



**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**

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 11<sup>ième</sup> étage  
HAMILTON ON L8P 4Y7  
Téléphone: (905) 546-8294  
Télécopieur: (905) 546-8255

**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>
Feb 21, 2017	2017_539120_0008	008162-15	Follow up

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**Licensee/Titulaire de permis**

SHALOM VILLAGE NURSING HOME  
60 MACKLIN STREET NORTH HAMILTON ON L8S 3S1

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

SHALOM VILLAGE NURSING HOME  
70 MACKLIN STREET NORTH HAMILTON ON L8S 3S1

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

BERNADETTE SUSNIK (120)

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

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**Ministry of Health and  
Long-Term Care**

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**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**

**The purpose of this inspection was to conduct a Follow up inspection.**

**This inspection was conducted on the following date(s): February 2, 2017**

**An inspection (2014-322156-0016) was previously conducted September 29 to October 7, 2014 at which time an order was issued related to inadequate illumination levels throughout the home. For this follow-up visit, the order was not fully complied with and is being re-issued.**

**During the course of the inspection, the inspector(s) spoke with Executive Coach of Housing and Clinical Education.**

**During the course of the inspection, the inspector toured the Shalom Village Original and Shalom Village II buildings and surveyed the areas that received lighting upgrades and took illumination measurements and reviewed lighting plans.**

**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. The licensee did not ensure that the lighting levels as set out in the lighting table were maintained throughout the long-term care home.

An inspection (2014-322156-0016) was previously conducted September 29 to October 7, 2014 to determine compliance with this section. Non-compliance was identified and a written notification was issued with a compliance order to address the issue by December 31, 2015. The licensee requested an extension to the compliance due date on December 9, 2015. The date was formally extended to December 30, 2016.

The section of the lighting table that was applied included the section titled "all other



homes” for the older section of the building identified as Shalom Village Original (SVO) built over 40 years ago. The section of the lighting table that was applied included the section titled “Homes to which the 2009 design manual applies” for the newer section of the building built in 2003 identified as Shalom Village II (SVII). Lighting levels were originally measured using a portable hand held analog illumination meter (Sekonic Handi Lumi accurate to +/- 10%) in corridors, resident rooms, dining rooms and lounge areas in both long term care buildings. For this inspection, a digital hand held illumination meter (Amprobe L-150 accurate to +/- 5%) was used to verify some previous readings.

During this follow up inspection, no changes to the lighting levels taken on October 2, 2014 were noted in any corridors, dining rooms and specific lounge spaces. Resident rooms were partially completed, the majority requiring the installation of over bed light fixtures. The licensee provided documentation to confirm that a lighting company had been selected and that illumination levels were measured and documented throughout the two buildings to determine where upgrades would be required. The project was divided into three phases, with phase one related to resident rooms slated for completion by February 10, 2017. Phase two included dining rooms and lounges and phase three included corridors.

In the SVO building, lighting levels were non-compliant in all areas identified below.

#### SVO - Corridors

- comprised of two main corridors and a short corridor in front of the elevators on each of the first and second floors.
- four different styles of lighting fixtures provided on variable ceiling heights between 8-15 feet high.
- fixtures were spaced 2-6 feet apart
- lux levels achieved were 110 to 150 where fluorescent lights provided and 20-50 lux where pot lights provided (near entrances to Goldblatt and Gould wings and front door) and were well below the required continuous and consistent level of 215.28 lux.

#### SVO – lounge spaces

-the main floor consisted of a small lounge room off the main entrance to the building. The room was equipped with pot lights and fluorescent lights above a false ceiling around the perimeter of the room. The lux at the entrance was 20 and 110 under the pot lights. The minimum required level is 215.28 lux.



-second floor lounge (music room), although the natural light could not be controlled for, the center of the room was 110 lux and it was noted that no light fixtures were provided in the room. The minimum required level of 215.28 lux was not achieved.

#### SVO - resident bedrooms

- First floor - with the exception of three bedrooms, which were retrofitted with a new over bed light, ceiling light and entry light, the minimum requirement of 376.73 lux at the head of the bed and 215.28 lux generally within the room was not met in the remaining bedrooms. An identified bedroom previously measured on October 2, 2014 had lux levels of 20 upon entry, 50 on either side of the bed and 160 at the head of the bed in the reading position. These levels remained the same during this inspection.

- Second floor - bedrooms were equipped with new entry and general room light fixtures which met the minimum requirements, but were not equipped with an over bed light which could provide a minimum of 376.73 lux.

#### SVO – Dining rooms

-the dining rooms located in the Goldblatt and Zucker home areas on the first floor were used as representative dining rooms as the two dining rooms on the second floor were identical in size, shape and similar light fixtures.

- Each dining room was equipped with a kitchen area, sitting area and dining area. The lighting fixtures consisted of wall sconces, hanging pendant lights (not in all dining rooms), track spot lights and round flush mounted ceiling lights. Many of the light fixtures were noted to be burnt out in the various dining rooms, contributing to poor overall illumination levels.

