



**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**

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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 22, 2016	2016_360111_0034	025148-15	Complaint

Licensee/Titulaire de permis

HALIBURTON HIGHLANDS HEALTH SERVICES CORPORATION
7199 Gelert Road Box 115 HALIBURTON ON K0M 1S0

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

HYLAND CREST
6 McPherson Street P.O. Box 30 Minden ON K0M 2K0

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

LYNDA BROWN (111)

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 1, 2016

A complaint inspection related to low lighting levels in the home was completed.

**During the course of the inspection, the inspector(s) spoke with the
Administrator/Director of Care and the Maintenance personnel**

**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	
<p>Legend</p> <p>WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order</p>	<p>Legendé</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>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>

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 failed to comply with O. Reg. 79/10, s. 18 in that the licensee failed to ensure that the lighting requirements set out in the lighting table were maintained: all other homes (built before 2009) - 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. 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 resident bedrooms, the privacy curtain for bed #2 was drawn, to further reduce the influence of natural light in the area of the entrance and around bed #1.

Interview with the Administrator/DOC indicated the lower level of the home did appear to have low lighting.

The home consists of 62 beds: 31 beds divided into two floors (upper and lower level). There were 50 private rooms and 8 semi-private resident rooms. The following areas had lighting levels measured and were noted to be below the lighting level requirement of 215 lux: four shower stalls (2 on each floor), dining room on upper level, four private resident rooms, two semi-private resident rooms (on each floor) and all corridors on upper and lower levels .

Each of the four shower room stalls (with curtain drawn), the lighting levels ranged between 30-50% of the lighting requirement of 215.28 lux.

The upper level corridors lighting levels ranged from 30-50% of the lighting requirement of 215.28 lux between the ceiling light fixtures. The area in front of the elevator on upper level measured 55% of the lighting requirement of 215.28 lux.

The upper level dining room area under table 2 and table 5 (which sits directly under the bulk head, in front of the window and is between the three pot lights) measured 75% of the lighting requirement of 215.28 lux.

Resident Rooms upper levels: two private and one semi-private did not meet the requirement of 215.28 lux throughout the room. The head of bed measurements also did not meet the lighting requirement of 376.73 lux.

The lower level corridors lighting levels ranged from 30-75% of the lighting requirement of 215.28 lux between the ceiling light fixtures. The area in front of the elevator on lower level measured 25% of the lighting requirement of 215.28 lux. The area in front of the dining room (where the nursing medication cart is stationed) measured 50 % of the lighting requirement of 215.28 lux.



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Resident Rooms lower level two private and one semi-private did not meet the lighting requirements of 215.28 lux. The head of the beds also did not meet the lighting requirement of 376.73 lux.

Low levels of lighting are a potential risk to the health, comfort, safety and well-being of residents. Insufficient lighting may negatively impact the ability of staff to clean effectively and to deliver safe and effective care to residents, including to conduct assessments and 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:

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 minimum levels of continuous, consistent lighting of 215.28 lux in all hallways, resident rooms, dining rooms, and shower stalls. To also ensure the minimum levels of continuous, consistent lighting of 376.73 lux, to be implemented voluntarily.

Issued on this 22nd day of December, 2016

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

Original report signed by the inspector.