



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

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

**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  
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**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**

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 apport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / No de registre</b>	<b>Type of Inspection / Genre d'inspection</b>
Nov 3, 2017	2017_682549_0012	022109-17	Resident Quality Inspection

**Licensee/Titulaire de permis**

VALLEY MANOR INC  
88 Mintha Street P.O. Box 880 Barry's Bay ON K0J 1B0

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

VALLEY MANOR NURSING HOME  
88 Mintha Street P. O. Box 880 Barry's Bay ON K0J 1B0

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

RENA BOWEN (549), SUSAN LUI (178)

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



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**The purpose of this inspection was to conduct a Resident Quality Inspection.**

**This inspection was conducted on the following date(s): October 30, 31, November 1, 2, 3, 2017**

**Log #030577-16 related to an incident that causes an injury to a resident for which the resident is taken to hospital and which results in a significant change in the resident's health status was inspected concurrently with the Resident Quality Inspection**

**During the course of the inspection, the inspector(s) spoke with residents, family members, the Residents Council President, Personal Support Workers, Housekeeping staff, Registered Practical Nurses, Registered Nurses, the Nursing and Continuous Quality Improvement Co-ordinator, the Restorative Care Co-ordinator , the Maintenance Manager and the Director of Care.**

**The inspectors toured resident areas, observed staff to resident and resident to resident interactions, a medication pass, infection control practices and the provision of care being provided to residents. The inspectors also reviewed resident health care files, internal investigation documentation, Residents Council meeting minutes and semi-annual family information meetings.**

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

**Falls Prevention**

**Family Council**

**Infection Prevention and Control**

**Medication**

**Minimizing of Restraining**

**Residents' Council**

**Skin and Wound Care**

**During the course of this inspection, Non-Compliances were not issued.**

**0 WN(s)**

**0 VPC(s)**

**0 CO(s)**

**0 DR(s)**

**0 WAO(s)**



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**NON-COMPLIANCE / NON - RESPECT DES EXIGENCES**

**Legend**

WN – Written Notification  
VPC – Voluntary Plan of Correction  
DR – Director Referral  
CO – Compliance Order  
WAO – Work and Activity Order

**Legendé**

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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**Issued on this 3rd day of November, 2017**

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

**Original report signed by the inspector.**