



**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**

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

**Division des foyers de soins de
longue durée
Inspection de sions 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 11iém étage
HAMILTON ON L8P 4Y7
Téléphone: (905) 546-8294
Télécopieur: (905) 546-8255

Amended Public Copy/Copie modifiée du public de permis

Report Date(s)/ Date(s) du Rapport	Inspection No/ No de l'inspection	Log #/ Registre no	Type of Inspection / Genre d'inspection
May 24, 2016;	2015_189120_0010 (A2)	H-001693-14	Other

Licensee/Titulaire de permis

THE REGIONAL MUNICIPALITY OF NIAGARA
2201 ST. DAVID'S ROAD THOROLD ON L2V 4T7

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

GILMORE LODGE
50 Gilmore Road Fort Erie ON L2A 2M1

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



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BERNADETTE SUSNIK (120) - (A2)

Amended Inspection Summary/Résumé de l'inspection modifié

The compliance due date for Order #001 related to lighting was amended from January 31, 2016 to December 30, 2016.

Issued on this 24 day of May 2016 (A2)

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

Original report signed by the inspector.



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May 24, 2016;	2015_189120_0010 (A2)	H-001693-14	Other

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BERNADETTE SUSNIK (120) - (A2)

Amended Inspection Summary/Résumé de l'inspection modifié

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

This inspection was conducted on the following date(s): January 16, 2015

During the course of the inspection, the inspector(s) spoke with the Director of Care and Building Services Manager regarding lighting levels in the home. The Inspector took illumination levels of several areas of the home. See report for details.

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
<p>WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order</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>WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités</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 did not ensure that the lighting requirements set out in the lighting table were maintained.

The home was built prior to 2009 and the section of the lighting table that applies is titled "All other homes". On January 16, 2015, outdoor conditions were sunny and bright thereby preventing the accurate assessment of artificial lighting conditions within the home, especially where the windows and skylights were not provided with window coverings that could be drawn. Areas of the home that could not be verified included the main lounge where tables and chairs were provided, corridors with skylights, activity rooms and certain sitting areas. These areas would require an independent assessment during night time conditions.



During an inspection conducted on November 5-7, 2014, Ministry of Health Inspectors identified that resident rooms were dark and had difficulty seeing their notes during resident interviews. During this inspection, verification was made that all resident rooms were similarly designed and equipped with retractable wall mounted lamps over the bed, a wall sconce and a pot light at the entrance to the room. Room 214 was tested as a representative of all the rooms. The window covers were drawn and time was given for all of the light fixtures to warm up after being turned on. The portable light meter that was used was held at a standard 30 inches above the floor in and around the bed area. The illumination level was 120 lux instead of the minimum required 215.28 lux. The area under the pot light was sufficient at 360 lux, however it did not project light out beyond a few feet. The lamp over the bed did not meet the minimum required level of 376.73 lux and was approximately 320 lux. The sconce light fixture did not contribute to the overall room light.

Resident ensuite bathrooms were all similarly designed and equipped with a heat lamp central to the room and a fluorescent tube light behind a valence over the vanity area. The heat lamps would not be ideal for use in the summer as a source of illumination and were therefore not turned on during this test. Bathroom #214 was tested and found to be adequately illuminated over the vanity area, however, the lux was 55 over the toilet area instead of a minimum of 215.28 lux.

Resident dining space and tub rooms were tested and found to be adequately illuminated.

The corridor between Parkway House and Bertie House was equipped with 4 pot lights and 6 wall sconces. This area was measured while walking down the centre of the corridor with the light meter 30 inches above the floor and out in front and away from the body. The average lux levels were 100-150. The minimum required level is 215.28 of continuous lux. [s. 18]

Additional Required Actions:

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



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(A2)The following order(s) have been amended:CO# 001



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Issued on this 24 day of May 2016 (A2)

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

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Name of Inspector (ID #) /

Nom de l'inspecteur (No) : BERNADETTE SUSNIK (120) - (A2)

Inspection No. /

No de l'inspection : 2015_189120_0010 (A2)

Appeal/Dir# /

Appel/Dir#:

