**Shoreham Village**

**Board of Directors Meeting – Minutes**

**September 25, 2024**

**Present (via Teams)** Joseph Green *(Chair),* Elizabeth Finney *(Vice-Chair)*, Andrew Snyder, Alison Kelland, Denise Peterson-Rafuse, Charbel Daniel, Reinhard Jerabek, and Jennifer Tucker.

**Guests:** Tasha Ross, and Niki Rodenhizer, Manager of Recreation and Volunteer Services

**Present (in person)** Colleen Richardson and Tammy Conrad *(Recording Secretary)*

**Regrets:** JoAnne Harris

1. **Welcome and Introductions**

The Chair called the meeting to order at 4:03 pm and welcomed everyone to the meeting. He welcomed new Board member Denise Peterson-Rafuse, and Charbel Daniel, as Shoreham and Northwood’s new CEO.

1. **Approval of Agenda**

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

1. **Board Education**
   1. Recreation Services Overview (Discussion on Resident Council and Niki Rodenhizer to present)

* Results from the 2023 Family Survey showed that 50-77% of families were pleased with entertainment and recreation services available to their loved ones.

A recent Family Survey was distributed and there was an increase in satisfaction. Efforts have been made during the past year to make recreation services and the team more visible. Detailed documentation of the recreation team and the services they provide to residents is displayed in the main lounge. Admission sheet provided to recreation team to provide necessary information about any new admissions.

* A Resident Personal Profile is given to the resident, or their family, to complete. It is a detailed document which provide the team with information that is helpful in creating the appropriate care plan.

6 weeks after admission the disciplinary team has a meeting with resident and their family. The recreation team attends that meeting, along with other resident Care Conferences to provide support.

* Monthly Recreation Calendar of Events is posted onsite, on the SV website, and emailed to families.
* Covid has had a huge impact on volunteers at SV and recruiting new volunteers is difficult. Niki and her team are open to suggestions or ideas on how to recruit new volunteers and how to continue making improvements to recreation services at SV. Please reach out to Niki if you would like to discuss.

***The Board thanked Niki for the detailed presentation.***

* 1. **Board Planning Cycle**
* Board Planning Cycle is posted on the Board portal. The Chair is open to any areas of education that the Board would like added to the cycle. Please reach out with any suggestions.
* Accreditation prep work will be upcoming. Tasha suggested that the Board may want to add that to the planning cycle. Tasha and the Chair will discuss.

1. **Business Arising**
   1. **Formal Partnership Report Review with Nova Scotia Health (Attachment) (Tasha Ross)**

* The Formal Partnership Evaluation was previously started but had encountered delays due to Covid. The survey was distributed to key partners during the summer, and results were distributed to the Board for review.
* The response rate was not very high, with only 7 surveys returned out of the 16 distributed. Reminders were sent out, but those were the only respondents.
* Overall, the results were overwhelmingly positive, with only a few areas that required focus.

**Community and stakeholder engagement – *The partnership has fostered increased engagement with families, the healthcare sector, and other key stakeholders*** – 1 respondent disagreed with this statement.

**Leadership and Governance – *The Shoreham Board of Directors is effective at overseeing the partnership with Northwood –*** 1 respondent disagreed with this statement.

Respondents were provided with opportunity to include commentary, but none was provided.

Tasha will contact NS Health to see if there are any raw comments available for our viewing. The Board is interested in finding out why the responders provided a negative rating, especially in specific areas related to the Board.

* 1. **Fundraising – Golf Tournament**
* Due to time restraints, issues surrounding payment platform, and the lack of sponsorships, a decision was made to postpone the September tournament.

The tournament has been rescheduled for May 29, 2025.

* A few donations have been received, which will be added to the numbers for the 2025 tournament.
* Updates will be provided as they become available.
  1. **Provincial Board Governance Training follow up**
     1. **Draft Whistle Blower Policy**
* The Policy was reviewed and finalized by the SV Board and reviewed by the NW Board.
* One suggestion was to include a flow chart as an appendix at the end of the policy.

The Board felt that a visual aid would be helpful.

* Tasha will add the Flow Chart and bring to the Board for review.

