

**VALLEY MANOR INC.  
ANNUAL GENERAL MEETING**

**October 26<sup>th</sup>, 2023**



**Empowering every person to provide  
compassionate resident centered care in a  
diverse family environment.**



## **Valley Manor Board & Executive**



Kathy Marion, Board Member



Jill Vermaire, Board Member



Steve McCann, Vice Chair



Bill Rodnick,  
Secretary/Treasurer



Annabel Marsh,  
Board Member



Trisha DesLaurier, CEO



Gail Yantha, Director of Care



Stacey McDonald,  
Director HR & Finance

## BOARD CHAIR & CEO REPORT



Thank you for the opportunity to share our 2022/2023 Annual Report, reflecting another year of resilience and growth for Valley Manor. As we faced the third year of the largest health care emergency of our generation, Valley Manor and community partners came together, united in a shared commitment to serve those who need us the most.

We are deeply grateful for the efforts of our staff and leadership for leading our COVID-19 response effort and protecting our residents and staff like never before. Through robust testing and mass vaccination programs, we worked shoulder to shoulder with Public Health to administer vaccines to our residents and staff. As we adapt to living with COVID-19, we will use what we have learned throughout the pandemic and continue to work together on recovery and set new standards in long term care experiences and outcomes as per the new Fixing Long Term Care Act.

Ten years ago we set a bold vision to build a new and improved Valley Manor for the community of Barry's Bay. Since then, our remarkable journey has included working together to strengthen partnerships and improve high quality care close to home; partnering with the Ottawa Valley OHT, our local colleges Loyalist and Algonquin to train future employees and leaders, advancing the implementing electronic health care access with Medi-systems and Amplifi; launching to grow long-term care services capacity in Barry's Bay; and forming system partnerships within the Ottawa Valley Ontario Health Team to enable countless opportunities to improve healthcare in Barry's Bay and surrounding area.

We are just getting started. As we look to the next 10 years and how to meet the growing and changing needs of this community, we were excited to announce that we are closer than ever.

Caring for one of the hardest-hit communities throughout the pandemic has brought the inequities of the health care system into sharp focus. Many in this community face barriers to care which means a barrier to long term care as well. The uneven impact of the pandemic has strengthened our resolve to improve a system of long-term care that leaves no one behind.

As we look to the future, we can see that Valley Manor is uniquely positioned to create and pave the

way for the future of health care in our community, coupled with a growing, complex and defined senior population – puts us in an unmatched position to drive significant change. We will continue to commit to nurturing community partnerships, representing long term care at the OVOHT table and innovation which includes redevelopment and restructuring long term care that will help us succeed.

To everyone at Valley Manor, thank you for living our values of integrity, leadership, compassion, transparency and workplace satisfaction. Your commitment to ensuring high quality care and an excellent resident experience, even during the most challenging times, was exceptional and made a difference to the people who depend on us. To our community, thank you for all you have done to support Valley Manor and each another during this year. We continue to be inspired by the growing partnerships in the healthcare community and the continued acknowledgement of how important Valley Manor is to the growth and stability of the community of Barry's Bay.

As we reflect on the challenges and triumphs over this past year, we know the importance of taking time to grieve what was lost and find meaning and hope in what lies ahead. There is comfort in finding new ways to connect, providing staffing and care in extremely innovative ways, and being there for one another. With this in mind, we are hopeful that this experience has strengthened our bond to the community and inspired us to make meaningful change. The lessons we learned during the pandemic will inspire us to reinvent the delivery of long-term care services at Valley Manor and invent our own future.

Thank you to everyone across our organization who continues to serve during this time. We are so proud of what we have accomplished and look forward to building the future of Valley Manor together.

*Trisha DesLaurier*

CEO

*Kathryn Marion*

Board Chair



# 2022 FINANCIAL SNAPSHOT

Prepared by Stacey McDonald, Director HR & Finance

## Revenues

\$ 8,961,144

MOHLTC	81%
Residents	19%
Others	0%

Additional funding was received in 2021 from the Ministry to assist with COVID-19 related expenses.

## Per Diem by Envelope:

Base Funding	Per CMI VM	
Nursing	\$ 101.76	\$108.74
Programs	\$ 12.24	\$ 12.24
Raw Food	\$ 11.00	\$ 11.00
Other Accommodation	\$ 56.16	\$ 56.16
<b>Total</b>	<b>\$ 181.16</b>	<b>\$188.14</b>

## CMI of 1 = Base funding

Every point above 1  
= extra funding of \$30,000

Every point below 1 = funding  
reduction of \$30,000



## Case Mix Index (CMI)



## Valley Manor Overview

### Beds Available

Private:	12
Semi-Private:	42
Ward:	30
<b>Total beds:</b>	<b>86</b>

### Bed Occupancy

Private:	10
Semi-Private:	23
Spousal Room:	6
Ward:	34
<b>Occupancy rate:</b>	<b>78.1%</b>

Occupancy rate was lower in 2021 due to COVID-19. Less staff were available and there were times when new admissions were not permitted due to staffing &/or outbreak.

