**Shoreham Village**

**Board of Directors Meeting – Minutes**

**March 22, 2023**

**Present (via Teams)** Joseph Green, Andrew Snyder, Brian Webb, Alison Kelland, Janet Simm, Reinhard Jerabek, and Jennifer Tucker

**Regrets** Liz Finney

**Guests** Shirley Dauphinee *(Shoreham Village Resident)* and Niki Rodenhizer, *Manager of Recreation and Volunteer Services*

1. **Welcome and Introductions**

* The meeting was called to order at 4:02 pm

1. **Approval of Agenda**

Addition under “Finance” – 9.3 added: Timeline for the Auditors

***Motion to approve agenda, with the above noted addition. Brian Webb and seconded by Andrew Snyder. Motion Carried.***

1. **Approval of Minutes – January 18, 2023**

The Board needed more time to review the meeting minutes, before making a motion for approval.

Chair will call for a motion tomorrow via email.

1. **Board Education: Resident Council Presentation**

***Niki Rodenhizer and Shirley Dauphinee provided an overview of the work of Resident Council.***

* Resident council meets every second Wednesday. A minimum of 10 meetings need to be held per year.
* Typically 8-12 residents attend each meeting. Meetings are open to any resident that wishes to attend. Resident families are welcome to attend; however, not many do.
* A recreation programmer facilitates the meeting, and one Department Manager attends-alternating or dependent upon the specific questions residents have.
* Meeting minutes are approved at each meeting
* Each department is reviewed and resident feedback is requested.
* A correspondence form is filled out for any concerns. The concern is outlined and given to the appropriate manager to address. The manager’s reply gets brought back to resident council.
* The 10 ***Resident Rights*** are discussed at each meeting, to determine if their rights are being met.
* The Board wishes to keep communication open with resident council. Any concerns or assistance that the Board can provide to resident council, please reach out.

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

* The CEO received a response from Dalhousie University, and we are pleased that they are signalling that the evaluation project will move forward.
  1. **Shoreham Village Foundation**
     1. **Follow up with Janet Creaser**
* The Chair reached out to Janet Creaser, and there has been no change. The Foundation members are burnt out and don’t have the energy needed to move forward.
  + 1. **Golf Tournament**
* There are big projects happening now, and will continue to happen in the future. The Chair discussed this with Janet Creaser.

Janet noted that an email was sent out to past sponsors, participants, and those involved with past tournaments, informing them that the tournament will not be moving forward.

In the email, they were encouraged to continue supporting Shoreham, in any way possible.

A placeholder has been requested at the Golf Club for the 23/24 season. The Board will determine if they have the capacity to re initiate the tournament.

* 1. **Supporting Newcomers: Starfish**
* There has been communication with Starfish and work is underway.
* There is a need for donations to help the refugees. If anyone has any items they would like to donate, please reach out to Niki Rodenhizer. Furnishing is also needed for the house that we secured for staff.
* It was mentioned that there are some places in Halifax that are reducing their office spaces. May be an opportunity to get some furnishing.
  1. **Board Member Recruitment – skills inventory**
* The Board was asked to fill out a skills inventory document. A rating scale was requested to be added to the inventory document. Each member will rate themselves in areas of strengths and weaknesses.
* Once all members have rated themselves, the results will be collated with responses from each member, to provide a visual to determine skill gaps within the Board.
  1. **Board Planning Cycle Update – Accreditation Date**
* Accreditation Canada will be onsite on October 3rd, 4th, and 5th. On October 3rd and 4th they will be meeting with the Board, so please hold those dates.
* The Chair will be attending in person. It is unknown at this time if the Board will be attending virtually or in person. It will be 1 ½ to 2 hours maximum. Additional documents will need to be submitted prior to the onsite visit.
* We will have a better idea on timing as we get closer to the visit.
* A mock accreditation survey will be held with Barbara in September. It will be held as a separate meeting from the regular board meeting. Janet was requested to reach out to Barbara for her availability.
  1. **Board Education Needs – Provincial Government initiative (attachment)**
* It was felt that some education on the Emar and Point Click care system would be beneficial. The CEO will add this to the Board planning cycle.
* A twice per year check in with resident council has been added. September 15th is the next date.

1. **New Business**
   1. **Volunteer Appreciation Week – April 16-22nd (Event on April 18th)**

* Event being held on April 18th.
* The Chair is unable to attend, but did send a message to Niki from the Board to present at the event.
* Any member that plans to attend, please let the Chair know.

1. **Chairs Report**
   1. **Fundraising**

* The Chair met with Janet Creaser and Sue Newhook (previously the coordinator of the SV Golf Tournaments).
  1. **Nominations**
* The Chair and Andrew have met regarding nominations. Will be discussed in camera.
* The Chair and CEO do a twice monthly check in.

