

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: January 15, 2026

Inspection Number: 2026-1358-0001

Inspection Type:

Proactive Compliance Inspection

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): January 7, 8, 9, 12, 13, 14, 15, 2026

The following intake(s) were inspected:

Intake: #00167171 -Proactive Compliance Inspection

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

Contenance Care

Safe and Secure Home

Infection Prevention and Control

INSPECTION RESULTS

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WRITTEN NOTIFICATION: Communication and Response System

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

Non-compliance with: O. Reg. 246/22, s. 20 (d)

Communication and response system

s. 20. Every licensee of a long-term care home shall ensure that the home is equipped with a resident-staff communication and response system that,
(d) is available at each bed, toilet, bath and shower location used by residents;

On a day in January, 2026, there was several call bells in resident bathrooms that were not available and functioning within the home.

Specifically, on two occasions, the call bell cord detached from the connector allowing the call bell not to activate when pulled. On another occasion, the bathroom call bell cord was not in place. During an interview with a staff member on a day in January, 2026, they confirmed that the bathroom call bell was not functioning appropriately when attempting to activate it in a resident bathroom.

Sources:

Observations and an interview with a staff.

WRITTEN NOTIFICATION: General Requirements

NC #002 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 34 (1) 3.

General requirements

s. 34 (1) Every licensee of a long-term care home shall ensure that the following is complied with in respect of each of the organized programs required under sections 11 to 20 of the Act and each of the interdisciplinary programs required under section 53 of this Regulation:

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3. The program must be evaluated and updated at least annually in accordance with evidence-based practices and, if there are none, in accordance with prevailing practices.

On a day in January, 2026, the Administrator confirmed during an interview that there is no written annual program evaluation for the maintenance program within the home. During another interview with the Director of Operations on a day in January, 2026, they were not aware if an annual maintenance program evaluation was completed.

Sources:

Interviews with the Administrator and Director of Operations

WRITTEN NOTIFICATION: Continence care and bowel management

NC #003 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 56 (1) 1.

Continence care and bowel management

s. 56 (1) The continence care and bowel management program must, at a minimum, provide for the following:

1. Treatments and interventions to promote continence.

A resident's output from their urinary catheter bag was not recorded on every shift, on multiple days in December 2025 and January 2026, as required by the home's care of urinary drainage bags policy, as part of the home's continence care and bowel management program. The home's continence care and bowel management program must include treatments and interventions to promote continence, and that program must be complied with.

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Sources:

A resident's electronic chart and Point-of-Care documentation;
Care of Urinary Drainage Bags-Appendix B, E33;
Interviews with staff.

WRITTEN NOTIFICATION: Continence care and bowel management

NC #004 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 56 (1) 5.

Continence care and bowel management

s. 56 (1) The continence care and bowel management program must, at a minimum, provide for the following:

5. Annual evaluation of residents' satisfaction with the range of continence care products in consultation with residents, substitute decision-makers and direct care staff, with the evaluation being taken into account by the licensee when making purchasing decisions, including when vendor contracts are negotiated or renegotiated.

An annual evaluation of residents' satisfaction with the range of continence care products in consultation with residents, substitute decision-makers, and direct care staff was not conducted in 2025.

Sources:

Record review of the home's resident satisfaction survey;
Review of the home's Continence Care and Bowel Management Program