**Shoreham Village**

**Board of Directors Meeting – Minutes**

**November 15, 2023**

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

**Present (in person)** Charlie Teal, and Tammy Conrad

**Guests:** Niki Rodenhizer, Manager of Recreation and Volunteer Services, and Michael Burgoyne, resident

**Regrets:** Elizabeth Finney, Colleen Richardson, Jennifer Tucker

1. **Welcome and Introductions**
* The Chair welcomed *Niki Rodenhizer, Manager of Recreation and Volunteer Services,* and *Michael Burgoyne, SV Resident* to the meeting, and noted that they would be giving a presentation on the Resident Council Committee.
1. **Approval of Agenda**

***Motion to approve agenda as circulated. Brian Webb moved and seconded by Andrew Snyder. Motion Carried.***

1. **Approval of Minutes – September 20, 2023 (attached)**

***Motion to approve the September 20, 2023, minutes as circulated. Andrew Snyder moved and seconded by Charlie Teal. Motion Carried.***

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

Niki Rodenhizer and Michael Burgoyne gave a presentation on the Resident Council Committee.

***Michael shared his thoughts on the Resident Council Committee:***

* He is impressed with the committee and feels that his opinions and concerns are heard.
* Open dialogue and comfortable environment
* Staff listens to resident concerns and do what they can to resolve issues or to make improvements.
* Residents are given options. ***For example, there is an activity that residents really enjoy (Bocce Ball). Residents brought forth at the last meeting how much they enjoy this activity. A change was made to the recreation calendar, so instead of having the activity on the calendar once per month, it has been added weekly.***
* A resident had put forth the idea of having a mobile hearing clinic at SV for the residents. Staff made arrangements to have a hearing clinic onsite, which was a success.
* “Shoreham feels more like a home, than a long-term care facility.”

The Chair thanked Michael and Niki for the presentation.

* 1. **Provincial Board Governance Training Initiative Update**
* **dates**
* **areas of focus**
* January 15th, 2024 is the rescheduled date for the KPMG meeting, which will be held virtually. The areas of discussion will be “*safety and quality oversight and risk management.”*

The Chair will send the meeting link to the Board.

* 1. **Board Planning Cycle**

***The CEO outlined some of the upcoming items in the Board Planning Cycle:***

* ***Responsive Behaviors*** – Scheduled for the January 17th, 2024 Board Meeting
* ***Electronic Record Management*** – Scheduled for the March 20th, 2024 Board Meeting
* ***Management Contract Performance Review*** – Scheduled for March 2024. It would be beneficial for the Board to familiarize themselves with the **Management Contract Performance Review Tool.**

Tammy will email the tool to the Board.

The Board may reach out to the CEO if there are any revisions that need to be made to the Board Planning Cycle.

1. **Business Arising**
	1. **Formal Partnership Evaluation with Dalhousie University**
* No timelines or further request for information has been received from Dalhousie University.
* The CEO shared the Accreditation Report with them.

The Board was curious if the Accreditation Report was shared with staff/residents/and families.

The CEO confirmed that the results was shared with staff, and that it is on the agenda for the November 28th Family Council meeting.

The Accreditation logo is on our website, and banners have been ordered. The formal announcement will be highlighted in the newsletter being distributed next month.

It was suggested that we plan an accreditation celebration sometime in the future.

* 1. **Fundraising**
* As a result of the Foundation’s decision to discontinue, the Board has been investigating ways for them to continue fundraising for SV.
	1. **Golf Tournament Update**
* The Chair spoke with Sue Newhook about planning for a future SV golf tournament. Sue is open to organizing a future tournament with the Board, but she would need a strong committee working with her.
* The Chair reached out to Alice Leverman and Patsy Brown, and they have some names of people that are eager to contribute.

He also reached out to Janet Creaser, Foundation Chair and the General Manager of the Chester Golf Club.

* Members of the Board were invited to contribute if they should wish.
* The Chair and CEO have requested a list of vendors from the SV team.
1. **New Business**

Nil

1. **Chairs Report**
	1. **Next Family Council Meeting – attendance**

Family Council Meeting is scheduled for November 28th, 2023, at 5 pm. The meeting will be held virtually.

Any Board members that wish to attend can reach out to the Chair.

* 1. **Provincial Board Orientation Initiative: Board survey follow up**

***There were a number of items that stood out to the Chair while completing the Provincial Board Evaluation.***

* + 1. **Whistle Blower Policy**

Standing agenda item

* + 1. **Board Quality Committee**

 Standing agenda item

* + 1. **Succession Planning**
* **CEO**
* **Board**
* Decisions on who is invited to join the Board needs to be done mindfully. Areas of expertise that would benefit the Board need to be considered.
	+ 1. **Diversity/Inclusion**
* The SV team is starting a committee that will address diversity and inclusion.

The Board is willing to assist this committee in any way possible.

1. **Monitoring Performance**
	1. **Accreditation**
		1. **Survey Debrief/Result**
* Shoreham received an Exemplary Standing. This is an amazing accomplishment, and not something that is often achieved on a first accreditation attempt.
* SV was measured against 288 standards, and only 5 standards were unmet. An action plan has been developed to address the 5 unmet areas.
* The Board was proud of this remarkable achievement.
	1. **Board Evaluation Results Action Plan**
* **Board of Directors Position Descriptions – Board Chair**
* **CEO Professional Development**
* **New Board member orientation**
* **Board meetings-discussion regarding changes made to Sept**
* **Actively engaging the community**
* **Building Design/Plan Community Consultation (potentially involve the Architect and Foundation to discuss use of the Palliative Care funds).**
* **Board meeting – address timing issues?**
* We continue to work on improving the orientation process for new Board members.