### Unrealized Prof. Revenues

Private:	\$7,580
Semi:	\$51,052
<b>Total:</b>	<b>\$58,632</b>

2021 discharges/deaths: 24

### Current Wait List

Private:	14
Semi-Private:	15
Ward:	72
<b>Total:</b>	<b>82</b>

### Monthly Rates December 2021

Basic:	\$1,891.91
Semi-Private:	\$2,150.46
Private:	\$2,474.40

## Expenses

\$8,979,687

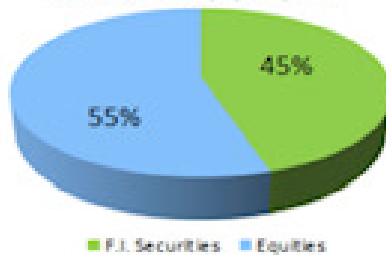
Wages/Benefits	88%
Supplies	6%
Facility Costs	6%

## Unions

ONA  
RN/RPN: 34

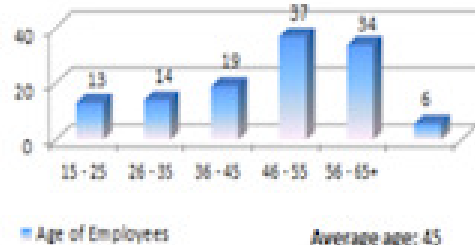
USW  
PSW: 56

Investments: \$1,181,289



Valley Manor contributes over **\$650,000/month** in wages & benefits to the local economy

## Aging Workforce (2022)



Average # of FT sick days 1.5 days/year

# of Employees  
52 Full-time  
71 Part-time  
**FTE 80**



## Enhance

### Enhance Resident Services

**Our residents continuously receive our best care and support**

Valley Manor completed the Accreditation process with Accreditation Canada in October 2022 and earned another successful **4-year Accreditation with Commendation**. Commendation status means that the organization has exceeded and surpassed the fundamental requirements of the accreditation program.

The **newly created full-time position “Infection Control Practitioner”** provides education and training to all visitors about physical distancing, respiratory etiquette, hand hygiene, IPAC practices, and proper use of PPE to ensure the safety of residents, staff and visitors. This new position is also a requirement of the new Fixing Long Term Care Act and Regulations 2022.

The **Champlain regional ethicist** has recently joined meetings at Valley Manor, and has explained how ethics plays a role in long term care settings. The ethicist has also discussed moral dilemmas that staff may encounter and reviewed how submissions can be made to the Ethics committee. The Ethics Committee will provide support to staff working their way through a dilemma.

Valley Manor is also excited to share that we now have a newly formed **Family Council**. There have been several meetings this past year. The Family Council collaborate with staff in effort to maintain and enhance the quality of life for residents and to provide a voice in decisions within the home that affect them.

A new **automated medication dispensing cabinet** is now functional for emergency stock medication and the integrated medication management system is implemented. The home, in collaboration with the Long-Term Care Pharmacist completes the Medication Safety Self-Assessments developed by ISMP annually to evaluate the safety of our medication system, identify vulnerabilities and opportunities for improvement, increase awareness of safe medication system characteristics and monitor progress over time. The Long-Term Care Pharmacist also provides quarterly reports and will now be participating in the **Continuous Quality Improvement** meetings that are held every 2 months. The Long Term Care Pharmacist reports on Drug utilization, Chemical restraint usage – (# of injectable antipsychotics administered to restrain a resident from harming themselves or others), adverse medication reactions, medication incidents, Glucagon use and incidents of severe hypoglycemia, and quality improvement audits. This information will now be shared with a member of the Resident Council as well as a member of the Family Council at the Continuous Quality Improvement Meetings. It will also be posted on the Continuous Quality Improvement Board as part of the homes **Quality Improvement Plan**.

The home has been updating the **Emergency Preparedness** policies and procedures as required under FLTCA. A staff member has been dedicated to provide a thorough and comprehensive review alongside the CEO. The home is preparing to have a "Mock" Full Evacuation to review the emergency preparedness plan of the organization and evaluate Valley Manor Nursing Home standard operating procedure. The Valley Manor website displays the Emergency Plan Program Manual available for residents, families, and other key stake-holders to review. The Health and Safety Committee has reviewed the Pandemic Plan and all of the associated policies that were started at the beginning of the Pandemic.

