



**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
Jan 10, 2017	2016_360111_0037	000427-15	Complaint

Licensee/Titulaire de permis

REVERA LONG TERM CARE INC.
55 STANDISH COURT 8TH FLOOR MISSISSAUGA ON L5R 4B2

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

THORNTONVIEW
186 THORNTON ROAD SOUTH OSHAWA ON L1J 5Y2

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

LYNDA BROWN (111)

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 5, 2016

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

During the course of the inspection, the inspector(s) spoke with the Administrator, the Environmental Services Manager (ESM), a Personal Support Worker (PSW) and a Resident.

During the course of the inspection, the inspector measured lighting levels on the first floor.

**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 :**

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.

The long term care home has 154 beds, was built prior to 2009 and therefore the section of the lighting table that was applied is titled "all other homes". This indicates: all corridors and all other areas of the home to have a minimum level of 215.28 lux of continuous consistent lighting throughout.

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 available lights were turned on at the time the inspector entered an area and allowed to warm up for at least 10 minutes, including all wall mounted over bed lights in the bedrooms. Table and floor lamps that were provided by the residents were not included in the lighting measurement. All bedroom doors were closed at the time of observation in order to eliminate the influence of the hallway lighting on the meter readings. Bedroom window coverings were drawn, in effort to reduce the influence of natural light, when light levels were measured during the day time. As well, where light levels were measured during the daytime in semi-private or ward resident bedrooms, the privacy curtains for each bed was drawn, in effort to further reduce the influence of natural light in the area of the entrance vestibule and around bed #1.

The complaint for low light levels was specific to the two older units in the home (Pine Grove and Rose Garden) that was noted from the 2015 Resident Quality Inspection. A sample of resident rooms, resident bathrooms and all corridors had lighting levels measured as all resident rooms/bathrooms and corridors on these two units had the same light fixtures in place.

On Pine Grove unit there is 52 beds with two ward rooms (with four beds), four private rooms and 22 semi-private rooms (with two beds). The following areas were noted to have low lighting levels:

- Lighting levels in the corridors throughout Pine Grove measured between 20-75% of the required lighting levels of 215.28 lux.
- Room 123 & 125 (private): measured between 40-60% of required lighting levels of 215.28 lux.
- Room 148 (semi-private): room entrance measured 25 % of required lighting levels of 215.28 lux; Bed 1: bed entrance/in front of closet/foot of bed measured between 25-50% of required lighting levels of 215.28 lux; Bed 2: bed entrance/in front of closet/foot of bed measured between 30-50% of required lighting levels of 215.28 lux; the area in the bathroom in front of toilet measured 55% of the required lighting level of 215.28 lux.
- Room 149 (ward): room entrance measured 25% of required lighting levels of 215.28 lux and remainder of room measured between 20-50% of required lighting levels of 215.28 between each bed and surrounding areas; the area in bathroom in front of toilet measured 40% of required lighting levels of 215.28 lux.
- Room 154 (semi-private): room entrance measured 35% of required lighting levels of 215.28 lux; Bed 1: entrance to bed/in front of closet/foot of bed measured 30-60% of required lighting levels of 215.28 lux; Bed 2: bed entrance/in front of closet/foot of bed measured 30-50% of required lighting levels of 215.28 lux.



On Rose Garden unit (52 beds) there is 22 semi-private rooms (with two beds) and two ward rooms (with four beds). The following areas were noted to have low lighting levels noted:

-Lighting levels in the corridors throughout Rose Garden measured between 20-50% of the required lighting levels of 215.28 lux. The lighting levels in front of staff room door measured 10% of required lighting levels of 215.28 lux.

-Room 121(semi-private): room entrance measured 25% of required lighting level of 215.28 lux; Bed 1:entrance to bed/in front of closet/foot of bed measured 25-50% or required lighting levels of 215.28 lux; Bed 2: entrance to bed/in front of closet/foot of bed measured 30-50% of required lighting levels of 215.28 lux.

In addition, the corridors on the first floor, in front of elevators and across from the chapel entrance measured 80% of required lighting levels of 215.28 lux. The area in front of the DOC and business office measured 60-70% of required lighting levels of 215.28 lux.

Interview with resident #001 on a specified date, by Inspector #111 indicated "I have to read in bed because it is too dark if I read in my chair".

Interview with PSW #100 on a specified date, by Inspector #111 indicated "it is pretty dark in the hallway in front of the staff room door and room 121A" which is located on Rose Garden unit.

Interview with the Administrator and the Environmental Services Worker (ESM) on December 5, 2016 by Inspector #111 both indicated awareness of low lighting in hallways and resident rooms on Rose Garden and Pine Grove units. The ESM indicated one ceiling mounted, ballast light fixture in the corridor on Pine Grove unit and one wall mounted above bed light fixture(in a semi-private resident room) was installed over a year ago to trial if lighting was improved but the remainder areas were never completed.

Low levels of lighting are a potential risk to the health, comfort and well- being of residents. Insufficient lighting levels may negatively impact the ability of staff to clean effectively and to deliver safe and effective care to residents including: the distribution or application of prescribed drugs and treatments; to conduct assessments and to provide treatments. Low levels of illumination and shadows may negatively impact resident's perception of the surrounding environment, affecting mobility, and overall quality of life.



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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 minimum lighting levels of all other homes- all corridors, minimum levels of 215.28 lux continuous consistent lighting throughout; all other areas of the home have a minimum of 215.28 lux, to be implemented voluntarily.

Issued on this 10th day of January, 2017

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

Original report signed by the inspector.