



**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**

**Health System Accountability and
Performance Division
Performance Improvement and
Compliance Branch**

**Division de la responsabilisation et de la
performance du système de santé
Direction de l'amélioration de la
performance et de la conformité**

**Toronto Service Area Office
5700 Yonge Street, 5th Floor
TORONTO, ON, M2M-4K5
Telephone: (416) 325-9660
Facsimile: (416) 327-4486**

**Bureau régional de services de
Toronto
5700, rue Yonge, 5e étage
TORONTO, ON, M2M-4K5
Téléphone: (416) 325-9660
Télécopieur: (416) 327-4486**

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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
Sep 20, 2013	2013_158101_0035	T-69-13	Follow up

Licensee/Titulaire de permis

**CORPORATION OF THE COUNTY OF SIMCOE
1110 Highway 26, Midhurst, ON, L0L-1X0**

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

**SIMCOE MANOR HOME FOR THE AGED
1110 Highway 26, Midhurst, ON, L0L-1X0**

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

AMANDA WILLIAMS (101)

Inspection Summary/Résumé de l'inspection

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

This inspection was conducted on the following date(s): July 8, 2013

**The purpose of this inspection was to follow-up to CO#001 issued during
inspection #2012_168202_0030 related to lighting levels in the home.**

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

**During the course of the inspection, the inspector(s) walked through resident
home areas collecting illumination level readings.**

The following Inspection Protocols were used during this inspection:



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Safe and Secure Home

Findings of Non-Compliance were found during this inspection.

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.

Findings/Faits saillants :



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1. The LTCH was not built to the 2009 design standards. As a result the home must meet the requirements under "All Other Homes" category in which lighting in all corridors must be continuous lighting at a minimum illumination level of 215.28 lux.

Illumination levels were noted to be below the minimum illumination level in the following areas of the home:

- 2nd floor entering Essa unit just beyond fire doors: 188 lux
- 2nd floor Tosoronto unit:
 - a) upon entrance just beyond fire doors(recessed pot lights) 161 lux. 1 bulb was noted to be blown
 - b) Hallway: with recessed pot lights in center of corridor: 124 lux. Noted not continuous or even lighting throughout unit. [s. 18.]

2. The LTCH was not built to the 2009 design standards. As a result the home must meet the requirements under "All Other Homes" category in which the minimum illumination levels at the bed of each resident when the bed is at the reading position shall be 376.73 lux.

Three (3) resident rooms were identified to have illumination levels below the minimum requirement when the light at just the bed, when in a reading position, was turned on. [s. 18.]

3. The LTCH was not built to the 2009 design standards. As a result the home must meet the requirements under "All Other Homes" category in which the illumination levels in all other areas of the home must meet a minimum level of 215.28 lux.

Illumination levels were noted to be below the minimum levels in the following areas of the home:

- 2nd floor Tosoronto unit
 - a) Activity room/lounge at table: 188 lux
 - b) Activity room/lounge at handsink: 99 lux
 - c) Dining Room (where 2 ceiling light bulbs were noted to be burnt out) near the servery: range between 145 lux and 182 lux [s. 18.]

4. A previous order was served on the Licensee January 3, 2013 related to illumination levels in the home's corridors and at the resident bed when the bed is in a reading position. The licensee failed to comply with the order by the required date of



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1. The LTCH was not built to the 2009 design standards. As a result the home must m

Additional Required Actions:

***CO # - 001 will be served on the licensee. Refer to the "Order(s) of the
Inspector".***

Issued on this 9th day of October, 2013

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

Two handwritten signatures in black ink. The first signature is a cursive, stylized name. The second signature is also cursive and appears to be a different name or a second signature.