**Valley Manor's Quality Improvement Plan** continues to be developed with the voice of our residents and their family members/POA's/SDM's in effort to attain to sustain provincial benchmarks for long-term care quality indicators. Valley Manor has implemented an improved Continuous Quality Improvement Committee according to the new Fixing Long Term Care Act which includes additional key team members. They are the CEO, Director of Care, Medical Director, Every designated lead of the home, registered dietitian, Pharmacist, RN or RPN, PSW, a member of the home's Residents' Council, a member of Family Council and the RAI/MDS Coordinator

Quality is also improved through a continuous process of self-assessment with targets and standards, reviewing and evaluating progress and implementing quality improvement and other action plans. The policies, procedures, implementing processes and monitoring mechanisms are made known to our residents, families and stakeholders with the aim of involving everyone in the development of our culture. In order to develop this quality culture, we use a range of ways to consult and inform, and aim to continuously improve effective communications.

**Enrich**

## **Enrich Workforce**

**Attract and retain team members who are equipped, resident focused, engaged and work harmoniously.**

The new Director of HR position has proven to be effective and of value to assist with the increase in HR requirements and to assist with the establishment of a progressive HR campaign to attract, recruit and retain employees to long term care.

The Director of HR chairs the Madawaska Communities Circle of Health HR team in addition to participating on the OVOHT Health and Human Resources Enabler group.

Valley Manor has created a **robust HR plan** and is currently in the process of implementation which involves improved staff wages, improved pension plans and benefits for all staff, hiring incentives and bonuses for current staff in addition to sign on bonuses for new hires.

Valley Manor renegotiated both the ONA and USW Collective Agreements in 2023. Both unions received reasonable increases due to inflation and the desire to attract and retain the current and new quality healthcare workers.

**Monthly staff appreciation celebrations** continue for all staff on a scheduled basis whereby the staff are honoured and recognized for all that they do for the residents at these recognition events. Recognition of the Valley Manor workforce has always been a priority and more emphasis are being put into ensuring that the team is healthy and engaged leads to improved outcomes.

Valley Manor continues to engage with **staffing agencies** in an effort to fill gaps in our schedules and to continue to have back up staff when the need arises. Valley Manor currently uses these agencies for nurses and PSW's.

**Valley Manor provides housing** for all of the agency staff that currently work at Valley Manor in an effort to honour our commitment to staffing the home during the provincial HHR crisis. Valley Manor currently provides 2 homes to house our agency staff. Housing continues to present a challenge in the community and Valley Manor has approached our Municipality to work closely with them to be part of the solution to the housing challenges which can impede recruitment efforts at Valley Manor.

Valley Manor is in the process of recruiting **internationally trained nurses and PSW's** for long term employment in an effort to address the provincial staffing crisis and fill gaps in our schedules. This is a rather lengthy process and details will be shared when we finalize the progress.

Valley Manor continues to **engage in partnerships** with Loyalist College, Algonquin College, Madawaska Valley & District High School, Base Petawawa, Rural Outreach and OV Jobs.

Dr. Malinowski obtained the **Medical Director in Long Term Care certification** course and Trisha DesLaurier earned additional qualifications by obtaining the **Administrator Leadership diploma** in order to meet the new legislation of the Fixing Long Term Care Act.

Valley Manor engaged a consultant to assist with the creation of a **new master schedule** for the PSW team, and this was implemented last fall. The home and the USW union agreed to work together to create a modernized schedule which addresses the reduced labour force in our remote area while trying to provide **work life balance and improved outcomes for our employees.**

The CEO along with other members of the MCCH participates in and implements **the Inclusion, Diversity, Equity and Access (IDEAS)** framework throughout the organization.



Valley Manor's leadership team enrolled and completed in a **Mental Health First Aide** Certification course with the Mental Health Commission of Canada. There are also plans to educate all staff on this very important mental health crisis that no one is immune to.

**Workplace Violence Prevention** is part of Valley Manor's Strategic Plan and in accordance with the requirements of Bill 168, the Valley Manor Board of Directors, our CEO, & the Management Team of Valley Manor are committed to the prevention of workplace violence and is ultimately responsible for worker health and safety.

## Engage

# Engage Partners

**Engage in activities that enable our vision through partnerships and in local community initiatives.**

Valley Manor continues its **partnership** with the St. Francis Valley Healthcare Foundation, the Madawaska Valley Community Circle of Health, Loyalist College, Behavioral Supports Ontario, and participates in the Joint Ethics Advisory Committee.

