

**Shoreham Village Senior Citizen Association
Update on Strategic Priorities
CEO Report to the Board of Directors
March 24, 2020**

I hereby confirm that all statutory withholdings and remittances relating to the organization's employees or otherwise have been made.

Strategic Priority: Achieving Accreditation by 2023

Now that we have had some significant building improvements and several initiatives such as PCC (Point Click Care) and EMAR (Electronic Medication Administration Record) complete, we are finalizing details with Accreditation for full accreditation processes. Our goal is to align it with the Northwood 2023 Survey visit; that will allow Shoreham to prepare for accreditation at the same time as Northwood prepares for the survey visit. The Management team feels going through the same process and within a similar time frame will be advantageous.

Creating and sustaining a caring culture

- 1. Services are delivered and decisions made according to the organization's values.**
- 2. A healthy and safe work environment and positive quality work life are promoted and supported.**
- 3. A quality improvement culture is promoted throughout the organization.**

Point Click Care/Electronic Record (PCC) Project: Now that the EMAR module implementation is essentially complete, we have begun to implement the Skin and Wound Module. Plans are also underway to implement the PCC Infection Control and Incident Management Modules. Having all resident records in one system will be very beneficial for tracking and monitoring as well as adhering to privacy laws.

Planning and designing services

- 4. Services are planned and designed to meet the needs of the community.**
- 5. The changing needs and health status of the community served are understood.**
- 6. Operational plans are developed and implemented to achieve the strategic plan, goals and objectives.**
- 7. The organization's leaders collaborate with a broad network of stakeholders.**

Newsletter: Our March edition of the newsletter is attached.

Good Friday service: Local clergy are exploring the possibility of hosting their Good Friday in the Shoreham Village parking lot. This would include a live stream option for residents.

Allocating resources and building infrastructure

- 8. The organizations financial resources are allocated and managed to maximize efficiency and meet the service needs of the community.**
- 9. The physical environment is safe.**
- 10. The organization invests in its people and supports their professional development.**
- 11. Information management policies and systems meet current information needs, take into consideration future information needs, and enhance organizational performance.**

Capital/Building Improvements:

Funded Project Updates:

COVID- 19 Environmental Services Grant Projects:

- Hoarding barriers- They have been received and we hope they will be installed by early April.
- Two Auto scrubbers- We expect to receive the Scrubbers by the end of March.
- Privacy Curtains are done but we are awaiting tracking from NB.

DHW Capital Approved Projects (2020):

- Exterior repairs- will complete this spring.
- Upgrade to Resident Rooms- the tender has closed. It came in higher than our available funding. We are exploring reducing the scope of this project - assuming the remainder of the identified improvements would be completed with the renovation project.
- The A/D Wing Kitchenette upgrades are now complete.
- D Wing Waste Pipe- flooring repairs are now complete.

DHW IPAC Approved projects:

- Med cabinets- are all installed.
- Covered Hampers \$5,600 – in place
- Lockable Housekeeping Carts \$2,000 – in place
- Vital Sign Monitors \$10,500 –in place

DHW Approved IPIC Projects:

- C Wing Ceiling Lifts- models are being evaluated.
- B Wing kitchenette upgrades- complete.

DHW Emergency Funding Requests: We received funding approval for the B Wing Sewer pipe repairs and the fridge. There was a delay in our submission to this program due to access to an invoice for the flooring. The Sump pump project is complete. Government covered the additional costs related to this project. The new fridge will be installed by end of March.

Identified Priorities: There are a number of equipment/purchase requests that are outstanding. A list of priority items that have been submitted to the various outstanding funding post and those

items that do not have a funding sources is attached.

Foundation: The Foundation has requested a wish list for Golf Tournament donor support. There are many outstanding funding submissions from the various government funding sources (see attached priority list-items highlighted in yellow). The decision regarding replacement vs a renovation for the building remains outstanding. As a result, making a decision regarding priority items is a challenge. We will continue to work with the foundation.

Monitoring and improving quality and safety

12. There is a process to manage and mitigate risk in the organization.

13. The organization is prepared for disasters and emergencies.

14. Resident Safety is monitored and improved on an ongoing basis.

15. There is a defined quality management system used to assess performance and improve quality.

Staffing levels: We continue to invest significant time and energy to address ongoing staffing challenges.

- 1 vacant RN position. We made an offer, but it was declined. This individual has agreed to work casual.
- 1 vacant LPN position.
- 6 FT CCA positions- We have had a request from a previous employee who wants to return to Shoreham. The outstanding individual from Ontario who has completed quarantine- no longer wants to work/live in Chester and will be joining Northwood instead.
- Agency usage- Our Agency usage continues to grow to address staffing shortages and minimize our use of mandating language.

Recruitment: There is a new Part time CCA Program being started in Bridgewater. Students would be employed part time after they complete 500 hours CCA work. We are exploring our opportunities with the program organizers.