- Blinds were not pulled, however light levels at the windows did not affect light levels within the room. The natural light at the windows was 400 lux. When the lights were measured over and around the tables and the seating area, the lux ranged from 50-270. The lighting level required at the tables and in sitting areas is 215. 28 lux.

In the SVII building, lighting levels were non-compliant in all areas identified below.

#### SVII – Corridors

-the corridors on both 1st and 2nd floors in general did not provide the consistent and continuous level of 322.92 lux due to the layout of the fixtures. The fixtures, depending



on the age of the bulb ranged from 150-500 lux, but because of the spacing between fixtures, the lux dropped to 20-190.

-Oak Knoll – one corridor in particular was equipped with recessed fluorescent tubes with a metal filtering lens that were spaced 10 feet apart and were not positioned centrally along the corridor as they were in other corridors. The lux level was 150 under the fixture and 20 between fixtures. Near the Oak Knoll nurse's station, no lighting fixtures were provided in the corridor between the hall windows and the end of the nurse's station. The distance was 12 feet between fixtures and the lux was 20. The lux was 150 under the fixtures on either side of the nurse's station. The same area on the 2nd floor was equipped with a light fixture, however the minimum level was also not achieved with the extra fixture and with the lights on in the nurse's station.

-Mayfair Place – corridor outside the dining room was equipped with recessed fluorescent tubes with a metal lens which were spaced 8 feet apart. One fixture was 400 lux and another fixture was 500 lux. The amount of light in between these fixtures was 190 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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**Issued on this 21st day of February, 2017**

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

**Original report signed by the inspector.**





**Ministry of Health and  
Long-Term Care**

**Ministère de la Santé et  
des Soins de longue durée**

**Order(s) of the Inspector**  
Pursuant to section 153 and/or  
section 154 of the *Long-Term Care  
Homes Act, 2007*, S.O. 2007, c.8

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

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

**Division des foyers de soins de longue durée  
Inspection de soins de longue durée**

**Public Copy/Copie du public**

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**Name of Inspector (ID #) /**

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

**Inspection No. /**

**No de l'inspection :** 2017\_539120\_0008

**Log No. /**

**Registre no:** 008162-15

**Type of Inspection /**

**Genre**

Follow up

**d'inspection:**

**Report Date(s) /**

**Date(s) du Rapport :** Feb 21, 2017

**Licensee /**

**Titulaire de permis :** SHALOM VILLAGE NURSING HOME  
60 MACKLIN STREET NORTH, HAMILTON, ON,  
L8S-3S1

**LTC Home /**

**Foyer de SLD :** SHALOM VILLAGE NURSING HOME  
70 MACKLIN STREET NORTH, HAMILTON, ON,  
L8S-3S1

**Name of Administrator /**

**Nom de l'administratrice**

**ou de l'administrateur :** Jeanette O'Leary

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To SHALOM VILLAGE NURSING HOME, you are hereby required to comply with the following order(s) by the date(s) set out below:





**Ministry of Health and  
Long-Term Care**

**Order(s) of the Inspector**

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

**Ministère de la Santé et  
des Soins de longue durée**

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

Aux termes de l'article 153 et/ou  
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**Order(s) of the Inspector**Pursuant to section 153 and/or  
section 154 of the *Long-Term Care  
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**Order # /**  
**Ordre no :** 001      **Order Type /**  
**Genre d'ordre :** Compliance Orders, s. 153. (1) (a)

**Linked to Existing Order /**  
**Lien vers ordre**      2014\_322156\_0016, CO #004;  
**existant:**

**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

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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 :**

The licensee shall increase illumination levels in areas identified in the grounds below to meet the minimum required illumination levels as identified in the lighting table.

**Grounds / Motifs :**

1. The licensee did not ensure that the lighting levels as set out in the lighting table were maintained throughout the long-term care home.

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**Order(s) of the Inspector**

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

Aux termes de l'article 153 et/ou  
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de soins de longue durée, L.O. 2007, chap. 8*

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-Mayfair Place – corridor outside the dining room was equipped with recessed fluorescent tubes with a metal lens which were spaced 8 feet apart. One fixture was 400 lux and another fixture was 500 lux. The amount of light in between these fixtures was 190 lux. (120)

**This order must be complied with by /**

**Vous devez vous conformer à cet ordre d'ici le :** Jun 15, 2017



**Ministry of Health and  
Long-Term Care**

**Order(s) of the Inspector**

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

**Ministère de la Santé et  
des Soins de longue durée**

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

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de soins de longue durée*, L.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





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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

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

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).



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## **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, 11<sup>e</sup> étage  
Ontario, ON  
M5S-2B1  
Fax: 416-327-7603

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.



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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  
Ontario, ON  
M5S-2B1  
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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 21st day of February, 2017**

**Signature of Inspector /**

**Signature de l'inspecteur :**

**Name of Inspector /**

**Nom de l'inspecteur :** BERNADETTE SUSNIK

**Service Area Office /**

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