The CEO and the Director of HR & Finance continue to participate in the **Capital Development Advisory Group for Advantage Ontario** which is an advocacy group for not-for-profit long term care homes. Most recently advocating for increased funding for rural, not for profit homes and a decreased community fundraising component for small rural communities such as Valley Manor to assist

The CEO, DOC and the Director of HR & Finance actively participate in many of **Ottawa Valley Ontario Health Team tables which include Communications, Finance and Stability, Governance, Health & Human Resources**. Valley Manor continues to ensure that long term care is well represented at the OHT table.

Valley Manor continues to partner with St. Francis Memorial Hospital for their IT services and foot care services.

Valley Manor continues to have representation at many regions and provincial tables such as the Canadian Society for Nutrition Management, Advantage Ontario's Capital Redevelopment Group, IPAC Community of Practice, Madawaska Valley Physician Recruitment, Advantage Ontario Regional 7 Not For-Profit Long-Term Care Table and the Champlain Regional Ethics Committee to name a few.

## Energize redevelopment

**Complete the facility capital development project and successful operation, migrations and start up.**

We continue the journey in redevelopment as our 90-bed not-for-profit home has a Category "C" status. The Board & CEO are dedicated to the Redevelopment process and continue to engage the Resident's Council, Family Council, and the public on the redevelopment process via the Valley Manor website and communiques.

Although Valley Manor has been approved by the Ministry to redevelop, there remains a number of pressures within the economy which have increased the cost of construction. Valley Manor expects that these pressures will impact the planned construction date and we continue to work closely with the Capital Branch of the Ministry of Long-Term Care, Infrastructure Ontario, and our local MPP and the Minister of Long-Term Care to continue moving the redevelopment of Valley Manor forward.

This past spring and summer, the Valley Manor Capital Redevelopment team went back to work with Hobin Architects to amend the Valley Manor design in an effort to meet Infection and Prevention Control practices that surfaced during the pandemic. These design changes include additional space to provide physical distancing in numerous common areas, a screening area at the entrance of the building, increased PPE storage in all resident rooms, the addition of centralized laundry, the removal of individual laundry areas in each neighbourhood, the removal of several offices and the addition of hoteling stations for employees.

Valley Manor continues to reinvest their yearly surpluses back into investments which are earmarked for the redevelopment of the home.

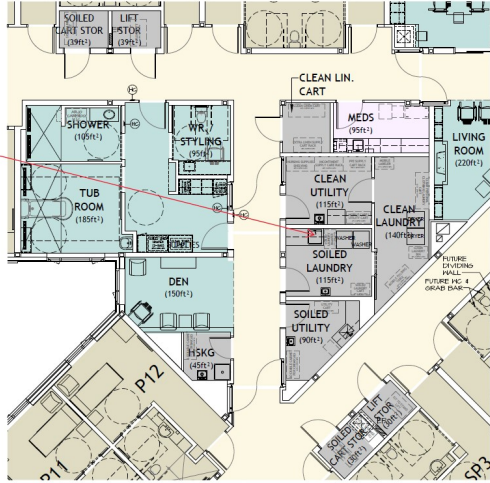
Community Redevelopment update presentations were provided to Madawaska Valley, South Algonquin and Killaloe, Hagarty and Richards Municipalities in the Spring of 2022 to keep communication and updates open and transparent regarding the redevelopment project.



Honourable Minister of Long-term Care Paul Calandra attended Valley Manor on Monday, June 12th to review Valley Manor's final stages of their redevelopment plans with John Yakabuski MPP, the Valley Manor Executive Team and the Board of Directors.

Board members Annie Marsh, Bill Rodnick, Jill Vermaire, Director of HR and Finance Stacey McDonald, Honourable Minister of Long-Term Care Paul Calandra, CEO Trisha DesLaurier, MPP John Yakabuski and Director of Care Gail Yantha

TA: concerned about the lack of hopper sink, both in soiled laundry and soiled utility. She agrees that a hopper is bad, but sometimes a machine is not enough, wants further discussion. Andrew offered that another home is using the toilet in the resident room to pre-wash some extra soiled things. Not a delicate solution.  
Good homework item for VM



COLOUR LEGEND  
 RESIDENT ROOMS  
 RESIDENT L.P.A.  
 FOOD SERVICES  
 CARE  
 ADMINISTRATION SERVICES  
 CIRCULATION

Thoughts from VM staff:  
 TA: breaks and changeover often happen at different times  
 Trish: individual rooms would be very beneficial.  
 CB: echo previous comments, in support of sep break rooms. (Staff were asked if they wanted to move neighbourhoods, most declined, they like their groups/neighbourhoods).  
 DL: from activity dept., smallest dept. Wants to discuss how cohorting will affect smaller groups. (positively received by table, open for functional discussion)

COVID has changed the original thinking on:

- Resident living experience
- Family, friends and volunteer experience
- Staff working experience
- Operational practices

M: what do staff think of cohorted laff rooms in practice?