Log No. /

Registre no. : H-001693-14 (A2)

Type of Inspection /

Genre d'inspection: Other

Report Date(s) /

Date(s) du Rapport : May 24, 2016;(A2)

Licensee /

Titulaire de permis : THE REGIONAL MUNICIPALITY OF NIAGARA
2201 ST. DAVID'S ROAD, THOROLD, ON, L2V-4T7

LTC Home /

Foyer de SLD : GILMORE LODGE
50 Gilmore Road, Fort Erie, ON, L2A-2M1

Name of Administrator /

Nom de l'administratrice

ou de l'administrateur : Beth Plato-Giles



Order(s) of the Inspector

Ordre(s) de l'inspecteur

Pursuant to section 153 and/or
section 154 of the Long-Term
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2007, c. 8

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

To THE REGIONAL MUNICIPALITY OF NIAGARA, you are hereby required to
comply with the following order(s) by the date(s) set out below:

Order # /

Ordre no : 001

Order Type /

Genre d'ordre : Compliance Orders, s. 153. (1) (b)

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

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

(A2)

The licensee shall prepare and submit a plan which identifies when and by whom the corridors, sitting areas, activity rooms and other common areas will be measured to determine compliance with the lighting table. The plan shall include a plan of action to increase the illumination levels of resident rooms, resident ensuite washrooms and any other area once independently identified as non-compliant.

The plan shall be submitted to Bernadette.susnik@ontario.ca by September 30, 2016. The plan shall be fully implemented by December 30, 2016.

Grounds / Motifs :

1. The licensee did not ensure that the lighting requirements set out in the lighting table were maintained.

The home was built prior to 2009 and the section of the lighting table that applies is titled "All other homes". On January 16, 2015, outdoor conditions were sunny and bright thereby preventing the accurate assessment of artificial lighting conditions within the home, especially where the windows and skylights were not provided with window coverings that could be drawn. Areas of the home that could not be verified included the main lounge where tables and chairs were provided, corridors with skylights, activity rooms and certain sitting areas. These areas would require an independent assessment during night time conditions.

During an inspection conducted on November 5-7, 2014, Ministry of Health Inspectors identified that resident rooms were dark and had difficulty seeing their notes during resident interviews. During this inspection, verification was made that all resident rooms were similarly designed and equipped with retractable wall mounted lamps over the bed, a wall sconce and a pot light at the entrance to the room. Room 214 was tested as a representative of all the rooms. The window covers were drawn and time was given for all of the light fixtures to warm up after being turned on. The portable light meter that was used was held at a standard 30 inches above the floor in and around the bed area. The illumination level was 120 lux instead of the minimum required 215.28 lux. The area under the pot light was sufficient at 360 lux, however it did not project light out beyond a few feet. The lamp over the bed did not meet the minimum required level of 376.73 lux and was approximately 320 lux. The sconce light fixture did not contribute to the overall room



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light.

Resident ensuite bathrooms were all similarly designed and equipped with a heat lamp central to the room and a fluorescent tube light behind a valence over the vanity area. The heat lamps would not be ideal for use in the summer as a source of illumination and were therefore not turned on during this test. Bathroom #214 was tested and found to be adequately illuminated over the vanity area, however, the lux was 55 over the toilet area instead of a minimum of 215.28 lux.

Resident dining space and tub rooms were tested and found to be adequately illuminated.

The corridor between Parkway House and Bertie House was equipped with 4 pot lights and 6 wall sconces. This area was measured while walking down the centre of the corridor with the light meter 30 inches above the floor and out in front and away from the body. The average lux levels were 100-150. The minimum required level is 215.28 of continuous lux. (120)

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

Dec 30, 2016(A2)



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2007, c. 8

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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 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

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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section 154 of the Long-Term
Care Homes Act, 2007, S.O.
2007, c. 8

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

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O. 2007, chap. 8

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.

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, 11e étage
Toronto ON M5S 2B1
Télécopieur : 416-327-7603



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2007, c. 8

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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
Inspection 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

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 24 day of May 2016 (A2)

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

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

BERNADETTE SUSNIK - (A2)

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

Hamilton