

---

## Grace Manor Family Council Meeting MINUTES

---

<b>Date:</b>	<b>Wednesday, 9 October 2024</b>
<b>Time:</b>	<b>2-3 pm ET</b>
<b>Location:</b>	<b>Virtual - ZOOM Meeting</b>

<b>In Attendance</b>	<b>Representing</b>
Fred Benedikt	Acting-chair and Secretary
Justine Dudziak	GM Administrator
Kristine Nielsen	GM Resident Advocate & Activity Programs Manager
Ingrid Malmberg	HCH Emergency Management Coordinator
Agnes Wolfe	Member
Hank Kuntz	Friend
Patricia Roelofsen	Member
Yvonne de Boer	Member
Lisa Stepanic	Member

<b>Minutes Items</b>
<b>Welcome</b>
<b>Old Business</b> <ul style="list-style-type: none"><li>• <b>Approval of previous 11 September 2024 meeting minutes</b> – approved by Agnes and seconded by Yvonne</li></ul>
<b>New Business</b> <ul style="list-style-type: none"><li>• <b>Code Green Evacuation Drill - Emergency Management Coordinator – Ingrid Malmberg</b><ul style="list-style-type: none"><li>○ Ingrid joined HCH in January of this year. Emergency management is a role that exists across all levels of government and in many organizations. Emergency management deals with larger scale emergencies across multiple agencies/jurisdictions where coordination is necessary. When not involved directly in emergencies, she is involved with training staff, monthly fire drills, fire protection and emergency codes. She also prepares for unexpected events such as floods or how to handle the recent solar eclipse safely for residents.</li><li>○ On 6 November there will be an evacuation drill at GM for one home unit, secretly selected and safe enough, to be evacuated to the atrium. On the days leading to the drill, all staff will be educated on the Code Green Evacuation procedures. Residents will also be informed on what to expect in the event of an evacuation. These are important as evacuations can and have occurred. This past July, a LTC home in Mississauga was flooded during heavy rains and residents had to be relocated.</li></ul></li><li>• <b>Family Council Executive Position Elections - Fred</b><ul style="list-style-type: none"><li>○ As per our Terms of Reference, we hold yearly elections in October with nominations in September.</li><li>○ To date, we have the following Executive nominations: Michelle van Beusekom as</li></ul></li></ul>

**Minutes Items**

- Chair, Denise Sannella as Treasurer and Fred Benedikt as Secretary.
  - We received no other nominations and no member present wants to volunteer for any Executive positions or for an Advisory position.
  - Thus the existing Chair, Treasurer and Secretary assume these Executive positions by acclamation.
- **Update GM Resident Activity Kits – Patricia R and Kris N**
  - The Activity group is meeting tomorrow and will have more information and a progress update to share at the next FC meeting.
  - Patricia is proposing to initially spend about half the budget and see what activities get best feedback, are used the most and then use the remaining budget to fill-in any gaps.
  - Kris and Justine are working at cozying-up the sunrooms and moving around furniture with shelving that will hold the activity kits.
  - IPAC (infection prevention and control) is top of mind for safety of use, storage and cleaning. The aim is for maximum enjoyment with minimal cleaning effort.
- **Action Plan Checklist, Action Plan and Next Year's Survey – Fred B and Justine D**
  - Michelle and Fred conducted a snap-shot audit on 17 Aug and in Mid-September a checklist was sent out to membership to see how well GM was doing in compliance with the 2024 Action Plan commitments. (see Appendix A for details)
  - The single word that best describes the audit findings is *inconsistency* among the resident home areas (RHA). For example, some RHAs had no activity tables set-up, some did have tables setup but had no activities on them and some had tables with activities on them. Some RHAs have decorated dining rooms and others do not. Some RHAs range from having no spice caddies on the dining room tables to unfilled spice caddies to fully stocked spice caddies. Activities are scheduled on the calendar for men's clubs or King/Queen for the day, but we are unsure if this occurred as scheduled since there are no details. The home has a display in the atrium with pictures of residents on these special days. The audit findings will be followed up with department managers, challenges we found that some residents do not want spices on their tables and residents' "shoppers" frequently remove activity items left out in common areas so the team will be creative to mitigate these challenges.
  - Each department tracks and updates the action plan. All action plan areas are on track and will be completed for 2024 at the required goal due dates. The home has an Inventory of achievements that we track related to our Person-Centered Care progress to date. Some examples of what has been implemented and are Spotlight on Residents, Personal Center Language, Resident Ambassador, All About Me