It was mentioned that it may be time to consider having a sub committee of the Board that is dedicated to fundraising for Shoreham. There may be people that would be interested in fundraising, but not want to be on the Board. The committee would need to consist of a board member.

A model that would work for the Board would need to be established. Fundraising would be a beneficial skill to look for in a future board member.

All current Board members work, so we want to be mindful to not put too much pressure on members.

1. **Monitoring Performance**
   1. **Q3 Scorecard Presentation (Jennifer to join at 4:30)**

* Occupancy rate has increased for each month in this quarter. Average of 98.2 % occupancy. Target is 99.2 in our budget.
* Respite bed utilization is 51%. Usage has increased since Covid.
* Resident incidents are recorded in our Point Click Care System and provides real time data. Big decrease in the “other” category. This could be due to under reporting as a result of changing from paper incident reports to digital. Agency staff may not be familiar on how to fill out an incident report. Onboarding and orientation process has been chanced for agency staff to ensure they are being educated on how to report. Weekly sessions are being held with agency staff to ensure they are getting all the necessary information. The other category will be monitored to see if this education has an effect on the reporting.
* Responsive behaviours is similar to previous quarters. Angie Wentzell is the Behaviour Consultation for our area and attends the Behaviour support meetings.
* Additional Gentle Persuasive Approach (GPA) funding has been received. Courses booked for April and May.
* Medication errors was the result of a particular employee who was not familiar with how to correctly use the Emar system. Education was provided to this employee, and errors have decreased.
* The Institute for Safe Medication Practices (ISMP) will be doing assessments on our medication practices starting in April. Northwood and Shoreham Village are the only organizations in NS participating in this initiative. We are excited for this opportunity.
* IPAC team meets regularly to review and do surveillance.
* Kim Croft is taking a course on infection control and surveillance. We will benefit from the knowledge she obtains from the course.
* Monthly case reviews on wounds is being done. Jennifer presented an audit form that is also being used. It is a way to see if anything is being missed or if more could be done. The resident’s care plan, along with the resident’s wishes are included. Turning schedule is monitored and the skin and wound module gets accessed on PCC by registered staff. Any staff that miss documents will be provided with education and a re-audit gets done.
* Hand hygiene – 97% opportunities were met
* 110 volunteers. 5 new volunteers recruited.
* The volunteer handbook is being updated. Should soon be released.
* Volgistics is a program that is being explored. It helps track and manage volunteer activity.
* Charge staff are providing reminders to staff that reporting needs to be completed. Everyone is working to improve reporting.
  1. **WSWQS Staff Survey Benchmarks**
* The staff survey bench marks was shared with staff at the last staff meeting.
* Bench marks shows that some improvements are needed. Staffing is the biggest issue, as we are relying on agency staff to fill gaps in staffing.
* Covid and staffing shortages has decreased staff morale. This needs to improve in order to see positive changes in other areas.
* Action plan was developed to target the key issues.
* There is a staff recognition committee, but it is hard to get staff engagement due to staffing challenges.
* Late spring/early fall another survey will be distributed for staff to complete. Follow up on these results will be presented at the May or September meeting.
* We could not move forward with the retention bonus, while one bargaining unit is in negotiations. One outstanding item with negotiations is monetary gains. The bonus may help.
  1. **Quality Improvement Plan**
* As part of the accreditation and prep, Barbara wanted to ensure that the board has seen the quality improvement plan, and to provide any feedback that they may have.

1. **Finance Report**
   1. **Financial Statements to Jan 31, 2023 (Attachment) Reinhard to join at 4:45**

* 1.2 million Cash position.
* Paid off RBC mortgage. Liability section of $188,000 for long term debt will be removed. A mortgage for the new building renovations will remain, but old debts will be removed.
* A deficit was incurred due to DHW revenue being decreased as the travel nurses are no longer funded.
* Corporate spending for IT equipment and funding for Administrative Assistant position.
* Facility services includes year end painting and maintenance.
* Funding available as a result of CCA shortages will be used to fund to extra OT staffing
* Effective Nov. 1st, the budget will be split into protected and unprotected envelopes. The financial statements are being retooled so it can be easily determined which funds are usable, and which funds must be returned to the DHW.

Target is May to have statements in a format that will include the protected and unprotected envelopes.

