

Family Council Meeting Notes

March 10, 2020

6:30 PM

In attendance: Janet, Josie, Melissa, Gaye, Kim

Families Members in attendance: 5 family members

1. Welcome and Introductions

2. Additional items added to the agenda:

- True Doors- This had been discussed at a previous meeting. In our investigation of this initiative, it was determined that the current design of the resident doors do not accommodate the True Door decals. However, with the renovations that have been funded, we may be replacing resident doors. If so, we can place True doors back on the priority list at a later date.
- Dining Room- table cleaning- observed a staff member scrubbing the tables- this effort is much appreciated.
- New deck area- there is a raised edge on one of the cement blocks that is a safety hazard. While there is a sign providing a warning, if a resident is visually impaired or has dementia, they would not necessarily see the sign. Wheel chairs also find it difficult to get over that lip. It was explained that this is caused by frost and it will resolve itself in the spring but it was agreed that there needs to be a fix that addresses the area now. Gaye Ernst will explore with the contractor.
- Posting on the minutes- agreed that in addition to posting the minutes on the bulletin Board, they should be posted on the website.

3. Follow up from last meeting:

- Privacy Locks- feedback is positive from both residents- has not had the need to use it recently – used a lot in the beginning. Great to know it is there in the event it is needed in the future. The lock is easy to open- people who need to get in can get in.
- Staff lining outside of the Dining Room- have spoken to staff and they will no longer line residents in advance of the dining room opening. There are, however many residents who want to be in the line. That is their choice.
- Access to Incontinence products- This was discussed with staff-access to these products has been much better
- Wounds- previous family member where a family member identified a wound on their loved one but staff was not aware. Concerns that they recently had a personal experience where we identified a wound that staff were not aware. How do staff identify wounds? What safeguards and checks are in place to identify wounds? How are they discovered. The protocol was explained. The concerns continued- once it was brought forward- addressed well concern was the fact that staff had not identified. In addition, the medication was discontinued according to the Doctors orders however it did not appear that the wound was reassessed once wound was treated- still not closed. Kim Croft will follow up regarding these concerns.

4. Shoreham Scorecard- Quarter 2

- Josie provided an overview. The Scorecard will be posted. Third quarter will be available soon now that we have our data and access to our systems. Significant improvements in the number of outbreaks. Handwashing Audits-Like to keep it at least 90% compliance.

5. Our Building

- Priority list- see attached List-Pleas to have received significant funding from DHW and our Foundation. The items that are on the list but do not have any funding attached yet will be addressed in order of priority as funding becomes available. Discussion occurred regarding how the resident room upgrades will unfold and how residents will be engaged in the selection process. Project Planning will begin soon
- Resident Rooms Upgrades- funded by DHW
- Building Exterior-Upgrades funded by DHW

6. Cyber Incident- We can now confirm that there was no personal or health information exported from the system. Our systems are now coming back on line- getting back to normal, front entrance doors are an issue but not related to the cyber incident.

7. Corona Virus Preparedness – discussion regarding the recently announced out of country visitor restrictions, we have begun posting information on the website- will be maintain as new information becomes available. Families may make the decision to take a loved one home. We support that however, if the situation deteriorates in NS- it could be an extended period of time. If the resident returns to the facility during the outbreak, they will need to be isolated in the facility for the designated period to reduce the risk of spreading the virus to other residents.

8. Staff Recognition Video- This was an initiative that was presented to staff last year at the Staff recognition/ Long Service Award Ceremony. It was very well received by staff last year. We would like to do it again this year. We are looking for families to participate in this initiative.

9. Resident tracking devices- are their devices when mom leaves the building. Options discussed. They change dependent on the needs of the residents. Do not want to restrict the resident independence. We will explore an emergency button in the smoke hut as one improvement we can make.

Meeting adjourned at 7:50 pm