



**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 # / Registre no | Type of Inspection / Genre d'inspection |
|--|---|--------------------------------|--|
| Dec 30, 2016 | 2016_552531_0047 | 002355-15 | Complaint |

Licensee/Titulaire de permis

EXTENDICARE (CANADA) INC.
3000 STEELES AVENUE EAST SUITE 700 MARKHAM ON L3R 9W2

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

EXTENDICARE KINGSTON
309 QUEEN MARY ROAD KINGSTON ON K7M 6P4

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

SUSAN DONNAN (531)

Inspection Summary/Résumé de l'inspection

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

This inspection was conducted on the following date(s): December 14 and 15, 2016.

A complaint inspection was completed related to low lighting .

During the course of the inspection, the inspector(s) spoke with the Administrator and the Maintenance Manager. Lighting levels were measured in all corridors, dining rooms, lounges, resident rooms, resident bathrooms, tub/shower rooms, and resident common areas.

The following Inspection Protocols were used during this inspection:



Safe and Secure Home

During the course of this inspection, Non-Compliances were issued.

2 WN(s)

2 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 |
| 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). | 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. |
| The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA. | 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 LTCHA, 2007 S.O. 2007, c.8, s. 15. Accommodation services

Specifically failed to comply with the following:

- s. 15. (2) Every licensee of a long-term care home shall ensure that,**
- (a) the home, furnishings and equipment are kept clean and sanitary; 2007, c. 8, s. 15 (2).**
 - (b) each resident's linen and personal clothing is collected, sorted, cleaned and delivered; and 2007, c. 8, s. 15 (2).**
 - (c) the home, furnishings and equipment are maintained in a safe condition and in a good state of repair. 2007, c. 8, s. 15 (2).**

Findings/Faits saillants :

1. The licensee has failed to ensure that the the home over bed lighting fixtures are maintained in a safe condition and good state of repair .

On December 14 and 15, 2016 illumination levels throughout the resident care areas of the long term care home were measured by inspector #531.

A hand held Amprobe LM-120 meter was used. The meter was held 3 to 4 feet above the floor surface with all available electric lighting fixtures turned on and "warmed up". During the process inspector #531 noted that over half of the residents' bedrooms were missing the pull cords from the wall mounted over bed light fixtures. Not having a pull cord for these fixtures does not allow the residents' the ability to turn the lights on or off.

The Administrator was interviewed and acknowledged that not all wall mounted over bed lights were equipped with a pull cord to allow residents the ability to turn lights on and off and that maintenance will assess all the fixtures and install pull cords. [s. 15. (2) (c)]



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 equipment in residents' bedrooms are maintained in a safe condition and good state of repair, to be implemented voluntarily.

WN #2: 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 required levels of lighting were provided in all areas of the long term care home including: a minimum of 215.28 lux of continuous consistent lighting throughout corridors, in residents' bedrooms, en suite washrooms, and the small "family room"

On December 14 and 15, 2016 illumination levels throughout the resident care areas of the long term care home were measured by inspector #531.

A hand held digital Amprobe LM-120 meter was used to measure lux levels over the course of the inspection. Lux levels were measured in a sample of residents' bedrooms located on the three home areas. The light meter sensor was held 3-4 feet above and parallel to the floor, with the exception of measurements taken at the head of each bed, which was done above the pillow. If all provided bedroom 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 assessed. When measuring lux levels in bedrooms and bathrooms, the bedroom doors, bathroom doors and window coverings were closed in order to eliminate the influence of the corridor or natural lighting on the meter readings. Privacy curtains, where provided, were opened when light meter levels were measured.

Levels of illumination throughout residents' bedrooms, bathrooms and the small family lounge, were measured at 50 to 75% of the required lighting level of 215.28 lux, unless immediately underneath or in close proximity to most of the provided ceiling and or wall mounted light fixtures. In several bedrooms, some of the provided lights were observed to be non functional.

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.

Insufficient lighting levels may negatively impact the ability of staff to clean effectively and to deliver safe and effective care to the residents. Low levels of illumination and shadows may negatively impact resident's perception of the surrounding environment affecting mobility and overall quality of life. [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 that required levels of illumination are provided in all areas of the long term care home including: a minimum of 215.28 lux of continuous consistent lighting throughout corridors, in residents' bedrooms, entrance vestibules, en suite washrooms and the small "family room." The plan is to include processes that will ensure that existing provided lighting is fully functional. The plan is to explore options and strategies for enhancing and improving existing provided lighting and to explore options for additional lighting as may be required, options for additional lighting as may be required, to be implemented voluntarily., to be implemented voluntarily.

Issued on this 30th day of December, 2016

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

Original report signed by the inspector.