**Shoreham Village Senior Citizen Association**

**Update on Strategic Priorities**

**CEO Report to the Board of Directors**

 **March 20, 2024**

I hereby confirm that all statutory withholdings and remittances relating to the organization’s employees or otherwise have been made.

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| **1. Strategic Direction: People**Everything we do is for the care and comfort of our residents, the confidence of their family members who trust us and the wellbeing of our staff and volunteers.  |

***Priority 1: Quality of care for our residents and strengthening the long-term care services we provide so that they are sustained to the highest possible standard.***

*Resident and Family Surveys-* In April we will be launching targeted surveys- designed to elicit feedback on items that we identified during our general surveys -gathering more detail re Rec and living with dignity.

Resident Council - A Resident Council meeting was held on Feb 21, 2024. Residents discussed ongoing improvements to menu options and expressed concern about night checks and sleep being disturbed. The nursing team is exploring ways that they can balance the safety requirement for a night check while minimizing resident disruption.

Wing Naming- We are in the process of engaging residents to rename our wings. This was a recommendation from our accreditation survey with the goal of creating a more warm, homey and welcoming environment.

Family Council- The next meeting is tentatively scheduled for Tuesday March 26, 2024. Items scheduled for the agenda include:

* Resident and Fam survey results and Action Plan
* Abuse prevention Policy, reporting and education
* Feedback on methods for sharing new build updates

Funding for special positions- We have been advised by Seniors and Long-Term care that funding for the special positions established during COVID - 19 (LTCAs and Infection Control Designates) has been extended for the upcoming fiscal year.

Retention Initiatives- On March 20, 2023, Government announced the Recognition and Retention Incentives for Health and Related Workers program. With the 2023 incentives concluded, information regarding the 2024 Nurse Retention Incentive is now available. We will be processing those incentives for eligible employees in the coming weeks.

***Priority 2: The best people are attracted to organizations that have a reputation for being a great place to work. Shoreham Village needs to be a recruitment magnet, which means that all staff experience a deep sense of belonging to an organization that values them.***

Payroll/ Staff scheduling system- We are in the process of planning for a new system implementation for summer/ fall 2024. Shoreham will be transitioning to the same system used by Northwood, fully integrating the staff scheduling and payroll systems. This new system will also offer tools and support for staff onboarding, and performance appraisal/electronic staff files. This has been a goal for several years. While transitioning to this new system will be challenging, the long-term benefits for the Northwood team supporting the Shoreham team will be significant and there are many features that will lessen the workload for the Shoreham management team.

International Recruitment- We have 2 individuals who are refugees who will be joining the staff team this spring.

Recruitment- By the end of March, we anticipate having all of our CCA vacancies filled. We continue to focus on LPN recruitment. Once we release the Travel Nurse staff in March, we will be eligible for funding to increase our Nursing/CCA staff ratio to 4.1 hours of care which will bring additional staff resources!!!

***Priority 3: Shoreham Village is fortunate to have dedicated employees, and we want to keep them. Providing a safe and supportive workplace, creating a team environment, creating pathways for progressive career development and demonstrating that we value the dedication of our employees is vital to our retention strategy. We want to be an employer of choice in the community, and in the Continuing Care Sector.***

Staff Recognition Committee- The committee is launching a survey for staff to provide feedback on our current celebrations of our staff contributions and new ideas for the future!

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| **2. Strategic Direction: Places**Our tag line is A Campus for Living. Our campus is shared by our partners who deliver affordable housing services to our community and the Health Centre (OHC). The Campus is a home for the residents who live in our long-term care facility and the tenants who live in the apartments, a workplace for our employees and volunteers and a resource hub for the community. To fulfill this mandate, we will work collaboratively with our partners to design and maintain our buildings, grounds and services to achieve the highest standards and maximum value for those who live, work and meet here.  |

***Priority 1: Over the next five years, a major focus will be on the capital redevelopment of the current structure working with government as it fulfills its commitment to make the necessary investment to bring our facilities up to modern standards of safety and comfort.***

Building Renewal Project: Step 6 submittal components were submitted to the Department of Seniors and Long-Term Care on January 11 and has subsequently been approved! The project budget has been submitted to the Treasury Board for review. The land swap agreement is progressing. We are preparing to submit to large portion of the Step 6 items to the Department of Seniors and Long Term Care this month. The Community Consultation session is scheduled for March 21, 2024.

Water- The new well (#7) is meeting the requirements for both the Apartment Association and the long-term care facility. We are planning an 8th well as part of the new build project to ensure future needs are met. We are meeting with the Apartment Association on March 19, 2024, to discuss the water agreement and discuss future arrangements for management of water resources. We will be proposing a solution that creates water management independence with the ability to provide back up to one another in the event water production of a well drops.

Roof leak- During the recent rainstorms, we had a roof leak. The source appears to be the sprinkler line. Further investigation is underway.

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| **Strategic Direction: Performance**Shoreham Village strives for excellence in all we do and will continue to build its reputation as a leader in the Continuing Care sector. The management agreement we have in place with Northwood Care, Inc. has proven to be fundamental to our success and we see a strong future for both organizations if we continue on this shared path.  |

***Priority 1: Shoreham Village will participate in the national Accreditation process with the goal of meeting or exceeding all the standards set out.***

A celebration of our accreditation achievement will be included in the March 21 community consultation session.