1. **Monitoring Performance**
   1. **Q1 2024-25 Scorecard Review (Attachment)**

**J*ennifer highlighted 2 quality indicator results from the report:***

* Pressure injury rate for Q1 was 3.37% incident rate. Target is 2%. This is a very low rate and near our target. Trending in a good direction. Only 1 injury was facility inquired, which is wonderful.
* The rate of Use of Restraints is high. Reasoning is SV identifies restraints differently from other facilities.

We use a broad approach to our recording. If a resident is using a seatbelt to keep them safe, it will be recorded as a restraint if the resident is unable to unbuckle themselves. Even though it is not intended as a restraint.

We like to capture seatbelt usage regardless, which does impact our rating. We are investigating solutions to differentiate in our reporting between those seatbelts that are intended as a safety measures and those that are intended as a restraint.

Awareness is being raised around seatbelt usage. A new Occupational Therapist was hired, and she is being trained to ensure that seat belts that are intended as a safety measure are not being treated as a restraint. Seat belts are part of a resident’s care plan and staff do safety checks as part of their care.

* We have been approved for 4.1 hours of additional funding. Instead of 2.45 hours of care per resident, it will be 3 hours per resident. An extra CCA on evenings and nights and an extra RN on evenings.

We did not qualify for the additional funding in the past due to our high usage of agency services and travel staff.

Currently all vacant CCA positions have been filled and provincial travel staff have been released.

1. **Financial Monitoring**
   1. **Financial Statements to August 31, 2024 (Attachment)**

* Cash is up from $450,000 to 1.6 million.
* Capital assets will increase from 3 million to 6 million due to the new build.
* Long Term Care debt is going to increase during construction.
* Tenders for the new build closed last Wednesday. The lowest bid received was 7 million over budget.

6 bids were received, and all were close in value. This is a good indication that our budget is significantly below market expectations.

* We have gone back to the Architect to see if there are ways to save costs without impacting resident care areas.
* Lindsay Construction was the lowest, and RCF was the second lowest. We have 30 days to reward the job after the tender closed.
* Budget for new build is 76 million. SLTC will need to comprise on the budget as it will be nearly impossible to omit 7 million from the new build costs.
* Commercial Services has a small surplus.
* Expenses in Resident Care due to NSNU retro payment paid to staff.

1. **Quality Improvement/Shoreham Accountability Report/Risk Report (Attachment)**
   1. **Shoreham Accountability Report**

* The “CEO Report” has been changed to the “Shoreham Accountability Report”. The CEO felt the name change was necessary to reflect that others are also accountable to the reporting, with the understanding that the CEO is ultimately responsible to the Board.
* Few pending Covid swabs, but we are nearing the end of the outbreak.
* Family Council meeting was held on September 24th 2024. In the past the Board was invited to attend.

They would like dates of Family Council meeting to add to their calendars. Charbel will provide the Board with a list of meeting dates.

* Agreement for service renewal is up for the province. They are suggesting a 7-day admission process.
  1. **Risk Report**

Nil

1. **Approval of Minutes – June 19th, 2024 (attached)**

The Board meeting date was changed from September 18, 2024 to September 25, 2024.

***Motion to approve the June 19th, 2024 minutes as circulated. Andrew Snyder moved and seconded by Colleen Richardson. Motion Carried.***

1. **New Business**
   1. **Long Service Award Ceremony (October 17th, 2024, 1830-2030 Chester Basin Legion)**

* The Long Service Award Ceremony is being held to acknowledge and celebrate staff that have reached long service milestones.

Please RSVP by October 13th, 2024, if you plan to attend.

1. **Chairs Report**

* The Chair and the search committee was busy with orientation for our new CEO. The Chair and CEO will continue with bi-weekly meetings.
* The Board can reach out to the Chair if there are any issues to be discussed with the CEO.

1. **Meeting Evaluation**

* Good meeting with lots of information
* Nice to meet Charbel
* Like the new layout of the scorecard
* Exciting news about the increased funding for resident care.
* Excited to have the NS Health Partnership Evaluation results

1. **Next Meeting**

Regular Board Meeting – November 20th, 2024

We will continue with meetings being held on the 3rd Wednesday of every second month, as it seems to be working for members.

1. **In Camera**

Nil

1. **Adjournment**

Meeting adjourned at 5:45 pm. Moved by Andrew Snyder and seconded by Alison Kelland. Motion carried.

***Recording Secretary,***

***Tammy Conrad***