COVID-19 Vaccine Clinics: Our first clinics were held on February 24 and 26. Eighty of our current 82 residents have received their first dose. Several residents have received their second dose. Of our active Designated Caregivers (DCG) 83% are vaccinated. Several of the DCGs who were on the waiting list were able to go to a Northwood Bedford Vaccine clinic.

Client Safety

COVID-19 Update: We continue to be COVID-19 free.

There are several items that remaining outstanding following the NSH IPAC (Nova Scotia Health Infection Prevention and Control) team walk through. Deficiencies include dirty utility rooms (need one for each wing), additional private rooms and the square footage of existing private rooms. These items will be addressed in the building renewal plan.

Radon testing: Radon kits are scheduled to be collected on Monday, March 29, 2021 and will be sent for testing. We do not yet have a time frame for the report.

2. Strategic Priority: Facility Renewal:

Action Plan

On January 28, the Premier announced that Government is committing to major investment in our facility.

We had our preliminary meeting with the province. They have provided us with the requirements for the next steps and we have begun that work.

Government has not finalized the decision re replace or renovate based on our previous submission. There is openness to review the proposed plan to incorporate our learnings from COVID-19.

We did initiate a very informal scan of land available in the area in preparation for our next meeting with the Provincial Project Team.

We are meeting with the Board of the Apartments to discuss available land.

Our collective advocacy, collaboration, relationship building, teamwork and persistence over the past 8 years appears to have paid off.

Risk Report

Reputational: NSHEPP experienced a potential employee privacy breach. NSHEPP has notified plan members directly.

Outstanding issues:

Compliance Risk: Insurance- As previously communicated, the Ministerial Order has provided a temporary reprieve for the insurance industry Pandemic Exclusion. The insurance renewal date for Shoreham Village is April 2021. The province is examining an NSHEPP proposed solution.

Compliance Risk: C-Wing- DHW had classified this unit as a secure unit. However, it was designed and staffed to reduce risks for residents with elopement risk only. Having the classification of a secure unit, we have seen an increase in resident referrals with complex responsive behaviors referred to this unit by the NSHA Placement Office. We have notified DHW that the door for C-Wing is no longer locked.

Reputational Risk: A resident has reported 2 of our staff to the College of Registered Nurses for Elder Abuse and Sexual Assault. One of the investigations has now been closed. The investigation on the second complaint continues.

Service Delivery Risk: As a result of our experience at Northwood Halifax Campus, the facility poses many challenges with continuing the spread of COVI-19 within a building with multiple shared rooms and minimal living space. Our best efforts will be to focus on preventing the introduction of the disease in the facility.

Risk Report Legend:

1. Corporate Risk: Strategic, Compliance, Financial, Operational and/or Reputational Risk

Compliance Risk: The threat posed to an organization's financial, organizational, or reputational standing resulting from violations of laws, regulations, codes of conduct, or organizational standards of practice. (Deloitte, 2015)

Financial Risk: The risk of financial loss to the organization's ability to earn, raise or access capital, as well as costs associated with its transfer of risk. This includes effectiveness of financial processes for reporting, budgeting, funding allocation and fiscal stewardship. (North Simcoe Muskoka LHIN, 2010)

Operational Risk: The risk of direct or indirect loss or inability to provide care services, especially to stakeholders, resulting from inadequate or failed internal processes, people and systems or from external events. Operational risks involve factors such as technical or equipment malfunctions and human error, lack of prioritization, management support or expertise, etc. (North Simcoe Muskoka LHIN, 2010)

Reputational Risk: The risk of significant negative public opinion that results in a critical loss of

confidence (patient, staff, physician, family, public). The risk may involve actions that create a lasting negative image of, or loss of confidence in, the overall operations of the organization (North Simcoe Muskoka LHIN, 2010)

Strategic Risk: Risks that affect the entire organization and its long-term objectives and are normally managed by the Board of Directors and Executive Team. (HealthcareCAN (2016).

2. Service Delivery Risk: This includes but is not limited to any event that meets the definition of a Harmful Patient Safety Incident (Accreditation Canada, 2017), a Critical Incident as defined by the Department of Health and Wellness or a Serious Workplace Incident, Injury or Fatality as defined in the Occupational Health and Safety Act.

Harmful Incident: A patient safety incident that resulted in harm to the client. Replaces adverse event and sentinel event. (Accreditation Canada, 2017a).

Critical Incident: A serious event affecting either the resident (client), staff or the public. (Province of Nova Scotia, 2015)

Serious Workplace Incident: An incident such as the following: an accidental explosion, major structural failure, major release of a hazardous substance, a fall from a work area where fall protection is required by regulations. (Province of Nova Scotia, 2017)

Serious Workplace Injury: an injury that endangers life or causes permanent injury, such as, loss of limb, third-degree burn, any injury that requires admission to a hospital. (Province of Nova Scotia, 2017)

Respectfully submitted,
Janet Simm
Chief Executive Officer
Shoreham Village Senior Citizen Association