**Shoreham Village**

**Board of Directors Meeting – Minutes**

**September 21, 2022**

**Present (via Teams)** Joseph Green, Liz Finney, Andrew Snyder, Brian Webb, Alison Kelland, Charlie Teal, Janet Simm and Reinhard Jerabek

1. **Welcome and Introductions**

The Chair welcomed everyone to the meeting, and gave a special welcome to Charlie Teal and Alison Kelland, who are new members of the Board.

1. **Approval of Agenda**

The Chair noted that the agenda will change slightly to accommodate Jennifer Tucker and Reinhard Jerabek’s reporting.

***Motion to approve agenda. Brian Webb and seconded by Elizabeth Finney. Motion Carried.***

1. **Approval of Minutes – June 15, 2022**

***Motion to approve minutes from the June 15, 2022 meeting. Andrew Snyder and seconded by Charlie Teal. Motion carried.***

1. **Finance Report**
   1. Financial Statements to June 30th, 2022 (Attachment) (Reinhard to join at 4:30 pm)

* The Financial Statements are prepared for June, instead of July, due to a back log in the finance department. A new Payroll system was recently implemented at NW, which has increased staff workload. This payroll system will be adopted at SV, once all the program kinks are addressed.
* Year-over-Year has been steady - 1.5 million. 600,000 is owed back to the Department of Seniors and Long Term Care (DSLC), to pay back some up front covid funding that was provided.
* There is a substantial surplus
* There has been a significant surplus in resident care, due to the Travel Nurse program that has been supplied to us at no cost by the DSLC. Starting on September 1, 2023, they are reducing our bi-weekly funding to help offset the funding provided for this program. Our revenue will decease once this program is no longer available to us, as we will no longer experience savings in staff salaries and benefits.

*The Board had questions re two areas:*

***Consistence increase in postage services***: Reinhard informed the Board that postage services consists of a number of items. Reinhard will find out exactly what is covered under this category.

***Infection Technology has increased:*** Reinhard noted that the increase was a result of some equipment that was purchased.

Reinhard will follow up on these two items.

***Motion to accept the June Financial Statements as presented. Brian Webb and seconded by Andrew Snyder. Motion Carried.***

1. **Business Arising**
   1. **Formal Partnership Evaluation Update (Dalhousie University)**

* The CEO received notice yesterday of formal ethics approval from Dalhousie University. Communication has been reinstated and they will continue with this research project.
  1. **Board Planning Cycle**
* The Board Planning Cycle is easy to read and follow.
* An education session is planned for our next meeting. Barbara Hall, NW Board Chair, will be doing a presentation on Accreditation. She is an active Accreditation Surveyor and knows the accreditation process very well. There are many accreditation standards, so she will focus on the governance process, as it relates to accreditation.

It can be arranged for someone else to attend a future meeting to provide a more overall review of the accreditation process, if needed.

* The CEO will pre-circulate the standards before the next meeting. The tool to complete the standards is an online tool.

It would be recommended that the tool be completed before the January meeting. The CEO mentioned that it could be completed at the January meeting and submitted as a group, if preferred.

* We look forward to having Barbara Hall join us at our next meeting. The next steps for the January meeting will be discussed.

1. **New Business**
   1. **New Building: Foundation Family Room (see motion below)**

* Many years ago, the Foundation raised approximately $250,000 towards building a Palliative Care Unit for SV. The community was very supportive of this initiative; but unfortunately, government approval was not granted to move forward with this project.

Some of the funds were used to furnish our current Palliative Care room, which currently meets the needs of SV. With the future renovations, all residents will have private rooms, so a palliative care room will not be needed.

SV submitted a proposal to the Foundation to see if they would be supportive of us using the funds raised for the Palliative Care Unit, towards a Family Room in the new building design.

***The Foundation made a motion at their last meeting, to support the proposal for Shoreham to include a Family Room in the new building design, which would be funded using monies that was raised for the Palliative Care Unit.***

***Foundation Motion made on July 6, 2022***

*It was moved by Nancy Murray and seconded by Deborah Housser that should the Department of Seniors and Long-term Care agree to include in the renovation and rebuilding plans for Shoreham Village a Family Room, then the funds raised by the Foundation for purpose of Palliative Care which funds and investment income thereon are now held in a designated account shall be applied to the construction and furnishing of such Family Room in the renovation and rebuilding of Shoreham Village, with the following provisos:*

* *provided that the maximum amount to be funded by the Foundation is limited to the amount it has in the account designated for Palliative Care;*
* *provided that the estimated cost being $292,000 in 2022, no cost overruns are agreed to be funded by the Foundation;*
* *provided by providing funds for the Family Room the Foundation is not agreeing to undertake further Capital project fundraising;*
* *provided that the Family Room shall be available for use by family members whose loved ones are in palliative care;*
* *provided that the Family Room shall also be available as appropriate to family members of other Residents of Shoreham Village;*

*Motion Carried.*

***The Foundation requested confirmation that the Board will not be held liable for any further funding related to the Family Room.***

The Board felt that a Family Room is a good comprise and that the community would support the monies being used in this manner. Families would have a place to stay, while their loved one was in palliative care.

***Motion to accept the SV Foundation’s request to release the Foundation of any liability for further funding related to the Family Room. Elizabeth Finney and seconded by Andrew Snyder. Motion Carried.***

The CEO will draft a letter for the Chair to sign. Once signed, the letter will be given to Janet Creaser, Foundation Chair.

1. **Chairs Report**

* Danielle Barkhouse is the shadow administer to the minister of DSLTC. The Chair and CEO felt that it would be helpful to meet and debrief her on the SV file.

