

**Ministry of Long-Term Care**

Long-Term Care Operations Division  
Long-Term Care Inspections Branch

**Ottawa District**

347 Preston Street, Suite 410  
Ottawa, ON, K1S 3J4  
Telephone: (877) 779-5559

## Public Report

**Report Issue Date:** April 15, 2025

**Inspection Number:** 2025-1358-0003

**Inspection Type:**

Follow up

**Licensee:** The Governing Council of the Salvation Army in Canada

**Long Term Care Home and City:** The Salvation Army Ottawa Grace Manor,  
Ottawa

## INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): April 15, 2025

The following intake(s) were inspected:

- Intake: #00137104 - Follow-up #: 1 - FLTCA, 2021 - s. 82 (2) 8. for Compliance Order (High Priority) #001 from inspection 2025-1358-0001 related to the home's heat loss emergency plan.

## Previously Issued Compliance Order(s)

The following previously issued Compliance Order(s) were found **NOT** to be in compliance:

Order #001 from Inspection #2025-1358-0001 related to FLTCA, 2021, s. 82 (2) 8.

The following **Inspection Protocols** were used during this inspection:

Safe and Secure Home

**Ministry of Long-Term Care**

Long-Term Care Operations Division  
Long-Term Care Inspections Branch

**Ottawa District**

347 Preston Street, Suite 410  
Ottawa, ON, K1S 3J4  
Telephone: (877) 779-5559

## INSPECTION RESULTS

### WRITTEN NOTIFICATION: Conditions of licence

NC #001 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

**Non-compliance with: FLTCA, 2021, s. 104 (4)**

Conditions of licence

s. 104 (4) Every licensee shall comply with the conditions to which the licence is subject.

The licensee has failed to comply with Compliance Order #001 from inspection 2025-1358-0001, related to FLTCA, 2021 s. 82 (2) 8., with a compliance due date of April 9, 2025.

Specifically, the licensee did not comply with:

A) Finalize and implement a written heat loss emergency plan and train all staff, including management, on their relevant roles and responsibilities in the plan;

The Director of Operations (DOO) indicated in their interview that the home had developed a heat-loss emergency plan but did not train all staff in the home related to the plan at the time of the follow-up inspection. The inspector reviewed the home's written Staff Training Attendance for Heat Loss and only two staff member names were present on the training record form.

B) Develop a process to ensure that all staff, including management, are annually retrained on the home's heat loss emergency plan, as required by the Fixing Long-Term Care Homes Act, 2021 s. 82 (4), beginning in the 2026 calendar year;

The DOO stated in their interview that the process for ensuring all staff are annually retrained on the home's heat loss emergency plan beginning in the 2026 calendar

**Ministry of Long-Term Care**

Long-Term Care Operations Division  
Long-Term Care Inspections Branch

**Ottawa District**

347 Preston Street, Suite 410  
Ottawa, ON, K1S 3J4  
Telephone: (877) 779-5559

year had not been deployed at the time of the follow-up inspection.

C) Ensure that a written record is kept of all training of staff members related to the home's heat loss emergency plan including the name, role, and date of training of each staff member trained to verify compliance with this order.

The written record Staff Training Attendance for Heat Loss did not indicate the date that the training for the heat loss plan was performed for the two staff members trained.

Sources:

Interview with the Director of Operations;

Record review of the home's heat loss emergency plan and staff training record related to the plan.

**An Administrative Monetary Penalty (AMP) is being issued on this written notification AMP #001**

**NOTICE OF ADMINISTRATIVE MONETARY PENALTY (AMP)**

The Licensee has failed to comply with FLTCA, 2021

**Notice of Administrative Monetary Penalty AMP #001**

**Related to Written Notification NC #001**

Pursuant to section 158 of the Fixing Long-Term Care Act, 2021, the licensee is required to pay an administrative penalty of \$1100.00, to be paid within 30 days from the date of the invoice.

In accordance with s. 349 (6) and (7) of O. Reg. 246/22, this administrative penalty is being issued for the licensee's failure to comply with an order under s. 155 of the Act.

**Ministry of Long-Term Care**

Long-Term Care Operations Division  
Long-Term Care Inspections Branch

**Ottawa District**

347 Preston Street, Suite 410  
Ottawa, ON, K1S 3J4  
Telephone: (877) 779-5559

**Compliance History:**

No compliance history for FLTCA, 2021 s. 104 (4). in the past 36 months.

This is the first AMP that has been issued to the licensee for failing to comply with this requirement.

Invoice with payment information will be provided under a separate mailing after service of this notice.

Licensees must not pay an AMP from a resident-care funding envelope provided by the Ministry [i.e., Nursing and Personal Care (NPC); Program and Support Services (PSS); and Raw Food (RF)]. By submitting a payment to the Minister of Finance, the licensee is attesting to using funds outside a resident-care funding envelope to pay the AMP.

**Ministry of Long-Term Care**

Long-Term Care Operations Division  
Long-Term Care Inspections Branch

**Ottawa District**

347 Preston Street, Suite 410  
Ottawa, ON, K1S 3J4  
Telephone: (877) 779-5559