## New Capital Redevelopment Funding Model introduced in November 2022

Background

- The government made a commitment to build 30,000 much-needed new Long-Term Care (LTC) beds in the province by 2028. Ontario now has 31,705 new and 28,648 upgraded beds in development across the province.
- The Ministry of Long-Term Care (“the ministry”) recognizes the shift in the economic environment since the release of the *Long-Term Care Home Capital Development Funding Policy, 2020*, preventing operators from moving forward with building long-term care homes.
- In late October 2022, the ministry engaged with operators and lenders to understand the financial pressures affecting the development of long-term care (LTC) homes.
- Today, we will be discussing changes to the capital development program with respect to accelerating development and redevelopment of LTC beds.

Purpose

- The purpose of this briefing is to provide you with information on the policy updates, eligibility for the supplemental funding, the submission process and roll-out plan.

### Changes to the Capital Development Program

The ministry will be implementing a fixed, time-limited CFS supplement. There are two essential components to the supplement:

- CFS Top-up (FPs and NFPs)**
  - In addition to existing base CFS funding, a fixed, time-limited CFS supplemental top-up of up to \$35 per bed per day will be provided to eligible operators, regardless of the geographic market segment.
- CFS Construction Grant (NFP Only)**
  - Eligible non-profit operators can request to convert up to a maximum of \$15 per bed into a “CFS Construction Grant” which is payable at the start of construction, subject to meeting requirements of the updated policy and the Development Agreement (DA) to the ministry’s satisfaction. See next slide.

Components of CFS per diem and Development Grant	Large urban	Urban	Mid-size	Rural
Base CFS per diem	\$23.78	\$20.53	\$20.53	\$20.78
Small home (up to and including 96 beds)	+\$1.50	+\$1.50	+\$1.50	+\$1.50
Medium home (97 beds up to and including 160 beds)	+\$0.75	+\$0.75	+\$0.75	+\$0.75
Large home (161 beds and over)	+\$0.00	+\$0.00	+\$0.00	+\$0.00
CFS Top-Up <sup>1</sup> (if eligible)	+35.00	+35.00	+35.00	+35.00
<b>Maximum CFS per diem</b>	<b>\$60.28</b>	<b>\$57.03</b>	<b>\$57.03</b>	<b>\$57.28</b>
Development grant percentage	17%	17%	10%	12%
<b>Maximum development grant per bed</b>	<b>\$51,376</b>	<b>\$47,926</b>	<b>\$24,923</b>	<b>\$29,246</b>

<sup>1</sup> CFS top-up is up to \$35 per bed per day based on the actual construction costs relating to the development of LTC homes after the approval of the operator’s submission of the final eligible costs, in accordance with the terms of the Development Agreement.

# What has been completed to date?



## What's Needed to Get An Approval to Construct?

<b>Project Approval</b>	<ul style="list-style-type: none"><li>Obtain ministry <b>project approval</b> to confirm that funding for development/ redevelopment of beds has been approved</li></ul>
<b>Capital and Licensing Review</b>	<ul style="list-style-type: none"><li><b>Secure land and confirm financing</b> is in place or will be in place to complete the project</li><li><b>Execute a Development Agreement</b>, once the licensing and project review approval processes are completed</li></ul>
<b>Project Design</b>	<ul style="list-style-type: none"><li>Submit <b>preliminary plans, working drawings and operational plan</b> for ministry's review and approval</li></ul> <p>Adding New Covid Infection Prevention &amp; Control piece to the drawings for resubmission.</p>
<b>Tendering</b>	<ul style="list-style-type: none"><li><b>Tender</b> for construction</li><li>Submit <b>Approval to Construct Package</b> (FEC, Procurement and Bonding Attestation, Certificate of Insurance, building permits, construction schedule, etc.)</li></ul>

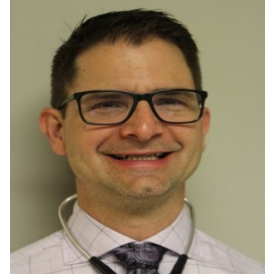
10



Accreditation with Commendation Award and celebration

# MEDICAL DIRECTOR DR. JASON MALINOWSKI

---



It is again a pleasure to send my greetings for the Annual General Meeting, as the Medical Director of the Valley Manor Long-term Care Home.

Since my last dispatch to the Annual General Meeting, there is again more cause for hope. The COVID-19 pandemic appears to be further abating, although we have had some concerning waves of infection this past year. The beds are starting to repopulate.

