**Shoreham Village**

**Board of Directors Annual General Meeting Minutes**

**June 21, 2023**

**Present** Elizabeth Finney, Charlie Teal, and Janet Simm

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

**Guests (via Teams)** Daniel Deveau, Nurse Practitioner; and Resident Family Members: David Lemieux, Charlene Morton, and Sherri Silver

1. **Call to Order and Welcome**
* The meeting was called to order at 4:05 pm
* The Chair welcomed all Board members and guests to the meeting.
1. **Approval of Agenda**

***Motion to approve agenda as circulated. Moved by Alison Kelland and seconded by Andrew Snyder. Motion Carried.***

1. **Approval of Minutes of Annual General Meeting – June 15, 2022**

***Motion to approve the June 15, 2022 Annual General Meeting minutes. Moved by Andrew Snyder, and seconded by Alison Kelland. Motion Carried.***

1. **Presentation: Institute of Safe Medication Practices Initiative (ISMP), presented by Daniel Deveau, Nurse Practitioner**

***The Chair welcomed Daniel Deveau and thanked him for joining the meeting to provide education on this initiative.***

* Daniel and Danielle Dyke have been leading this initiative
* The Institute of Safe Medication Practices (ISMP) is a not-for-profit organization that has the main goal of helping organizations advance safe medication practices.
* Participating in this initiative will provide us with a base line measurement to see how we are doing compared to other participating homes.
* A Medication Safety Self-Assessment was completed. The assessment was extensive and provided the opportunity to evaluate our medication practices. A team of 6 licensed staff completed the assessment.

The assessment tool was used to assess how all medications are being administered, including non-prescription medications.

* Shoreham Village is the first home in long term care in Nova Scotia to complete the assessment.
* The assessment identified areas for improvement in safe medication practices.
* Once the report is received, the same group of 6 licensed staff that filled out the assessment will review the report together. Then the assessment will be completed again to see if there are any improvements.
* Information gathered from the assessment will be shared with the pharmacy and therapeutics committee, and actions will be put forth to make improvements.
* EMAR is a medication system that has been implemented, but no bench mark data can be gathered from this system. This initiative will help us establish bench mark data, not only within our organization, but also against other participating organizations.
* An update will be provided to the Board, once the report is received.

The Chair thanked Daniel for the very informative presentation.

1. **Presentation of Annual Community Report, presented by Jennifer Tucker and Janet Simm**
* The Annual Community Report is an overview of the 2022-2023 year
* The report link will be made available following the meeting.
* People, places, and performance are the strategic priorities for Shoreham.
* Janet provided the following report highlights:
* Welcomed our first refugee to our team
* Staff vehicle has been purchased to help staff with transportation.
* First full time occupational therapist has joined the team
* Priorities shifted as a result of covid. As a result, Kim Croft has accepted a one year term in the role of Occupational Health & Infection Control Specialist, and Sam Winters was hired to fill her position as Resident Care Manager for the term.
* A nice article was written by Charlie Teal giving acknowledgement to the recreation team for all the activities they provide for the residents.
* The concept design that was submitted to government as part of Step 3 has been approved. This is very exciting, as step 3 is a very difficult and time consuming step in the process.
* The Board had set a goal of achieving accreditation, and this process has been started. Shoreham will be evaluated against national standards.

***Jennifer Tucker provided highlights of our results from the 2022/23 scorecard:***

* Annual occupancy rate is 96.9%. This is a big improvement
* 98.7% average for vacant beds per day.
* Resident incidents decreased form last year. Sustained improvement compared to 2018-2019
* Due to staffing challenges, agency and travel staff have been filling vacant positions. This has caused periods of under reporting of incidents, as these staff were not always familiar with our reporting practices. Training has been provided to these staff, and as a result reporting has increased.
* An infection tracking tool was created in Point Click Care. This infection control module will be implemented, and will provide “real time” tracking and monitoring.
* 98% compliance of hand hygiene audits
* 113 volunteers
* The beginning stages of implementation of Volgistics has begun. This system will be a great way to support volunteers in the future and identify trends.
* The Chair noted that there is volunteer navigator for Lunenburg and queens county. They are able to help us with volunteerism, and provide helpful tips for managing our volunteers. This resource will be shared with Niki Rodenhizer.

The CEO was pleased to report that significant progress in staffing has been made in the last few weeks.

1. **2022-2023 Auditors’ Report**
* Baker Tilly presented at the Financial Meeting and the Audited Financial Statements were approved.
* Baker Tilly provided us with a risk level of “moderate”. This a standard rating for an organization such as Shoreham.

***Motion to accept the 2022-23 Auditors’ Report. Moved by Brian Webb, and seconded by Charlie Teal. Motion Carried.***

1. **Appointment of the Auditors**
* In past years, we had 3 year contracts for the auditors. A decision was previously made to do a year by year contract, as long as Baker Tilly’s fee is reasonable to market conditions.
* Reinhard is comfortable recommending Baker Tilly for another year term.
* RFP process has been added to the September agenda.
* Year has ended in a surplus position.
* November 1st budget last year included protected and unprotected envelopes from government. This will be the first full fiscal year using the budget with the government envelopes. In the past we had flexibility on how we spent government funding, with the government envelopes we no longer have this available to us. If money within a protected envelope is not spent, then we are required to return the funding. This creates potential for deficit to incur.

***Motion to appoint Baker Tilly as the Auditors for the upcoming year. Moved by Andrew, and seconded by Liz Finney. Motion Carried***

1. **Nominating Committee Report**
* Colleen Richardson was welcomed to the Board. Colleen has a strong medical background and has been a Registered Nurse for many years.
* Charlie Teal was re-welcomed to the Board. Charlie has entrepreneur experience, and a background in insurance.

***Andrew Snyder made a motion for Colleen Richardson and Charlie Teal to be accepted as new members of the Board. Seconded by Brian Webb. Motion Carried***

The Chair thanked Colleen and Charlie for joining the Board.

1. **Questions/Comments**

The following questions and comments were shared:

* ***Physical Aggression in Residents. All behaviour has meaning, and how do we know what the meaning behind the behaviour is?*** – The Response Behaviour Team works to identify the root cause of resident aggression, whether it is physical or verbal. The Behaviour consultant and PIECES internal team are part of this process. Staff are trained on the Gentle Persuasion Approach (GPA) to help care for residents during those difficult times of aggression, and AWARE NS has provided support for training staff. Interventions are developed, and pharmaceutical interventions are used only when necessary. Security is available if needed.
* It was nice to see the Annual Community Report and ISMP presentation
* Step 3 approval is very exciting. There is a multi-step process involved in the facility replacement, but Step 3 is the toughest step to get through.

Focused groups will provide families with an opportunity to provide feedback and input

The CEO shared the government document outlining the steps associated with a new build. She can share this document with anyone who wishes to have their own copy.

* It is valuable having a family member and resident on the Board.

The guests were thanked for joining the Annual General Meeting, and encouraged to reach out if they have any feedback for the Board.

1. **Adjournment**

Motion to adjourn at 5:25 pm. Andrew Snyder

 ***Recording Secretary,***

 ***Tammy Conrad***