SLTC Licensing- Licensing visits occur twice per year. The Evaluation Officers visited on March 4, 2024. We await their report and recommendations.

The annual inspection is completed in March and a semi-annual inspection is done 4-6 months after.

***Priority 2: Shoreham Village entered into an innovative relationship in 2016 through the development of a management agreement model with Northwood Inc. On the strength of our experience, we believe there is much to be learned from this model and that it has the potential to benefit other organizations within and outside the Continuing Care sector.***

Nova Scotia Health Partnership Evaluation- We have resumed active planning with NSH for this evaluation with the NSH team designing a survey to understand the impact of the Northwood/Shoreham partnership instead of interviews. They have been shifting more towards this type of support for projects due to the limited capacity of trained facilitators on the team. For the current project, this would allow them to expand their reach and collect results faster.

Another barrier that has been identified is the fact that much time has elapsed since before the partnership began, making it difficult to collect comparative perspectives on both states. Most people won't be able to speak about this, so I think it might make more sense to focus on the quality, barriers, enablers, and impact of the current state (i.e. partnership). They are suggesting they conduct several qualitative interviews with key individuals who would have this perspective, though. We are recommending this process, now that it is back underway, would address the Management Agreement Evaluation (stakeholder feedback) that is due this spring/summer.

Department of Seniors and Long-Term Care- Our service agreement is up for renewal (industry wide). Meetings have been deferred until April 2024. The impact of the Protected and Unprotected funding model will be a priority discussion item for us.

***Priority 3: Partner with other service delivery organizations focused on the needs of the elderly and disabled in the Shoreham Village catchment area. Advocate and support for affordable housing and supports for assisted living.***

Staff Housing- We are exploring an additional rental unit in Chester.

**Risk Report**

**1. Corporate Risk**

a. Compliance Risk- **Infectious (Communicable) Disease Liability Insurance coverage:** Marsh Canada has an Insurer that will provide Infectious (Communicable) Disease Liability Insurance coverage. We are in the process of applying for this insurance. Key points of coverage include:

* Insurance coverage for body injury claims arising from outbreaks of communicable diseases at care homes.
* Filling the gap in coverage left by various disease related exclusions common to liability policies post-COVID19 pandemic.
* Dedicated policy and limit for infectious disease related claims, including defence costs.

**2. Service Delivery Risk**

Outbreak- Our RSV outbreak was declared over on February 26, 2024

Resident concerns- We have had complaints from residents about the aggressive behaviours of one resident. The resident in question has dementia. The team continues to work on solutions to mitigate the risk to other residents. One resident has escalated his concerns to the Minister of Seniors and Long-term Care.

**Risk Report Legend:**

 **1. Corporate Risk:** Strategic, Compliance, Financial, Operational and/or Reputational Risk

*Compliance Risk*: The threat posed to an organization’s financial, organizational, or reputational standing resulting from violations of laws, regulations, codes of conduct, or organizational standards of practice (Deloitte, 2015).

*Financial Risk*: The risk of financial loss to the organization’s ability to earn, raise or access capital, as well as costs associated with its transfer of risk. This includes effectiveness of financial processes for reporting, budgeting, funding allocation and fiscal stewardship (North Simcoe Muskoka LHIN, 2010).

*Operational Risk*: The risk of direct or indirect loss or inability to provide care services, especially to stakeholders, resulting from inadequate or failed internal processes, people and systems or from external events. Operational risks involve factors such as technical or equipment malfunctions and human error, lack of prioritization, management support or expertise, etc. (North Simcoe Muskoka LHIN, 2010).

*Reputational Risk*: The risk of significant negative public opinion that results in a critical loss of confidence (patient, staff, physician, family, public). The risk may involve actions that create a lasting negative image of, or loss of confidence in, the overall operations of the organization (North Simcoe Muskoka LHIN, 2010).

*Strategic Risk*: Risks that affect the entire organization and its long-term objectives and are normally managed by the Board of Directors and Executive Team (HealthcareCAN (2016).

**2. Service Delivery Risk**: This includes but is not limited to any event that meets the definition of a Harmful Patient Safety Incident (Accreditation Canada, 2017), a Critical Incident as defined by the Department of Health and Wellness or a Serious Workplace Incident, Injury or Fatality as defined in the Occupational Health and Safety Act.

*Harmful Incident:* A patient safety incident that resulted in harm to the client. Replaces adverse event and sentinel event(Accreditation Canada, 2017a).

*Critical Incident:*  A serious event affecting either the resident (client), staff or the public (Province of Nova Scotia, 2015).

*Serious Workplace Incident:* An incident such as the following: an accidental explosion, major structural failure, major release of a hazardous substance, a fall from a work area where fall protection is required by regulations (Province of Nova Scotia, 2017).

*Serious Workplace Injury:* an injury that endangers life or causes permanent injury, such as loss of limb, third-degree burn, any injury that requires admission to a hospital (Province of Nova Scotia, 2017).