



**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**

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## **Public Copy/Copie du public**

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<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>
Jan 3, 2017	2016_360111_0038	009275-14	Complaint

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

CVH (No.6) GP Inc. as general partner of CVH (No.6) LP  
c/o Southbridge Care Homes Inc. 766 Hespeler Road, Suite 301 CAMBRIDGE ON N3H  
5L8

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

Orchard Villa  
1955 VALLEY FARM ROAD PICKERING ON L1V 3R6

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

LYNDA BROWN (111)

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



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**The purpose of this inspection was to conduct a Complaint inspection.**

**This inspection was conducted on the following date(s): December 6 & 7, 2016**

**A complaint inspection related to low lighting levels was completed.**

**During the course of the inspection, the inspector(s) spoke with the Administrator, the Environmental Services Supervisor (ESS), and representative from the contracted lighting company.**

**During the course of the inspection, the inspector toured the home and measured lighting levels: in corridors, resident rooms, resident bathrooms, lounges, nursing stations, tub and shower rooms.**

**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**

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
<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>

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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. The licensee has failed to ensure that the lighting requirements set out in the lighting table were maintained. The home was built before 2009 so all other homes applied:  
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.

The long term care home was built prior to 2009 and therefore the section of the lighting



table that was applied is titled "all other homes". A hand held digital light meter was used (Amprobe LM-120, accurate to +/- 5%) to measure the lux in various locations in the home. The meter was held a standard 30 inches above and parallel to the floor. All lights were turned on at the time and allowed to warm up. All available doors and bedroom window coverings were closed, in effort to reduce the influence of natural light. When light levels were measured in semi-private or ward resident bedrooms, the privacy curtains between each bed was drawn, to further reduce the influence of natural light in the area of the entrance and around each bed. A sample of resident rooms were measured as all rooms contained same lighting fixtures.

The following areas did not meet the minimum lighting requirement:

The lighting levels in the hallways on Linden, Birch, Maple and Pine unit were 30-40 % of the required lighting levels of 215.23 lux in between the ballast light fixtures which were spaced approximately eight feet apart.

The lighting level in the corridor in front of the main dining room (at entrance of the home) was 75% of the required lighting levels of 215 lux. This area is also used by nursing staff to place the medication carts.

The lighting levels in residents rooms on Linden: L5 (ward), L8 (semi), L16 (semi) ranged from 10- 75 % of the required lighting levels. This excluded the areas at the head of the bed and the resident bathrooms as these areas met the lighting requirements.

The lighting levels on Birch: B6(semi) & B13 (private) ranged from 10- 75 % of the required lighting levels. This excluded the areas at the head of the bed and the resident bathrooms as these areas met the lighting requirements.

Maple and Pine unit resident rooms were not measured but contained the same light fixtures.

Linden nursing station measured 25 % of lighting requirement in front of the nursing desk area and in from of the Resident Care Manager office. Inside the nursing station (where the nursing staff sit to read resident charts, etc.) measured 40-70 % of required lighting levels of 215 lux.

Interview with the Administrator indicated the home had a lighting assessment completed and the home had been provided corporate approval to begin completing the lighting upgrade starting in March 2017. [s. 18.]



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***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 the lighting requirements set out in the lighting table are maintained: (homes built before 2009) - All corridors and all other areas of the home: Minimum levels of 215.28 lux continuous consistent lighting throughout. At the bed of each resident when the bed is at the reading position - Minimum levels of 376.73 lux., to be implemented voluntarily.***

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Issued on this 3rd day of January, 2017

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

**Original report signed by the inspector.**