

Shoreham Village
Board of Directors Meeting – Minutes
September 15, 2021

Present (via Teams): Alice Leverman, Patsy Brown, Liz Finney, Joseph Green, Andrew Snyder, Brian Webb, Janet Simm, and Reinhard Jerabek.

Guests (via Teams): Dr. Lesley Whynot, Aebin Paul, and Dr. Barry Clarke

Regrets: Nancy Timbrell-Muckle

1. Welcome and introductions

- The meeting was called to order at 2:35 pm. Brian Webb was welcomed to the meeting as a new member of the Board.
- The Chair noted that Dr. Barry Clarke may not be able to join the education session.

2. Board Education Session:

The role of the site Medical Director – Dr. Lesley Whynot, Dr. Barry Clarke, Aebin Paul, Nurse Practitioner

Dr. Lesley Whynot provided an overview of her role at Shoreham as the site Medical Director.

- Dr. Whynot and Aebin meet weekly to review resident charts.
- Dr. Whynot is available to Shoreham daily, expect between the hours of 10pm-8am. In addition to her weekly visits, she is also available by telephone.
- Evan Bezanson is the Clinical Pharmacist with Lawtons. He works with the team and is available to provide an expertise opinion.
- Bi-Annual med reviews occur for each resident.
- The team works very well together and there is good administrative response to any concerns/requests.
- Dr Whynot is interested in looking at the new building design- particularly she would like to provide input in to the OT/Physio and treatment areas.

The Board offered their support if there should be anything they could do to help.

3. Approval of Agenda

Motion to approve agenda. Patsy Brown and seconded by Brian Webb. Motion Carried.

4. Approval of Minutes – June 16, 2021 (Attachment)

Motion to approve minutes from the June 16, 2021 meeting. Patsy Brown and seconded by Joseph Green. Motion carried.

5. Finance Report

5.1 Financial Statements to July 31, 2021 (Attachment)

- Cash balance is 1.6 million. Most of the deferred contributions from upcoming renovations is remaining.
- \$60,000 is owed to DHW from the remittance of resident contributions.
- Project Manager/Architect consulting fees have been incurring related to the new facility project. Reinhard spoke with RBC about financing options. This will be temporary funding, as it will eventually be funded by the DHW.

- Revenue is over budget due to supplement funding provided by DHW for COVID-19 expenses. There is lump sum funding as well as additional funding where proof of expenses is provided to DHW.
- \$4,000 YTD increase in courier costs. This is a result of the blood collection service being closed at the Our Health Center (OHC) and blood collection having to be couriered to the South Shore Lab.
- Favorable variance in Facility services. No major repairs have been required.
- \$41,000 over budget. This is a good position for 4 months into the year.
- Contracted services – We are in a much better position. However, CCA staff are really struggling due to shortages.

6. Business Arising

6.1 Formal Partnership Evaluation – Project with Dalhousie University – Update

- This project was put on hold, as staff were deployed to other areas of work during the pandemic. Plan to resume this project in Late September/early October.
The CEO has a letter drafted and ready to be sent to the individuals identified as key informants.

6.2 Partnership Agreement Performance Indicators Update

- **Tools to collect the data**
- **Reporting recording the results**
- The only section of the performance indicators that was not approved was Risk Management. This section required further clarification - which has now been included.
- A Volunteer section was added to the Score Card.
- A tool or form will need to be developed to assist in the actual evaluation. Wording will also need to be revised in the current partnership agreement and policies will need to be reviewed. The Chair and Patsy Brown will start working on this, with input from the CEO.
- The frequency of the evaluation will need to be determined.

7. New Business

Nil

8. Chairs Report

8.1 Board Planning Session

- The Strategic Planning session with Mary Jane Hampton is being held on October 6th at 1:00 pm at the OHC.

8.2 Board Policies

Previously discussed

8.3 Future Board education sessions:

- **Accreditation**
- **Patient Safety**
- Accreditation is planned for February 2023. The CEO has heard that this date could be delayed.
- The Patient Safety Education session developed by Aware NS would be a good education session for the Board. The CEO will inquire about this session for an upcoming Board meeting.

9. CEO Report (Attachment)

9.1 Accreditation Update

- Standards Document – Governance Standards

- Continuing Care Month – Finalizing the plan of events. Hopefully, there will be opportunities for the Board to be part of the celebration.
- Funds for the generator project has been returned to DHW. The generator issues will be addressed with the facility renovations, so it was decided that it was only fair to return the funding. The elevator usage during an outage was the main concern and with the facility renovations, the laundry area will be moved to the main level.
- The materials for the waste pipe repairs have not been received yet. The project will probably be delayed until Monday.
- Three Long Term Care Aides that currently work at Shoreham are in the mentorship phase for becoming a CCA. CCA staffing remains a concern.
- RN/LPN staffing is stable

9.2 Renovation Project Update

- There has not been a meeting with government, as Step 3 of planning involved a significant amount of work. Plan to meet with government at the end of the month.
The Water supply assessment is being finalized and will be included in the plan. It will increase cost, but will address the water issue. There is no estimate yet on how much the final renovation will cost.
- The municipality has been engaged - for example, there is discussion with the architect regarding allowable building height.
- staff will be updated throughout the process.

9.3 Q1 Scorecard (Attachment)

- Occupancy rate increased to 96.5%. Target occupancy rate is 99.2%. This is a result of beds that are on hold for the covid unit.
- Actively filling respite bed.
- Responsive behaviors/med errors – Significant improvement compared to same quarter of last year. Loosening of restrictions has resulted in a significant improvement in resident incidents.
- We received an \$8,500 grant for Gentle Pursuance Training (GPA). Very thankful to have received this grant.
- There will be an increase in OT/PT hours. An OT was hired and starts on September 20th. The PT position has not been filled yet, so those hours have been given to the OT until the position is filled.
- Medication errors has improved due to EMAR implementation. Went from 31% to under 19% in missed doses.
- No elopement this quarter
- Meeting hand hygiene target – 94.7%. Our target is at 80%. Since we have been consistently exceeding our target, we might look at increasing the target to 90%. Hand hygiene when performing procedures on the same resident continues to be an area of concern.
- 143 active volunteers. There was 1 resignation and 10 volunteers in database decided to postpone coming back for now, but hope to join in the fall.

10. Questions/Comments

Nil

11. Next Regular Meeting: November 17, 2021

12. In Camera

Nil

13. Adjournment

Motion to adjourn at 4:32 pm. Brian Webb

*Recording Secretary,
Tammy Conrad
Business Office Assistant*