As a reflection of the challenges seen in the LTC sector during (and prior to) the pandemic, the government has proclaimed the "Fixing Long-Term Care" act this year. The act strengthens the accountability of the home to the residents and families and sets out in more detail the responsibilities of the caregivers. We have been able to parse out the details of what this new legislation means for our home and are implementing the requirements.

Since the last report we welcomed Dr. Erin Murray who joined the team in the second half of 2022. We continue to recruit for a nurse practitioner to join our team.

As I had stated in my last report, we continue to meet the challenges bravely and deliberately. We celebrate the successes proudly. This has been an extremely challenging time for us as a global society, and as a long-term care home. There is hope, as we continue to normalize the lives of our staff and residents, and continue to further the redevelopment plans and implementation.





## St. Francis Valley Healthcare Foundation Annual Report 2022-2023

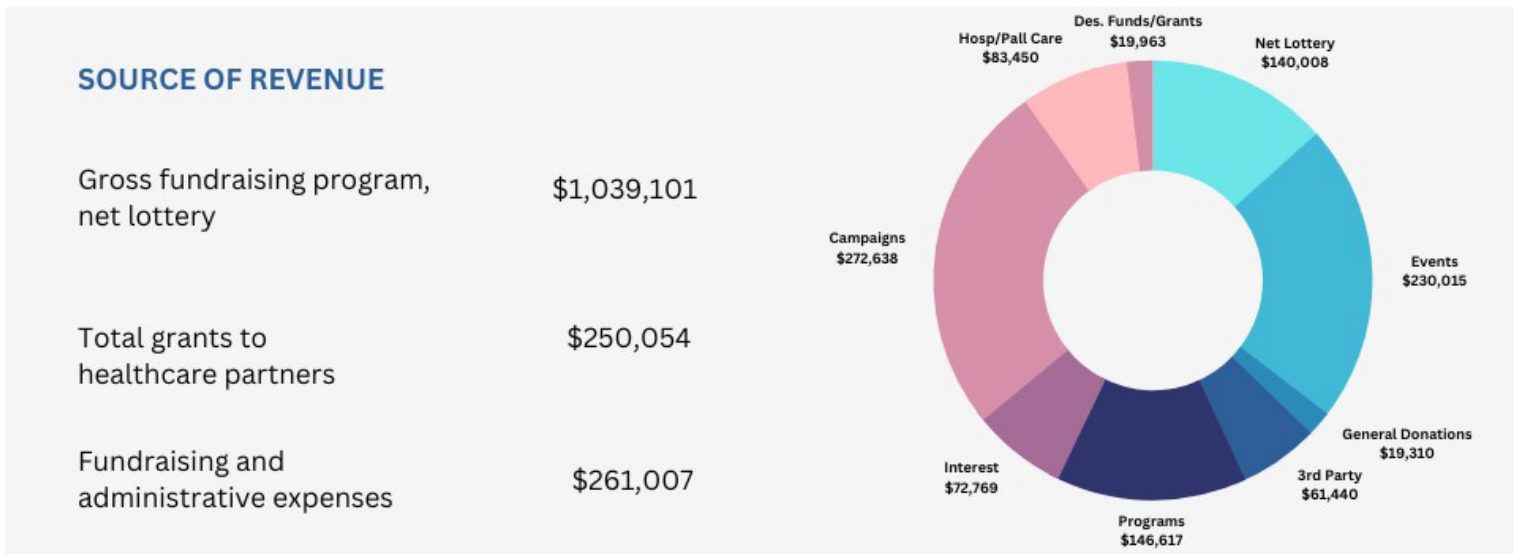
**We are very pleased to present our Annual Report for 2022/23.\* It was an exceptional year for the Foundation – in fact, one of our best ever.** They say that when a community comes together, powerful things happen. We are so proud of our staff team, grateful for the ongoing support of our Board and awesome team of volunteers, amazed by the generosity of our donors and very respectful of the

incredible dedication of our Healthcare Partners. We are an intricate web, and we recognize that collaboration is integral to ensuring exceptional healthcare in our community. A heartfelt thankyou to everyone!

The SFVH Foundation raises funds to support our local healthcare organizations including St Francis Memorial Hospital, Valley Manor Long Term Care and Madawaska Valley Hospice Palliative Care. Through your generous donations in 2022/23, we raised over **ONE MILLION DOLLARS. We exceeded last year's net revenue by \$280.0K.** One of the most special moments this year was the return of in person events and activities. It was wonderful to see the smiling faces of event participants and to feel the energy of our amazing volunteer teams.

### Our Results at a Glance

We are accountable to all our stakeholders and strive to use each dollar donated efficiently and effectively.



