



**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***

Ministry of Health and Long-Term Care
Health System Accountability and Performance Division
Performance Improvement and Compliance Branch

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Direction de l'amélioration de la performance et de la
conformité

Licensee Copy/Copie du Titulaire Public Copy/Copie Public

Date(s) of inspection/Date de l'inspection	Inspection No/ d'inspection	Type of Inspection/Genre d'inspection
February 15, 2011	2011-120-2737-15Feb164711	H-00468 – Other Visit

Licensee/Titulaire
955464 Ontario Limited, 3700 Billings Court, Burlington, ON L7N 3N6

Long-Term Care Home/Foyer de soins de longue durée
Valley Park Lodge, 6400 Valley Way, Niagara, Falls, ON L2E 7E3

Name of LTC Homes Inspector(s)/Nom de l'inspecteur(s) de les foyer de soins de longue duree
Bernadette Susnik – Environmental Health #120

Inspection Summary/Sommaire d'inspection

The purpose of this inspection is to address some of the non-compliance identified during a tour of the home unrelated to the complaint inspection conducted on February 15, 2011. (Report #H-00180)

During the course of the inspection, the above noted inspector spoke with the Administrator and maintenance person. During the course of the inspection, all of the resident rooms, bathrooms, tub room, kitchen, basement area, maintenance shop, service corridor, dining room, lounge spaces and activity room were inspected.

The following Inspection Protocols were used during this inspection:

- *Accommodation Services – Maintenance*
- *Safe and Secure Home*

There are findings of Non-Compliance as a result of this inspection. The following actions were taken:

3 WN
3 VPC

NON- COMPLIANCE / (Non-respectés)

Definitions/Définitions

WN – Written Notifications/Avvis écrit
VPC – Voluntary Plan of Correction/Plan de redressement volontaire
DR – Director Referral/Régisseur envoyé
CO – Compliance Order/Ordres de conformité
WAO – Work and Activity Order/Ordres: travaux et activités

The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.

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 suivant constituer un avis d'écrit de l'exigences prévue le paragraphe 1 de section 152 de les foyers de soins de longue durée.

Non-respect avec les exigences sur le *Loi de 2007 les foyers de soins de longue durée* à trouvé. (Une exigence dans le loi comprend les exigences contenues dans les points énumérés dans la définition de "exigence prévue par la présente loi" au paragraphe 2(1) de la loi.

WN #1: *The licensee has failed to comply with the LTCHA, 2007, S.O., 2007, c.8, s. 15(2)(c).* Every licensee of a long-term care home shall ensure that,

(c) the home, furnishings and equipment are maintained in a safe condition and in a good state of repair.

Findings:

1. A water leak from melting roof ice noted dripping down into a large bin in the maintenance shop.
2. The bathroom door frames noted to be peeling throughout the home, exposing metal.
3. Toilet seats noted to be loose in 7 identified resident washrooms and in the tub room.
4. The wall and floor under the dishwasher in the kitchen is not in a good state of repair. The surfaces are rough and not cleanable.
5. Oil seeped out from an automatic door closer down the back of a clean linen room.

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 in respect to ensuring that the home, furnishings and equipment are maintained in a safe condition and in a 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.

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 215.84 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

Findings:

The illumination levels in the front lobby upon entering the home, along the corridor leading to the nurse's station, in the resident seating area in front of the nurse's station, the corridor leading to the dining room and



the area in front of the laundry room doors are below the required levels of 215.84 lux. These areas are illuminated with pot lights, which were measured with a Handi Lumi Sekonic light meter. Directly under the pot lights, the illumination level measured 75 lux. The pot lights are spaced approximately 8 feet apart. The illumination levels between the pot lights measured 25-50 lux.

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 in respect to ensuring that the lighting requirements set out in the Table above are maintained, to be implemented voluntarily.

WN #3: The licensee has failed to comply with O. Reg. 79/10, s. 9.1.i. Every licensee of a long-term care home shall ensure that the following rules are complied with:

1. All doors leading to stairways and the outside of the home must be,
 - i. kept closed and locked


Findings:

A fire exit door at the end of a corridor (rooms 12-26), leading to a secured outside area was left open by 1 inch. The alarm on this door was on by-pass.

A fire exit door at the end of a corridor (rooms 1-11) leads to an unsecured outdoor area and although provided with a door alarm, does not have any means in which to secure it to prevent residents from exiting the building.

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 in respect to ensuring that all doors leading to the outside of the home are kept closed and locked, to be implemented voluntarily.

Signature of Licensee or Representative of Licensee Signature du Titulaire du représentant désigné		Signature of Health System Accountability and Performance Division representative/Signature du (de la) représentant(e) de la Division de la responsabilisation et de la performance du système de santé.	
			
Title:	Date:	Date of Report: (if different from date(s) of inspection).	
		