The Chair spoke with Danielle and she is willing to help in any way possible.

1. **CEO Report/Risk Report (Attachment)**
   1. **Q1 Scorecard (Jennifer to join at 4:00 pm)**

Jennifer Tucker presented the Q1 Scorecard from April till June

* Occupancy rate is 94.9% for the 1st quarter. We were holding 4 beds related to resident room renovations. These beds can be released once the project is complete.
* 57% utilization rate for the Respite bed. This is a good utilization rate and is close to the pre-covid rate.
* Increase in resident incidents, due to resident responsive behaviours. The team was consulted to review the incidents and to determine solutions. A number of the incidents were related to the same 3 residents. We had security and one-on-one support available to assist us and the Nurse Practitioner was consulted for interventions. There has been a reduction in the behaviours as a result.

It presents challenges for the team to support the residents, and each other, when there are these kinds of resident behaviours. However, staff use the Gentle Persuasion approach for care and this has a positive impact.

* Falls are stable
* Increase in med errors. Result of one LPN that was making errors. This was performance issue and the staff member is no longer employed with SV. We expect then next quarter results will show improvement.
* Steady for choking, elopement, and other. We are pleased to see that staff are reporting near misses. Provides an opportunity to learn and make changes to prevent an incident from occurring.
* Monthly basis reporting to province on pressure wound surveillance – Since reporting, one of the chronic wounds that was not expected to heal, has healed. Good support being provided for wound healing.
* Hand Hygiene – 264 audits completed. 95.36 opportunities were met. Staff that missed the opportunity for hand hygiene were provided with verbal reminders and communication was sent out to all staff.
* Ipac Audit – 100% compliance out of 84 audits.
* PPE and infection control audits – 86% compliance
* Number of volunteers is stead at 146 active.

It was mentioned that it might be helpful to include industry standards on the scorecard, to see how we measure up against other long term care facilities.

Jennifer noted some indicators have an industry standard, and some do not. We compare ourselves against our previous year’s performance and against NWs performance.

* 1. **Building Renovation**
* Phased in plan was not accepted by DSLC, due to cost factors and the phased approach. They asked us to find another location suitable for the new facility construction.

We could do a new build on the same land that SV currently resides; however we would require a small piece of the Apartments land, and a small piece of a private property owner’s land.

* The CEO and Syd Dumaresq, Architect, met with the SV Apartments to see if they would be interested in selling us the small piece of land owned by the Apartments Board. They do not have any further development plans due to water restrictions.

A special meeting would need to be held for the apartment tenants, and the community, in order to sell land that belongs to the SV Apartments. A minimum of 30 days notice is required when holding a special meeting.

* Once the new build is complete, then there can be demolition of the old building. That land would then be available for parking, parks, etc.
* Syd spoke with the private property owner’s family and they do not think that this person would be willing to sell any of their land. Syd believes that we can still make it work, even if this person is unwilling to sell, as long as we have the piece of the Apartments land.
* The Apartment Board Chair had a few concerns:
  + ***There is a maintenance building that would need to be removed***: SV would be responsible to build a new maintenance building for the Apartments.
  + ***Concerns about the service entry***

*Syd will continue to work on addressing the Apartments concerns surrounding the service entry, and will continue to explore ways to move forward, if the private property owner decides not to sell.*

* The Apartment Board Chair is supportive of selling the land to SV, but a decision to call a special meeting to address the sale of the land will need to be made by the Apartment Board.

The CEO hopes to hear from the Board Chair in the next few days.

* A pre-luminary assessment of the land was submitted, and the DSLTC did not see any concern.

**Syd was recognized for his dedication to SV, as well as other community organizations. He goes above and beyond for all his clients and cares about the greater good of this community. Thank you Syd!**

* 1. **Shared Garden Project**
* The pathway around the pond has been extended and planters have been displayed.

This is a multi phased project and is a work in progress. We currently have this initiative on hold until we determine if the new facility will remain at this site.

* 1. **Long Service Award Ceremony**
* The Award ceremony has been postponed again this year. With staffing challenges, and for the safety of the workplace, it was decided not to move forward with it this year.
  1. **Risk Report: COVID-19, Staffing shortages**
* No resident covid cases and only a few staff cases.
* The Travel Nurse program was suppose to end at the end of August. It was extended due to staffing shortages.
* We have approached the western zone group about a joint CCA program with other facilities.
* LTCA are being hired and trained.
* There are postings for vacant positions and every effort is being made to fill vacant positions.

**The Board noted the amazing support and generosity received from our community.**

* In the process of developing an operational plan for the strategic priorities. The team already does this informally, but we are looking to formalize the process.
* The CEO will have Syd’s drawings included with the minutes.
* The CEO was thanked for all her work and dedication.

1. **Meeting Evaluation**

***Board comments:***

* Everything went well. Technology and information shared was good.
* Alison had some difficulties accessing the technology for the meeting. She will discuss this with Tammy.
* Great reporting
* Charlie has an article in the community news. A final review is being done and then it will be released.

The Chair thanked members for their feedback. As the new SV Board Chair, he informed the Board that if at any time a member would like to revisit an item on the agenda during a meeting, or would like to make a comment, please feel free to let him know.

1. **Next Regular Meeting:**
   1. **November 16, 2022, 4:00 (Accreditation Education Session)**

Barbara Hall will be attending to review Accreditation standards.

1. **In Camera**

Nil

1. **Adjournment**

Motion to adjourn at 5:25 pm. Andrew Snyder

***Recording Secretary,***

***Tammy Conrad***