\*This report is based on the Foundation's fiscal year April 1, 2022 – March 31, 2023

### Our Accomplishments

Highlights from our 2022/23 Annual Plan included:

- Executing a new Rockathon event
- Utilizing crowdfunding as a new technique for giving
- Completing the compliance requirements under the new Ontario Not-for-profit Corporations Act
- Planning for the Emergency Department Redevelopment Campaign
- Providing support to our many successful third-party events
- Realizing record breaking results for our annual events such as Tree of Lights, Golf, Online Auction, and the Memorial Butterfly Release

## Your Dollars at Work

Because of your generous support, we provided the following grants to our partners:



**St. Francis Memorial Hospital**  
**\$180,065**

Ventilator, defibrillators, lab upgrades, IV fluid warmer, stability chair and more.



**MV Hospice Palliative Care**  
**\$40,342**

Program support including volunteer training, caretaker and bereavement assistance, loan cupboard and more.



**Valley Manor Long Term Care Home**  
**\$29,647**

Resident lifts, mattresses and items for resident activities.

## Our Donors

Total Active Donors: 1927 (previous year 1511)  
 New Donors: 582 (previous year 329) – 205 from  
 Rockathon Event Donor Retention Rate: 64% (Industry benchmark 45%)  
 Monthly Giving Club: 168 members -  
 \$73,000 Donor Appreciation Calls: 540

## The Future

**We believe in planning for the future healthcare needs of our partners and community. Upcoming equipment purchases, investment decisions and managing surplus funds are based on a five-year plan provided to us by**

each of our Healthcare Partners. A total of \$1,750,000 is invested in short term GICs. This includes dollars held in trust for Valley Manor Redevelopment (\$1,074,486), Emergency Department Redevelopment, and the Madawaska Valley Hospice Palliative Care Program. Surplus dollars will be allocated to our Healthcare Partners according to priority needs.

In 2023/24, we are committed to providing:

- **\$321,000 to the St Francis Memorial Hospital** for an ultrasound machine, baby isolette, stretchers, bi-pap machine, vital signs monitors and more.
- **\$35,000 to the Valley Manor** for equipment, resident activities and more.

- **\$40,000 to MV Hospice Palliative Care** for program support.

In addition, we will initiate the quiet phase of the Emergency Department Redevelopment Campaign, revamp our website, and continue to explore opportunities for business practice efficiencies.

Under our By-Laws, Board Directors have a maximum continuous term of 8 years. Succession planning is key for our success. Having served on the Board for 6 years including 5 years as Board Chair, it is time for me to step down as Board Chair. I will remain on the Board and will continue to support the new Executive Committee and Foundation. It has been an honour to serve as the Board Chair and I have thoroughly enjoyed working with such a professional and energetic group of Directors. Thank you for your ongoing support and guidance. I salute Erin and her team having worked through the pandemic with amazing results. Her leadership and understanding the importance of building relationships with donors, volunteers and our Healthcare Partners is largely why the Foundation has been so successful. I am forever grateful to our community of donors, volunteers, staff, and Healthcare workers and look forward to another productive year of working together. We certainly have an awesome community. Thank you!

***“The greatness of a community is most accurately measured by the compassionate actions of its members.”***

(Coretta Scott King)

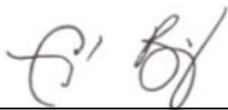


Karen Tierney  
Board Chair (2019 – June 2023)  
St. Francis Valley Healthcare Foundation



Erin Gienow  
Executive Director  
St. Francis Valley Healthcare Foundation

After being a SFVHF Director for a year, I thank everyone for their confidence in me as I move into my new role as Chair. I am looking forward to working with our Healthcare Partners and dedicated team of volunteers and staff.



