



**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**

Ottawa Service Area Office  
347 Preston St Suite 420  
OTTAWA ON K1S 3J4  
Telephone: (613) 569-5602  
Facsimile: (613) 569-9670

Bureau régional de services d'Ottawa  
347 rue Preston bureau 420  
OTTAWA ON K1S 3J4  
Téléphone: (613) 569-5602  
Télécopieur: (613) 569-9670

**Public Copy/Copie du public**

---

<b>Report Date(s) / Date(s) du rapport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / Registre no</b>	<b>Type of Inspection / Genre d'inspection</b>
May 12, 2017	2017_619550_0011	004780-17	Complaint

---

**Licensee/Titulaire de permis**

The Governing Council of the Salvation Army in Canada  
2 OVERLEA BLVD. TORONTO ON M4H 1P4

---

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

THE SALVATION ARMY OTTAWA GRACE MANOR  
1156 WELLINGTON STREET OTTAWA ON K1Y 2Z3

---

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

JOANNE HENRIE (550), ANANDRAJ NATARAJAN (573)

---

**Inspection Summary/Résumé de l'inspection**

---



**Ministry of Health and  
Long-Term Care**

**Ministère de la Santé et des  
Soins de longue durée**

**Inspection Report under  
the Long-Term Care  
Homes Act, 2007**

**Rapport d'inspection sous la  
Loi de 2007 sur les foyers de  
soins de longue durée**

**The purpose of this inspection was to conduct a Complaint inspection.**

**This inspection was conducted on the following date(s): March 27, 28, 29, 30 and 31, 2017**

**During the course of the inspection, the inspector(s) spoke with the Executive Director, the Director of Care (DOC), the Assistant Director of Care (ADOC), the Director of Employee Relations, several Registered Nurses (RN), Several Registered Practical Nurses (RPN), Personal Support Worker supervisors and the scheduler.**

**In addition, the inspector reviewed the home's documentation on staff training.**

**The following Inspection Protocols were used during this inspection:  
Prevention of Abuse, Neglect and Retaliation**

**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 LTCHA, 2007 S.O. 2007, c.8, s. 76. Training**

**Specifically failed to comply with the following:**

**s. 76. (4) Every licensee shall ensure that the persons who have received training under subsection (2) receive retraining in the areas mentioned in that subsection at times or at intervals provided for in the regulations. 2007, c. 8, s. 76. (4).**

**Findings/Faits saillants :**



1. The licensee has failed to ensure that the persons who have received training under subsection (2) receive retraining in the areas mentioned in that subsection at times or at intervals provided for in the regulations.

As per O.Reg. 79/10, s. 219. (1), the training intervals for the purposes of subsection 76 (4) of the Acts are annual intervals. A complaint was submitted to the Director at the Ministry of Health and Long-Term Care on February 13, 2017 reporting issues of retaliation to an employee by the licensee.

During staff interviews, RN #100, RPN #101, PSW supervisor #102 and #103 all indicated to Inspectors #550 and #573 that they are receiving some training annually including falls prevention, fire drills, various education related to resident care but are not aware of which training is mandatory by the Ministry of Health and Long Term Care. In naming some of the training they received in the last year, none of them indicated having received training on Whistle-blowing protection. PSW supervisor #103 indicated to both inspectors that she did not receive the training on the Whistle-blowing protection last year.

Inspector #550 requested and reviewed the home's list of participant for the Whistle-blowing protection training for the years 2014, 2015 and 2016. In reviewing these documents, Inspector #550 noted that training on Whistle-blowing protection was not provided to the employees in 2014; training was provided in 2015 and 2016. The attendance records indicated that in 2015, 97 out of 210 employees (46%) attended the training which included 47% of registered nursing staff and in 2016, 58 out of 214 employees (27%) attended the training which included 31% of the registered nursing staff and the new PSW supervisors.

During an interview, the Director of Employee Relations indicated to the inspector that there was no training provided to the employees on Whistle-blowing protection in 2014 and that the attendance for the 2015 and 2016 training was as indicated on the attendance sheets provided to the inspector. He indicated that they have recently introduced Surge learning in the home and that the mandatory training is now provided through this program. [s. 76. (4)]



**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**

***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 all employees receive training on Whistle Blowing Protection annually, to be implemented voluntarily.***

---

**Issued on this 12th day of May, 2017**

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

**Original report signed by the inspector.**