* Where the new envelopes came out within this fiscal year, it makes auditing more difficult with the year being split.
  1. **Potential investments: Pavement repairs, Next Phase of the Garden Project**
* There is a $17,000 investment required to fix pot holes and emergency exits ($10,000 for pot hole repairs and $7,000 for the emergency exits). We have approval to move forward with the repairs, which will be covered with the surplus.
* Areas of safety in the pavement will be fixed. We do not want to repair areas that will be torn up with the new building construction. The building team was consulted and the areas that need repairs are considered safe, and will not be disturbed during the construction phase.
* The CEO noted that last year the Board gave $25,000 out of the surplus to use towards the garden project. She wanted to know if the Board would consider another $25,000 investment towards the project. Quotes are being gathered for the work and could be included in this fiscal year.

***Motion made by Andrew Snyder to provide up to $25,000 for towards the garden project to be used within this fiscal year. Seconded by Alison Kelland. Motion Carried.***

The apartments will be consulted before there is any further development with the Garden Project.

* 1. **Timeline for the Auditors**
* The Financial Meeting is currently scheduled for June 7th and the AGM is scheduled for June 21st. Reinhard mentioned that the audit will not take place until the second week of May. The auditors may not have the audit results ready to present on June 7th.

Reinhard is presenting that the statements be provided to the Board for review by June 15th, and then the Financial meeting be held on the 16th or 17th.

* Audit completion will be on June 9th as per Baker Tilly.
* The Board decided that June 16th at 4 pm will be the date of the Financial Meeting. Reinhard will inform Baker Tilly of this change.

1. **Quality Improvement**
   1. **CEO Report/Risk Report (Attachment)**

A new physician is coming to the community on Thursday. They will be touring Shoreham and the OHC.

* 1. **New Building Project**
     1. **Building design submission**
* Consultation session on the new building design was held for staff last week. Feedback was very positive.
* Submission and drawing has been submitted to the DHW
  + 1. **Land Swap MOU – Apartment Association Mortgage**

Land swap is currently between lenders and legal counsel.

* + 1. **Survey**

Survey is complete

* 1. **Staff Housing Opportunity being explored**
     1. **Water Course Study for feasibility**
* A water course study was prepared to find out if the land can support staff housing. A design that accommodates the available land is underway.
  + 1. **Discussion with John Risely**
* Waiting for the water course study to be completed. Once we know from Syd to see if any area of the land can be used a conversation will be held with Mr. Risley.
* John is aware that we are exploring ways to use this land, but is not aware that we intend to use it for staff housing.
  + 1. **Discussion with the Apartment Association**
* Once we determine if the land can support staff housing, then Reinhard would find out what financing options would be available. Our intentions for the use of the land would be discussed with the apartments.
  + 1. **Financing**

Previously discussed

* 1. **Ground water investigation**

Step 3 of our new facility Submission was sent to the DSLTC. The cost of drilling an additional well was included.

* 1. **Recruitment and retention**

Previously discussed

1. **Accreditation (Survey visit October 3,4,5 2023)**
   1. **Governance Tool/Self-Assessment Action Plan follow up** 
      1. **Document Update**

* The CEO will continue updating the document that will be used to assist with the Accreditation process.
  + 1. **Peer Review**
* A model of peer review that works for the Board can be developed, or the Board can decide not to have a peer review and provide reasoning for this decision.
* It was felt that it was more beneficial to evaluate the Board’s performance as a whole, rather than reviewing the performance of individual members.
* There are Board By-Laws that are followed in a situation where a member is not fulfilling the duties of their role on the Board.
* A self assessment could be considered.
* The Chair will reach out to Barbara to discuss our options.
  + 1. **Confidentiality Policy review/Update signatures**
* It was decided that it would be best to have the Confidentiality policy review and signatures done around the time of the Annual General Meeting.

Forms would be circulated to the Board prior to the AGM. Members would sign and return electronically.

The CEO will add this to the Board planning cycle.

* + 1. **Board Skills Inventory**
* It was suggested that the Board Skills inventory have a scale of 1-5 for members to rate their areas of strengths and weaknesses. CEO will include the scale.
  1. **Proposed Mock Survey – late September meeting?**

Looking at an early September date for the mock survey. CEO will ask Barbara for two or three dates that would work for her to do the mock survey.

* 1. **Board Reference Document**

Board reference document will continue to be updated.

1. **Meeting Evaluation**

* The agenda was changed to include the more resident focused items toward the beginning of the agenda.
* Reinhard and Jennifer to attend the meetings to do their reporting, so they will have to be towards the beginning of the agenda.
* Lots to cover on the agenda
* Good time management and good agenda content
* Nice to see the change in the agenda, with more resident focused items towards the start of the meeting.

1. **Next Regular Meeting: May 17, 2023 at 4:00 pm**
2. **In Camera**

In Camera discussion: Nominations

1. **Adjournment**

Adjourned at 6:05 pm.

***Recording Secretary,***

***Tammy Conrad***