



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
prévus le Loi de 2007 les
foyers de soins de longue

Health System Accountability and Performance
Division
Performance Improvement and Compliance Branch
Division de la responsabilisation et de la
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Direction de l'amélioration de la performance et de la
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Date(s) of inspection/Date(s) de l'inspection	Inspection No/ No de l'inspection	Type of Inspection/Genre d'inspection
Mar 8, 2012	2012_072120_0021	Critical Incident

Licensee/Titulaire de permis

MIRDEM NURSING HOMES LTD
176 VICTORIA AVENUE NORTH, HAMILTON, ON, L8L-5G1

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

VICTORIA GARDENS LONG TERM CARE
176 VICTORIA AVENUE NORTH, HAMILTON, ON, L8L-5G1

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

BERNADETTE SUSNIK (120)

Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct a Critical Incident inspection.

During the course of the inspection, the inspector(s) spoke with the Administrator and Director of Care regarding door security systems. (H-000430-12)

During the course of the inspection, the inspector(s) toured the home and tested stairwell door alarms and magnetic locks and measured the illumination level of lighting along the corridor on the first floor.

The following Inspection Protocols were used during this inspection:
Safe and Secure Home

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON-RESPECT DES EXIGENCES

Legend	Legendé
WN – Written Notification	WN – Avis écrit
VPC – Voluntary Plan of Correction	VPC – Plan de redressement volontaire
DR – Director Referral	DR – Aiguillage au directeur
CO – Compliance Order	CO – Ordre de conformité
WAO – Work and Activity Order	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.

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 215.84 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

O. Reg. 79/10, r. 18, Table.

Findings/Faits saillants :

The licensee of the home has not ensured that the lighting requirements set out in the Table to this section are maintained. The corridors do not provide a minimum level of 215.28 lux of continuous consistent lighting throughout. Some of the light fixtures in the various corridors are spaced 8 to 12 feet apart, causing light and dark areas. The illumination levels on the first floor were measured with a light meter and levels between 490 and 40 lux were achieved. The level of 40 lux was measured between light fixtures in some locations.

WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 19. Generators

Specifically failed to comply with the following subsections:

s. 19. (4) The licensee of a home to which subsection (2) or (3) applies shall ensure, not later than six months after the day this section comes into force, that the home has guaranteed access to a generator that will be operational within three hours of a power outage and that can maintain everything required under clauses (1) (a), (b) and (c). O. Reg. 79/10, s. 19 (4).

Findings/Faits saillants :

[O. Reg. 79/10, s.19(4)] Victoria Gardens does not have guaranteed access to a generator that will be operational within three hours of a power outage and that can maintain essential services required under s. 19(1) of O. Reg. 79/10.

Victoria Gardens Long Term Care has Class B beds within the meaning of subsection 187(18) of the Act and therefore is not required to be served by a generator that is available at all times until December 31, 2016 as required by O. Reg. 79/10 s.19(2)2.

Further, if the home is able to retain the services of a generator rental company, the home currently does not have a generator panel and therefore no capacity to hook-up a generator to provide essential services including the resident-staff communication and response system, the elevator, dietary services equipment, the heating system, safety and emergency equipment including the fire alarm system and door security systems. Loss of these services in a prolonged power outage may pose a potential risk to the health, safety, comfort and well being of residents.



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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 essential services are provided within three hours of a power outage, to be implemented voluntarily.

Issued on this 15th day of March, 2012

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

B. Susnik