



**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 prévue  
le Loi de 2007 les foyers de  
soins de longue durée**

**Health System Accountability and  
Performance Division  
Performance Improvement and  
Compliance Branch**

Ottawa Service Area Office  
347 Preston St 4th Floor  
OTTAWA ON L1K 0E1  
Telephone: (613) 569-5602  
Facsimile: (613) 569-9670

Bureau régional de services d'Ottawa  
347 rue Preston 4<sup>ième</sup> étage  
OTTAWA ON L1K 0E1  
Téléphone: (613) 569-5602  
Télécopieur: (613) 569-9670

**Division de la responsabilisation et de la  
performance du système de santé  
Direction de l'amélioration de la  
performance et de la conformité**

## **Amended Public Copy/Copie modifiée du public de permis**

<b>Report Date(s)/ Date(s) du Rapport</b>	<b>Inspection No/ No de l'inspection</b>	<b>Log # / Registre no</b>	<b>Type of Inspection / Genre d'inspection</b>
Feb 09, 2015;	2014_178102_0036 (A1)	000476-14	Other

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

MEDLAW CORPORATION LIMITED  
42 Elgin Street Thornhill ON L3T 1W4

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

PINECREST NURSING HOME (2731)  
3418 County Road 36 R.R. #2 BOBCAYGEON ON K0M 1A0

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

WENDY BERRY (102) - (A1)

## **Amended Inspection Summary/Résumé de l'inspection modifié**



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

**This inspection was conducted on the following date(s): July 23, 2014**

**During the course of the inspection, the inspector(s) spoke with the  
Administrator, several staff and residents.**

**During the course of the inspection, the inspector(s) measured illumination  
levels throughout resident 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)**

**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.



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**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. On July 23, 2014 illumination levels in resident areas were checked by Inspector 102. A hand held GE light meter was used. The meter was held 3 to 4 feet above the floor surface, with all available electric light fixtures turned on. Florescent lights were given a warm up period to reach full intensity.

A minimum level of 215.28 lux of continuous, consistent lighting is not provided in the section of corridor that is illuminated by recessed pot light ceiling fixtures in the vicinity of the main entrance door, doors leading into the dining/sitting room and entrance to the activity room, and in the corridor near the nurses' station. The level of illumination provided is approximately 50 to 75 % of the required illumination level between the light fixtures, to greater than 218.28 lux underneath and in close proximity to the light fixtures.

A minimum illumination level of 215.28 lux is not provided throughout the majority of residents' bedrooms:

- illumination levels ranged from less than 50 % to 75 % of the required level of illumination within the majority of bedroom entrance corridors, vestibules and alcoves;
- illumination levels were less than 50% throughout the majority of the floor area in single occupancy bedrooms 28, 27, 23, 17, and 15;
- illumination levels ranged from 50 to 80% of the requirement between most bed foot boards and walls. In some rooms, the illumination requirement was compliant.

Note: in residents' bedrooms window coverings were closed and privacy curtains, where provided, were open when light levels were measured. The window curtains in residents' bedrooms were not lined and did not block out daylight creating a higher level of illumination than would be provided solely by the provided light fixtures.

Low levels of lighting are a potential risk to the health, comfort, safety and well being of residents. Insufficient lighting levels may negatively impact the ability of staff to clean effectively and to deliver safe and effective care to residents including: the distribution or application of prescribed drugs and treatments; to conduct assessments; to provide treatments. Low levels of illumination and shadows may negatively impact residents' perception of the surrounding environment affecting mobility, nutritional intake, and overall quality of life. [s. 18.]

***Additional Required Actions:***



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

**(A1)The following order(s) have been amended:CO# 001**



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**Issued on this 9 day of February 2015 (A1)**

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

**Original report signed by the inspector.**



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**Order(s) of the Inspector**

**Ordre(s) de l'inspecteur**

Pursuant to section 153 and/or  
section 154 of the Long-Term  
Care Homes Act, 2007, S.O.  
2007, c. 8

Aux termes de l'article 153 et/ou de  
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**Name of Inspector (ID #) /**