**Minutes Items**

- Assessment, dignity walk, Spiritual Care Coordinator position, Music and Memories Program, the Who Am I Program, King and Queen for the Day.
- Care Plan is provided at the Post Admission Care Conference and reinforced that residents or POA can request at any time this was also shared at both Resident Council and Family Council that care plans can be requested at any time, this is a fluid document that can change as needs and preferences change.
  - Justine shared the challenge that residents are not always available to participate at meal setup and cleanup since residents want to freshen up and go to the washroom before and after mealtimes. Alternatively, residents interested are engaged during one-on-one time or during other activity times to assist with folding clothing covers, making seasonal center pieces decorations for the dining rooms at a time that works best for residents.
  - Some residents assist with daily devotions as a meal preparation and meaningful activity.
  - Kris commented that future activity kits may also focus on dining related tasks such as sorting cutlery.
  - As per our 2024 Action Plan, we have identified the 5 interdisciplinary staff as the minimum, to meet our action plan goal, from different departments to be “The Eden Champions” but have recently taken a different approach and renamed to “Person Centered Champions” to include RAP and RNAO best practice approaches. There will be training focused on the Eden Alternative before end of the year and into 2025 as we work towards the Eden Certification process. The Person-Centered Champion’s role is to help model, collaborate with front line staff, attend education sessions, spend time with residents who can benefit from 1:1 interaction, create and implement action plans for enhancing the environment or care, and provide demonstrations to peers.
  - Fred expressed reservations about the 5 individual “Champions” approach. He gave the example of the Who Am I experience when each of the 5 RHAs began creating posters for residents. That proved to be very confusing and uneven - uniformity was restored when a single person was tasked with doing all the posters. Additionally, from what we learned at the Residents as Partners (RAP) committee, this “5 champions” approach is contrary to the experience of homes which have successfully implemented a person-centred care model. These homes designated a single “champion” with the authority (and access to resources) to make any changes necessary and the task to implement within an 18-24-month timeframe.
  - Justine and Senior Leadership along with budget approvals are responsible for the implementation of Eden Alternative Certification Process roll out.

**Minutes Items**

- **Questions + Answers**

- One member asked if there any rules in place to govern the use of TV in the middle of the night (especially in rooms with shared bathrooms)?
  - Justine and Kris indicated this may be a shared space challenge. There are no rules about when a person can or can't watch TV as this is a resident's home. The resident can be asked to reduce the volume and to be mindful of others. We find work around solutions such as use of headphones if resident agrees or matching compatible residents together in basic rooms if possible. There are no particular Ministry rules on this type of situation. Each resident has access to the Resident's Bill of Rights.
- Another question arose about hearing aids. Who is the person responsible to insert/remove/store and keep clean? The charge (i.e. registered) nurse or PSW or?
  - Justine shared that it depends on the resident; some residents maintain, store and independently take care of their own hearing aids to maintain independence while others rely on registered staff. Specific needs are outlined in the resident care plan.
  - Two family members spoke about three hearing aid issues.
    - (1) Improper cleaning: the family member explained they have shown registered staff how to clean the hearing aids, but in the end, it falls on them to clean it. Justine mentioned if we know what resident we can follow up.
    - (2) The other question raised was about the battery case being left open which results in the hearing aid not being functional. Justine mentioned that some residents fiddle with their hearing aids which can open. However registered staff inserts the hearing aids and check that they function. When the hearing aid is removed, the hearing aid is opened so it does not drain the battery. If we know the resident name we can further follow up. At the time of admission residents and POA are provided with the Grace Manor Resident and Family Handbook. The handbook states that Holland Christian Homes is not responsible for lost or damaged hearing aids.
    - (3) What is the best way to handle wax buildup or other situations where despite having a functional hearing aid, the resident can't hear? Justine shared that residents or families should let the registered staff know, then a note is placed in the doctor's book for follow-up and to be assessed. The physician or NP (nurse practitioner) will provide a

**Minutes Items**

remedy for buildup of wax or the need for further hearing assessments  
- depending on what the MD or NP ordered.

- Key take away - the care plan is the tool used to provide direction of how staff provide care. Justine indicated if there is an individual resident concern to please bring to the registered staff's attention as the first point of contact and if it is not resolved please escalate to the ADRC or DRC. If it is still not resolved please escalate to Administrator. We want to know if something is not being done properly or not followed up promptly and appreciate the opportunity to ensure quality care is being provided.

- **Home Updates – Justine D**

- Activity Calendars are available on the HCH website. Families are encouraged to participate in all activities and events. Calendars are also found on RHA activity boards and in rooms if residents wish. Here is the link <https://www.hch.ca/calendar/>
- Outbreak Management plan was updated
- POA's will receive Flu consent forms in the mail. RSV vaccines are administered every two years. Public health has not yet delivered the Flu, RSV and Covid 19 vaccines but they should arrive shortly.
- Free Rapid Covid testing kits are available at the main entrance.
- GM received Ministry report related to the Order received and is complying. The home received 3 written notifications: transfer/positioning, a falls prevention and pain management related to critical incidences submitted.  
All GM MHLTC public reports can be found at the link below:  
<https://publicreporting.ltchomes.net/en-ca/homeprofile.aspx?Home=2942&tab=1>
- Celebration of Life is scheduled for November 19, 2024 at 10:00am at Horizon Hall.
- Memo was sent out in the billing as a reminder of our labeling process for resident personal clothing and out top-drawer lock option so we can reduce the loss of personal items and provide a lock option for independent residents.
- Family Council is working collaboratively with Justine and Judy on the upcoming Family Experience Survey that will be sent out to POA's to complete in November 2024.