The Chair has worked with Allison and will be working with Colleen and Charlie to get feedback on how to improve the orientation process.

* A public consultation on the new facility design will be planned. It was originally felt that the consultation should highlight our accreditation success, but then determined that it would be best to keep the discussion solely related to the building design. We want to encourage honest feedback and open communication.
* Boundaries should be set and outlined as to what type of feedback and engagement can be provided during the consultation. The public need to know which areas they can have input on, and which areas are out of our control.

This is a good opportunity to inform the community that Palliative Care funds will be used towards the family room in the new building design.

* We are getting close to having many of the approvals.

The land swap agreement and facility design has not been approved. Water issues is delaying the approval.

* The Board was asked to think of those individuals that should receive a formal invite, as well to consider venue locations.
	1. **Management Contract – Performance Review Planning**
* **Review of Management Contract Evaluation Tool**
* **Plan for outstanding data and information to complete the tool/evaluation.**

Tammy will email the Management Contract Evaluation Tool to the Board.

1. **Finance Report**
	1. **Financial Statements to September 2023 (Attachment)**
* Cash has decreased from 1.2 million to $500,000 this year.
* $800,000 will be received from Housing NS. This is reimbursement for project management costs, architect fees, water assessment fees, etc. involved with the new build planning.
* Liability of long-term debt has decreased from $500,000 to $78,000. This was a result of paying off the RBC mortgage on the land needed for the land swap with the apartments.
* Slight deficit of $1,600 for Commercial Services. This is revenue we receive from the OHC for services provided to them, and some bus repair expenses incurred. No revenue is generated by the bus to offset repairs.
* $146,000 YTD deficit. In September there was a large unfavorable variance due to a CUPE settlement payout to resident care staff.
* There was a reduction of $200,000 from DSLTC. This was offset by the travelling nurse funds provided from DSLTC.
* We continue to work through the issues related to the new funding approach: protected and unprotected envelopes. Despite having a deficit, because of this new approach we may have to return $100,000 for underspend areas of the protected envelopes. Previously this would have been a surplus, but the new approach would see us returning this to DSLTC. We continue to review to ensure we have all eligible expenses included in the protected envelope.
* $30,000 for Contracted Services was for staffing agency.
	1. **The Department of Seniors and Long-Term required reporting on Protected and Unprotected envelopes**
* Reinhard ensured the Board that they have a process in place to clearly define areas that are funded by protected and unprotected envelopes. The protected envelope covers costs related to direct resident care, staffing levels, and food costs. Any unspent funding in the protected envelope has to be returned to the DSLTC. The protected envelopes are severely underfunded, so chances of underspending in those areas is rare.
* Unprotected envelope covers accommodation costs, environmental services, etc. Any expenses that are not directly related to resident direct care.
* The envelopes make it almost impossible to have a surplus. An organization can only attempt to minimize the deficit incurred. This is not a supportable structure for a long-term care organization.

This is the first full year with the envelopes. We will need to see how things look after everything levels out with the new structure.

* Northwood is working with sector associations and the Deputy Minister. Hopefully there will be future conversations with the DSLTC once they discover the negative impact on long-term care.
* The Chair has asked the CEO and Reinhard to consider what our next steps will be.

The Board is willing to assist in any way necessary.

* 1. **Audit Services RFP vs contract renewal with Baker Tilley**
* Baker Tilley fees include an increase of 8% due to inflation. Current fees are $18,400. In 2024 it will increase to $19,800, and $21,800 in 2025.
* Quote is inline with current market fees.
* Reinhard recommends that we continue with Baker Tilley for auditing services.

***Motion to continue with Baker Tilley for auditing services for 2024. Moved by Andrew Snyder and seconded by Brian Webb. Motion carried.***

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

**-Front line staff recruitment**

**-Nurse Manager Resignation**

**-New Build Update**

* The job fair held last Friday was a success. Staff was recruited and 4 positions have been filled.

All of the recruited staff required housing.

* We have secured another apartment for staff housing.
* Danyka Devost-Haley has resigned to pursue other career opportunities. We wish her all the best.
	1. **Risk Report**

**-**Water Production

**-**Respite Client

* Well 5 and 6 have been cleaned. Water is an ongoing issue, with truck loads of water being hauled in daily.
* Water utilization had increased. Maintenance and the Apartments did a full check to find out if something was causing the increase.

The utilization rate has returned to normal, but water production does not meet our needs.

* A new well was drilled (Well 7). This well was added for the new facility.

If cleaning the wells does not improve the situation, then we are going to request permission from the DSLTC to connect Well 7 immediately. This would be submitted with priority items and should be eligible under the emergency funding request.

* The CEO spoke with the family of the respite that had a fall during their stay.

Results of the investigation was shared with the family, and we are being transparent while working through this with the resident and family.

1. **Meeting Evaluation**
* Good discussion
* Nice to have a resident attend the meeting for resident council presentation.
* Reinhard provides good insight, and his feedback is helpful.

Charlie informed the Board that he has published a book of poems called “Home Spun Poems”.

Funds raised are for SV.

The Chair thanked Charlie for being a strong ambassador of SV.

1. **Next Meeting**
	1. **January 15, 2024 – KPMG Training – 5:00 pm (Virtually)**
	2. **January 17, 2024 – Regular Board Meeting – 4:00 pm**
2. **In Camera**

Nil

1. **Adjournment**

Motion to adjourn at 5:40 pm. Brian Webb

 ***Recording Secretary,***

 ***Tammy Conrad***