**Nom de l'inspecteur (No) :** WENDY BERRY (102) - (A1)

**Inspection No. /**

**No de l'inspection :** 2014\_178102\_0036 (A1)

**Appeal/Dir# /**

**Appel/Dir#:**

**Log No. /**

**Registre no. :** 000476-14 (A1)

**Type of Inspection /**

**Genre d'inspection:** Other

**Report Date(s) /**

**Date(s) du Rapport :** Feb 09, 2015;(A1)

**Licensee /**

**Titulaire de permis :** MEDLAW CORPORATION LIMITED  
42 Elgin Street, Thornhill, ON, L3T-1W4

**LTC Home /**

**Foyer de SLD :** PINECREST NURSING HOME (2731)  
3418 County Road 36, R.R. #2, BOBCAYGEON,  
ON, K0M-1A0





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O. 2007, chap. 8

**Name of Administrator /** MARY CARR  
**Nom de l'administratrice**  
**ou de l'administrateur :**

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To MEDLAW CORPORATION LIMITED, you are hereby required to comply with the following order(s) by the date(s) set out below:

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**Order # /**                      **Order Type /**  
**Ordre no :** 001                **Genre d'ordre :** Compliance Orders, s. 153. (1) (a)

**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

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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 :**



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foyers de soins de longue durée, L.  
O. 2007, chap. 8

The licensee will ensure that required levels of lighting are provided in all areas

of the long term care home including:

- A minimum of 215.28 lux of continuous consistent lighting in corridors;
- A minimum level of 215.28 lux in all residents' bedrooms.

The licensee will provide a written progress report indicate the status of the lighting levels by January 31, 2015. This progress report must be submitted in

writing to the MOHLTC, Attention: Wendy Berry, Fax (613)569-9670.

**Grounds / Motifs :**



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**Ordre(s) de l'inspecteur**

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2007, c. 8

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1. On July 23, 2014 illumination levels in resident areas were checked by Inspector 102. A hand held GE light meter was used. The meter was held 3 to 4 feet above the floor surface, with all available electric light fixtures turned on. Florescent lights were given a warm up period to reach full intensity.

A minimum level of 215.28 lux of continuous, consistent lighting is not provided in the section of corridor that is illuminated by recessed pot light ceiling fixtures in the vicinity of the main entrance door, doors leading into the dining/sitting room and entrance to the activity room, and in the corridor near the nurses' station. The level of illumination provided is approximately 50 to 75 % of the required illumination level between the light fixtures, to greater than 218.28 lux underneath and in close proximity to the light fixtures.

A minimum illumination level of 215.28 lux is not provided throughout the majority of residents' bedrooms:

- illumination levels ranged from less than 50 % to 75 % of the required level of illumination within the majority of bedroom entrance corridors, vestibules and alcoves;
- illumination levels were less than 50% throughout the majority of the floor area in single occupancy bedrooms 28, 27, 23, 17, and 15;
- illumination levels ranged from 50 to 80% of the requirement between most bed foot boards and walls. In some rooms, the illumination requirement was compliant.

Note: in residents' bedrooms window coverings were closed and privacy curtains, where provided, were open when light levels were measured. The window curtains in residents' bedrooms were not lined and did not block out daylight creating a higher level of illumination than would be provided solely by the provided light fixtures.

Low levels of lighting are a potential risk to the health, comfort, safety and well being of residents. Insufficient lighting levels may negatively impact the ability of staff to clean effectively and to deliver safe and effective care to residents including: the distribution or application of prescribed drugs and treatments; to conduct assessments; to provide treatments. Low levels of illumination and shadows may negatively impact residents' perception of the surrounding environment affecting mobility, nutritional intake, and overall quality of life.

(102)



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2007, c. 8

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O. 2007, chap. 8

**This order must be complied with by /  
Vous devez vous conformer à cet ordre d'ici le :**

Sep 30, 2015(A1)



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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  
Performance Improvement and Compliance Branch  
Ministry of Health and Long-Term Care  
1075 Bay Street, 11th Floor  
Toronto, ON M5S 2B1  
Fax: 416-327-7603

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



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Attention Registrar  
151 Bloor Street West  
9th Floor  
Toronto, ON M5S 2T5

Director  
c/o Appeals Coordinator  
Performance Improvement and Compliance 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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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](http://www.hsarb.on.ca).

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

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.

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  
Direction de l'amélioration de la performance et de la  
conformité  
Ministère de la Santé et des Soins de longue durée  
1075, rue Bay, 11e étage  
Toronto ON M5S 2B1  
Télécopieur : 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](http://www.hsarb.on.ca).

**Issued on this 9 day of February 2015 (A1)**

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

**Name of Inspector /  
Nom de l'inspecteur :** WENDY BERRY

**Service Area Office /  
Bureau régional de services :** Ottawa