



**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 5, 2017	2016_360111_0035	018202-15	Other

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

REACHVIEW VILLAGE
130 REACH STREET UXBRIDGE ON L9P 1L3

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 an Other inspection.

This inspection was conducted on the following date(s): December 2, 2016

An other inspection was completed related to low lighting levels in the home.

During the course of the inspection, the inspector(s) spoke with the Administrator and the Environmental Services Manager.

During the course of the inspection, the inspector toured the home and measured lighting levels in resident rooms, resident washrooms and public washroom/tub rooms.

**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)

0 CO(s)

0 DR(s)

0 WAO(s)



NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

Legend

WN – Written Notification
VPC – Voluntary Plan of Correction
DR – Director Referral
CO – Compliance Order
WAO – Work and Activity Order

Legendé

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.

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 ensure that the lighting requirements set out in the lighting table were maintained: all other homes (built before 2009) - All corridors and other areas of the home was a minimum level of 215.28 lux continuous consistent lighting throughout. 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 which 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



available lights were turned on at the time and allowed 10 minutes to warm up. All available doors and bedroom window coverings were closed, in effort to reduce the influence of natural light. A sample of resident rooms were measured in private, semi-private and ward resident bedrooms. In semi-private or ward rooms, the privacy curtains for each bed was drawn, to further reduce the influence of natural light in the area of the entrance and around bed #1.

During the RQI in 2015, the inspectors noted four specified resident en suite washrooms had low lighting and a former resident (that resided in one of the specified rooms) during that RQI indicated the lighting level in their washroom was "dimly lit".

On a specified date, observation of the home by Inspector #111 indicated:

- the home has 100 beds divided into four units: Cedar Grove, Blue Jay Blvd, Cardinal Court and Spruce unit which contain private rooms, semi-private rooms (with two beds) and ward rooms (with four beds). The ward rooms had no washrooms and those residents are required to use the public washroom/tub rooms located in the hallways.
- On Cardinal Court Unit there were two specified private rooms with en suite washrooms. The washrooms measured less than 50% of the required lighting level of 215.28 lux. Two specified semi-private rooms had resident en suite washrooms with one CFL bulb burnt out and measured less than 40% of required lighting level of 215.28 lux. A third specified semi-private resident en suite washroom measured less than 60% of required lighting level of 215.28 lux.
- On Spruce Unit there were two specified semi-private rooms with en suite washrooms which measured less than 60% of required lighting level of 215.28 lux. One specified semi-private resident room had a vestibule area prior to entering the en suite washroom. This vestibule area measured less than 30% of required lighting level of 215.28 lux. The en suite washroom had one CFL bulb burnt out and measured less than 25% of required lighting level of 215.28 lux.

The resident public washrooms/tub rooms contained a separate hopper room. Two of these hopper rooms (on specified units) measured less than 25% of the required lighting level of 215.28 lux. One of the hopper rooms (on a specified unit) had a light fixture but no light switch available to turn the light on. [s. 18.]



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Issued on this 5th day of January, 2017

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

Original report signed by the inspector.