Cheryl Reid; Incoming Board Chair as of June 2023





# MINISTRY OF LONG-TERM CARE 2023 COMPLIANCE INSPECTION RESULTS

<p><b>Ontario</b></p> <p><b>Ministry of Long-Term Care</b> Long-Term Care Operations Division Long-Term Care Inspections Branch</p> <p><b>Inspection Report Under the Fixing Long-Term Care Act, 2021</b></p> <p><b>Ottawa District</b> 347 Preston Street, Suite 420 Ottawa, ON, K1S 3J4 Telephone: (877) 779-5559</p> <p style="text-align: center;"><b>Original Public Report</b></p> <p><b>Report Issue Date:</b> June 29, 2023 <b>Inspection Number:</b> 2023-1180-0002</p> <p><b>Inspection Type:</b> Complaint Critical Incident System</p> <p><b>Licensee:</b> Valley Manor Inc. <b>Long Term Care Home and City:</b> Valley Manor Nursing Home, Barry's Bay</p> <p><b>Lead Inspector:</b> Polly Gray-Pattamore (740790)</p> <p><b>Inspector Digital Signature:</b> Pauline L. Gray Pattamore <small>Digitally signed by Pauline L. Gray-Pattamore Date: 2023.06.29 14:20:02 -0400</small></p> <p><b>Additional Inspector(s)</b></p> <p style="text-align: center;"><b>INSPECTION SUMMARY</b></p> <p>The inspection occurred onsite on the following date(s): June 8-14, 2023.</p> <p>The following intake was completed in this complaint inspection:</p> <ul style="list-style-type: none"> <li>Intake #00085449 was related to resident care and support services; Family Council; and staff, training and care standards.</li> </ul> <p>The following intakes were completed in this Critical Incident (CI) inspection:</p> <ul style="list-style-type: none"> <li>Intake #00015988/CI#2675-00007-22 was related to alleged staff to resident abuse.</li> <li>Intake #00089560/CI#2675-00004-23 was related to a fall with injury.</li> </ul> <p>The following <b>Inspection Protocols</b> were used during this inspection: Resident Care and Support Services</p>	<p>The following <b>Inspection Protocols</b> were used during this inspection: Resident Care and Support Services Residents' and Family Councils Infection Prevention and Control</p> <p style="text-align: right;">1</p> <p><b>Ontario</b></p> <p><b>Ministry of Long-Term Care</b> Long-Term Care Operations Division Long-Term Care Inspections Branch</p> <p><b>Inspection Report Under the Fixing Long-Term Care Act, 2021</b></p> <p><b>Ottawa District</b> 347 Preston Street, Suite 420 Ottawa, ON, K1S 3J4 Telephone: (877) 779-5559</p> <p>Prevention of Abuse and Neglect Staffing, Training and Care Standards Falls Prevention and Management</p> <p style="text-align: center;"><b>INSPECTION RESULTS</b></p> <p>During the course of this inspection, the inspector(s) made relevant observations, reviewed records and conducted interviews, as applicable. There were no findings of non-compliance.</p>
---	---

**Valley Manor is pleased to share that we have had another successful year meeting compliance with the Act & Regulations of the Fixing Long Term Care Act 2022. A thorough 7-day inspection proved that during the course of the inspection, there were no findings of non-compliance. These reports are provided to the Board of Directors, Residents Council and Family Council when received and can also be viewed online.**

**Valley Manor purchased a new van for resident transportation this year which can transport 4 wheelchairs, a mobile passenger and the driver. There were plenty of happy faces and big smiles on the first adventure out.**

**Lisa Yantha, Manager of Activities and Volunteers stated that the residents felt like they were all driving a Cadillac. There are plans for many more tours and outings this month in addition to escorted trips to doctor's appointments and specialists in the city.**



## Admissions & Occupancy 2022

# of Crisis Residents Admitted- **2**

# of Admissions from SFMH - **6**

# of residents on waiting list - **87**

*Admissions were low due to pandemic*

## Residents

- **80** residents live at Valley Manor
- **12** falls (some residents had multiple falls)
- **6** residents ambulate independently in their room
- **7** residents using room alert
- **67/80** residents incontinent
- **16** resident-to-staff physical assaults on day shift
- **43** I-TAP visits monthly
- **3** resident-to-staff physical assaults on night shift
- **30** residents are using antipsychotic medications
- **22** residents attended music therapy programs
- **3** residents utilize oxygen

*as of December 2022*

## Facility Services

# of loads of laundry monthly = **571**

# of work orders monthly- **223**

# of unplanned service repairs monthly **101**



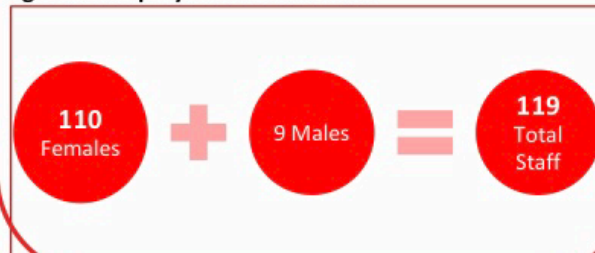
## Human Resources

- The Average Age of an Employee at Valley Manor is **47** years
- Most employees are in the **45–55-year** age group

Figure 1: Employment Mix



Figure 1: Employment Gender Mix



## Physiotherapy

There are **22** referrals to Physiotherapy per month

There are **23** referrals to Registered Dietician per month

*on average*

# OUR VALLEY MANOR FAMILY. A BEAUTIFUL PLACE TO LIVE & WORK!