**FUNDRAISING / PROJECTS - Denise**

- No updates. – current balance is \$3 k (allocated to Resident Activity Kits)

**CLOSING REMARKS/REMINDERS**

- Please join us for an informal **Meet and Greet Saturday 23 November (10 am to noon) No RSVP needed.** We will have some light refreshments. This is put together by GM Family Council. You'll have the chance to meet and speak with others who have a loved one living in Grace Manor, including the folks who have been active in Family Council initiatives

---

## Grace Manor Family Council Meeting MINUTES

---

Minutes Items
<p>and work behind-the-scenes to help improve quality of care and life for all residents.</p> <ul style="list-style-type: none"><li>• We need your good ideas and observations to help improve the quality of life and care for the residents. Please consider volunteering for a role on the Executive Council or as an Advisor.</li><li>• Next meeting: <b>Wednesday, 13 November 2024</b> at 2:00PM by Virtual Zoom.</li><li>• Please send your comments, observations and suggestions to: <a href="mailto:gracemanorbramptonfc@gmail.com">gracemanorbramptonfc@gmail.com</a></li></ul>
<b>MEETING ADJOURNMENT</b>

Appendix A – GM Family Council August 2024 Audit

## Appendix A

### AUDIT OF HOME AREAS (AUGUST 17, 2024) by MvB and FB

#### Comparison against the 2024 Action Plan

##### 1 South

###### Activities

- No independent activity tables set up
- Families unsure if King/Queen for the day is happening on a monthly basis
- Families unsure if Men's Club is happening on a monthly basis. No details on calendar provided about specific men's club activities.
- Train simulator in sunroom does not seem to be in use

###### Dining

- No special decor to make dining room more homey
- Not seeing any spice caddies
- Room does not appear to have a connected music system
- Families have not seen evidence of greetings (making residents feels special) when they arrive in the dining area

###### Decor / Ambiance

- Walls are painted in bright contrasting colours (following butterfly best practice)
- Pictures are mounted high (not at eye-line of those in wheelchairs)
- TV volume is better (used to be very loud)

##### 2 North

###### Activities

- One activity table set up in common room but it does not seem to be in use. There used to be another one by the nurse's station but that has been removed.
- Families unsure if King/Queen for the day is happening on a monthly basis
- Families unsure if Men's Club is happening on a monthly basis (it's on the calendar but details of the activity not provided)

###### Dining

- There are dollar store streamers taped to the ceiling, but no adult decorations that would elevate the dining experience by creating a cozy ambience.
- Spice caddy containers are empty
- Access to the dining room is blocked off between meals
- Music system is working and used during mealtime

### Decor / Ambiance

- Sunroom looks ragged - not welcoming/cozy and there are no activity tables.
- Lots of wall art but its mounted above eye-level of those in wheelchairs.

### 2 South

#### Activities

- No activity tables set up.
- There is shuffle board in the sun room.
- Families unsure if King/Queen for the day is happening on a monthly basis
- Families unsure if Men's Club is happening on a monthly basis

#### Dining

- There are dollar store streamers taped to the ceiling, but no adult decorations that would elevate the dining experience by creating a cozy ambience.
- Full spice caddies are available
- Residents have access to the dining room between meals (not blocked off)
- Music system is working

### Decor / Ambiance

- Sunroom setup is cozy and has a nice homey feeling.
- Less wall art on this floor
- TV in common room tends to be very loud.

### 3 North

#### Safety

- There's a sign on the door asking people to be aware of exit seekers, but the door is programmed to stay open for a good 30 seconds when someone enters/leaves.

#### Activities

- No activity tables set up.
- King/Queen for the day and Men's Club (with detail) are on the calendar
- Activity room is open (accessible) to residents, but no activities are set up on the tables.

#### Dining

- Dining room has table decorations
- Full spice caddies are in place



- Residents appear to have access to the dining room between meals (not blocked off)
- Music system is working

### **Decor / Ambiance**

- Nice lighting system (LED) brightens up this home area
- Less wall art on this floor
- There are child-like dollar store decorations (decals and smiley faces) taped to the walls - not appropriate for an adult environment
- Sun room is homey but there are no books, games or puzzles on the shelves; no activity tables, etc.
- TV volume in common area is loud

### **3 South**

### **Safety**

- There's a sign on the door asking people to be aware of exit seekers, but the door is programmed to stay open for a good 30 seconds when someone enters/leaves.

### **Activities**

- King/Queen for the day and Men's Club (with detail) are on the calendar
- Common room has a piano and puzzles
- The activity room is open and there are supplies / games on the table for independent activities
- There is a puzzle table in the sun room

### **Dining**

- There are decorations on the individual dining tables
- Full spice caddies are in place
- Dining area has pictures on the wall
- Residents have access to the dining room between meals (not blocked off)
- Music system is working

### **Decor / Ambiance**

- There's a cold water dispenser by the nurse's station so residents can access drinking water independently
- There is less wall art on this floor
- There are child-like dollar store decorations (decals and smiley faces) taped to the walls - not appropriate for an adult environment