**Ministry of Health and
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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

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des Soins de longue durée**

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

**Health System Accountability and Performance Division
Performance Improvement and Compliance Branch**

**Division de la responsabilisation et de la performance du système de santé
Direction de l'amélioration de la performance et de la conformité**

Public Copy/Copie du public

Name of Inspector (ID #) /

Nom de l'inspecteur (No) : AMANDA WILLIAMS (101)

Inspection No. /

No de l'inspection : 2013_158101_0035

Log No. /

Registre no: T-69-13

Type of Inspection /

Genre d'inspection: Follow up

Report Date(s) /

Date(s) du Rapport : Sep 20, 2013

Licensee /

Titulaire de permis : CORPORATION OF THE COUNTY OF SIMCOE
1110 Highway 26, Midhurst, ON, L0L-1X0

LTC Home /

Foyer de SLD : SIMCOE MANOR HOME FOR THE AGED
1110 Highway 26, Midhurst, ON, L0L-1X0

Name of Administrator /

Nom de l'administratrice

ou de l'administrateur : Susan Fagan

**To CORPORATION OF THE COUNTY OF SIMCOE, you are hereby required to
comply with the following order(s) by the date(s) set out below:**



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section 154 of the *Long-Term Care
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de l'article 154 de la *Loi de 2007 sur les foyers
de soins de longue durée*, L.O. 2007, chap. 8

Order # / Ordre no : 001	Order Type / Genre d'ordre : Compliance Orders, s. 153. (1) (b)
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Linked to Existing Order /
Lien vers ordre existant: 2012_168202_0030, CO #001;

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

Enclosed Stairways - Minimum levels of 322.92 lux continuous consistent lighting throughout

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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

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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.

Order / Ordre :



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section 154 of the *Long-Term Care
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The licensee shall prepare, submit and implement a plan to ensure lighting levels are maintained at the following levels ("All Other Homes"):

1. Lighting levels in corridors must be maintained consistently continuous at a minimum illumination level of 215.28 lux
2. Lighting levels at resident beds when in the reading position must be maintained at a minimum illumination level of 376.73 lux
3. Lighting levels in all other areas of the home not specified in the legislation must be maintained at a minimum illumination level at 215.28 lux.

The plan shall be submitted to Amanda.Williams@ontario.ca no later than Monday October 21, 2013.

Grounds / Motifs :

1. A previous order was served on the Licensee January 3, 2013 related to illumination levels in the home's corridors and at the resident bed when the bed is in a reading position. The licensee failed to comply with the order by the required date of March 29, 2013. See inspection # 2012_168202_0030, CO# 001. (101)

2. The LTCH was not built to the 2009 design standards. As a result the home must meet the requirements under "All Other Homes" category in which the illumination levels in all other areas of the home must meet a minimum level of 215.28 lux.

Illumination levels were noted to be below the minimum levels in the following areas of the home:

- 2nd floor Toronto unit

a) Activity room/lounge at table: 188 lux

b) Activity room/lounge at hand sink: 99 lux

c) Dining Room (where 2 ceiling light bulbs were noted to be burnt out) near the servery: range between 145 lux and 182 lux (101)

3. The LTCH was not built to the 2009 design standards. As a result the home must meet the requirements under "All Other Homes" category in which the minimum illumination levels at the bed of each resident when the bed is at the reading position shall be 376.73 lux.

Three (3) resident rooms were identified to have illumination levels below the



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minimum requirement when the light at just the bed, when in a reading position, was turned on. (101)

4. The LTCH was not built to the 2009 design standards. As a result the home must meet the requirements under "All Other Homes" category in which lighting in all corridors must be continuous lighting at a minimum illumination level of 215.28 lux.

Illumination levels were noted to be below the minimum illumination level in the following areas of the home:

- 2nd floor entering Essa unit just beyond fire doors: 188 lux
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 - a) upon entrance just beyond fire doors(recessed pot lights) 161 lux. 1 bulb was noted to be burnt out
 - b) Hallway: with recessed pot lights in center of corridor: 124 lux. Noted not continuous or even lighting throughout unit. (101)

This order must be complied with by /

Vous devez vous conformer à cet ordre d'ici le : Dec 13, 2013



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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
Performance Improvement and Compliance 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
Performance Improvement and Compliance
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.



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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
Direction de l'amélioration de la performance et de la conformité
Ministère de la Santé et des Soins de longue durée
1075, rue Bay, 11^e 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
Direction de l'amélioration de la performance et de la
conformité
Ministère de la Santé et des Soins de longue durée
1075, rue Bay, 11e étage
Ontario, ON
M5S-2B1
Fax: 416-327-7603

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.

Issued on this 20th day of September, 2013

Signature of Inspector /

Signature de l'inspecteur:

Name of Inspector /

Nom de l'inspecteur :

AMANDA WILLIAMS

Service Area Office /

Bureau régional de services : Toronto Service Area Office