existing fixtures were provided with newer bulbs and the lux was adequate over the tub and in the shower, however the lux was 175 at the hand sink. The minimum requirement is 215.28 lux.

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Bedroom #101 and #201 were similarly furnished with 4 beds, all with the head of the bed against the same wall. Only one ceiling light fixture was provided near bed #2 which was 400 lux. The over bed light fixtures consisted of one fluorescent tube which were 150-200 lux, well below the required level of 376.73



**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
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lux. The entrance area was 50 lux which gradually increased until standing under the ceiling light. The only bed that met the minimum requirement at the foot and sides of the bed was #2 (near the ceiling light). The other 3 beds were measured to be under 150 lux on all sides of the bed.

G) The 3rd floor dining room was equipped with one central fluorescent ceiling light fixture and two wall sconces. The tables located on either side of the entrance and furthest from the light fixture were both 110 lux (centre of table). The minimum required level is 215.28 lux.

This Order is being made based upon the findings of non-compliance with Ontario Regulation 79/10, s. 18 as outlined in the above grounds and the application of 3 factors, severity, scope and compliance history, in keeping with s. 299(1) of the Regulation. In respect of severity, there is minimal harm or risk posed to residents (#2); scope or prevalence, more than one resident may be affected by low illumination levels (#2); compliance history, the licensee has on-going non-compliance with an existing Order related to s. 18 (#4) which was issued in June 2015.

(120)

This order must be complied with by /

Vous devez vous conformer à cet ordre d'ici le : Dec 30, 2016



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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 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 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 SUR LE RÉEXAMEN/L'APPEL

PRENDRE AVIS

En vertu de l'article 163 de la Loi de 2007 sur les foyers de soins de longue durée, le titulaire de permis peut demander au directeur de réexaminer l'ordre ou les ordres qu'il a donné et d'en suspendre l'exécution.

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

La demande de réexamen doit contenir ce qui suit :

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

La demande écrite est signifiée en personne ou envoyée par courrier recommandé ou par télécopieur au:

Directeur
a/s Coordinateur des appels
Inspection de soins de longue durée
Ministère de la Santé et des Soins de longue durée
1075, rue Bay, 11^e étage
Ontario, ON
M5S-2B1
Fax: 416-327-7603

Les demandes envoyées par courrier recommandé sont réputées avoir été signifiées le cinquième jour suivant l'envoi et, en cas de transmission par télécopieur, la signification est réputée faite le jour ouvrable suivant l'envoi. Si le titulaire de permis ne reçoit pas d'avis écrit de la décision du directeur dans les 28 jours suivant la signification de la demande de réexamen, l'ordre ou les ordres sont réputés confirmés par le directeur. Dans ce cas, le titulaire de permis est réputé avoir reçu une copie de la décision avant l'expiration du délai de 28 jours.



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de l'article 154 de la *Loi de 2007 sur les foyers
de soins de longue durée, L.O. 2007, chap. 8*

En vertu de l'article 164 de la Loi de 2007 sur les foyers de soins de longue durée, le titulaire de permis a le droit d'interjeter appel, auprès de la Commission d'appel et de révision des services de santé, de la décision rendue par le directeur au sujet d'une demande de réexamen d'un ordre ou d'ordres donnés par un inspecteur. La Commission est un tribunal indépendant du ministère. Il a été établi en vertu de la loi et il a pour mandat de trancher des litiges concernant les services de santé. Le titulaire de permis qui décide de demander une audience doit, dans les 28 jours qui suivent celui où lui a été signifié l'avis de décision du directeur, faire parvenir un avis d'appel écrit aux deux endroits suivants :

À l'attention du registraire
Commission d'appel et de révision
des services de santé
151, rue Bloor Ouest, 9e étage
Toronto (Ontario) M5S 2T5

Directeur
a/s Coordinateur des appels
Inspection de soins de longue durée
Ministère de la Santé et des Soins de longue durée
1075, rue Bay, 11e étage
Ontario, ON
M5S-2B1
Fax: 416-327-7603

La Commission accusera réception des avis d'appel et transmettra des instructions sur la façon de procéder pour interjeter appel. Les titulaires de permis peuvent se renseigner sur la Commission d'appel et de révision des services de santé en consultant son site Web, au www.hsarb.on.ca.

Issued on this 19th day of August, 2016

Signature of Inspector /

Signature de l'inspecteur :

Name of Inspector /

Nom de l'inspecteur : BERNADETTE SUSNIK

Service Area Office /

Bureau régional de services : Hamilton Service Area Office