

Grace Manor Family Council Meeting MINUTES

Date:	Wednesday, 8 April 2026
Time:	2-3 pm ET
Location:	Virtual - ZOOM Meeting

In Attendance	Representing
Michelle van Beusekom	FC Chair
Fred Benedikt (partial)	FC Secretary
Justine Dudziak	GM Administrator
Kristine Nielsen	GM Resident Advocate Activity Manager
Richard Sredzinski (partial)	HCH Director of Finance
Lisa Stepanic	Member
Stephen Taylor	Member
Agnes Wolf	Member
Sanja Shillingford	Member
Patricia Roelofsen (partial)	Friend
Heather Homes	Member
Gwen Veenstra	Friend

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Old Business

- **Approval of previous 11 March 2026 meeting minutes** – approved by Sanja S. and seconded by Lisa S.
- **Action Plan Working Group (WG) Progress Update - Michelle van B and Fred B**
 - The Chair shared that the Family Council Working Group has withdrawn participation from the action planning process because of differences in approach and expectations. The FC WG was unable to resolve despite best efforts.
 - The FC Working Group Chair presented the following statement:- With some regret, the GM FC Working Group decided to withdraw from further participation in the development of this year's GM Action Plan. The agreed upon process was not followed even after repeated attempts to remedy the situation. There were also fundamental differences in opinion on how to approach an action plan. In the opinion of our working group, an action plan needs clarity of purpose with corresponding steps and procedures to monitor effectiveness. Without this approach, one either partially addresses the concern(s) or repeats them year-over-year. As volunteers, administration should honour our request not to be associated with this year's Action Plan without further comment.

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- Justine confirmed that the survey results were shared on February 10, 2026 and the Action Plan was shared on February 10, February 19, March 13 and March 18, 2026 with Family Council and stated that most all of the FC WG suggestions were retained- It was unfortunate the WG stepped away but is thankful for the WG's contribution

- **Chick Hatching Project – Patricia R**
 - Patricia reported that again some eggs didn't hatch. We have 5 healthy chicks from 15 eggs. Patricia checked to see if incubator was defective - it was fine. Perhaps the rooster wasn't doing his job properly!
 - Patricia would like to start working on a succession plan - find someone else to lead or share the project management of the chick hatching program. She proposes it be done twice a year. Time commitment is over a 5-6 week period
 - Patricia shared a lovely story of a tower resident who is volunteering to help with the chicks. She practiced walking from her building (across the street) to GM for three weeks to ensure she would have enough stamina to commit to the chick project.
 - **Action:** Michelle to draft a notice encouraging our membership to volunteer and replace Patricia in leading on this initiative. Patricia will vet the draft. Succession planning will be on our May meeting agenda.

- **Reminder – FC Dementia Friendship Support Group – 3rd Monday of the month – Liz T and Fred B.**
 - Fred reminded everyone that the next dementia support meeting will be 25 April in the GM Family Room starting at 1 pm.
 - This is an opportunity to meet in-person and connect with other members who have a family member living with dementia. Newer members in particular may find this an invaluable chance to share experiences and ask questions of others who are further along in this journey with their loved one.

New Business

- **April Bi-annual Meet and Greet – Saturday 25 April – Fred B**
 - GM FC is holding another in-person Meet and Greet in the GM Family room on Saturday 25 April for 10 am to 12 pm. No RSVP needed.
This is an opportunity for the newer family members to connect with others and share experiences.
- **Annual Review – FC Terms of Reference (ToR) - Michelle van B**
 - The Chair reminded us that FC is required to have a formal annual review of our Terms of Reference (ToR). The ToR provides guidelines on how we function as an

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independent, volunteer led family council. We recently changed our meeting time to noon to better accommodate those still working with a loved one at GM.

- The Chair asked the members present if there should be any additional changes. Since no changes were requested, the Chair moved to accept the current ToR (last updated 14 January 2026). Approved by Sonja S. and seconded by Fred B.

- **GM Financial Report – Richard Sredzinski (HCH Director of Finance)**

- Richard has been with HCH for 6 years. He has worked in LTC sector since 1998. He finds this to be a very dynamic sector with regulations that are always changing. The LTC sector is highly regulated.
- GM's core funding comes from the Ministry of Long-Term Care (MLTC) and the copayments made by or on behalf of residents. Funding is on a per capita basis, i.e. per occupied bed. GM operates on \$204 per resident per day. \$64 / day of the \$204 amount comes from resident co-payments. There is some variance in what each individual resident pays based on income and if they have a single or double room
- GM Funding is divided into 4 envelopes:
 - Nursing and personal care - \$112 per resident / per day
 - Programs and Support Services - \$13.16 per resident / per day
 - Nutrition support - \$13.44 per resident / per day
 - Accommodation - \$65.35 per resident / per day (includes laundry, linen, housekeeping, administration, etc.)
- GM receives approximately \$1M per month from the province.
- In addition to the above envelope funding, GM may receive other funding for specific activities and programs such as:
 - Direct Care Staffing
 - Supplies
 - RAI-MDS coordination (Resident Assessment Instrument & Minimum Data Set)
 - Quality Attainment Premium
 - Behavioural Support Ontario (BSO) support
 - Supplemental nursing
 - permanent wage enhancement
- Total envelopes for GM for 2025 are:
 - Nursing and Personal Care: \$10M
 - Programs and Supported Services: \$700K
 - Nutrition support: \$600K
 - Accommodation: \$3.8M
- Administration can move funds between the first three envelopes (Nursing, Program

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and Nutritional). For example, if there are any savings in nursing, they can spend it on programs or nutrition. They need to spend the full amount or they lose it at end of fiscal year. Should there be a surplus in Accommodation, this amount can be carried over and directed to capital items.

- HCH considers Eden to be a “program” and it is funded from the Nursing and Program envelopes.
- HCH applied for supplementary funding from the MLTC for Improving Dementia Care Program (IDCP) but they were not successful - only 17 homes in Ontario received this funding.
- GM requested and received additional funding when extra PSWs were required to support a bariatric resident. This was an unusual and unique situation.
- The MLTC dramatically increased funding after COVID - enough to reach the targeted 4 hours of direct care per resident. However HCH like many other LTCs had a difficult time to find additional qualified staff due to a general post-covid labour shortage in the sector.
- Starting in 2023, supplemental staff funding increased to the best ever in Richard’s 28 years working in this sector, but due to difficulty in recruiting qualified staff, they had to return some of the money.

- **Questions for Richard**

- A member asked how Eden has been budgeted for. Richard responded there is funding in place to replace the Eden lead who recently resigned., The member asked if there is a budget to support material purchases related to Eden such as modifying the nursing station, or creating a café area with a fridge and toaster, or providing bread makers/crock pots to create aromas along with the groceries. Richard responded that to date there have been no supplemental budget requests for Eden but that there will be budget for it and there is an established process for such requests to be made.
- The Chair asked how the resource needs of a program like Eden (e.g. supplemental staff, enhancements to make things homier) are scoped out during the budget planning process. We understand it is a 2 year implementation. Justine clarified that Eden did not have a 2 year implementation timeline. Richard responded that there is an annual budgeting process undertaken with managers who put forward their needs. These are then discussed and prioritized based on the funding available for the year. To date there has been no specific additional funding for Eden. Eden funding came from the existing program funds mentioned earlier.
- The Chair asked about Richard’s challenges. The biggest challenge is to satisfy

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everyone and spend money properly in this highly regulated industry and to keep current with the constantly changing regulations.

- A member asked about contingency funding. Richard indicated the Manors do not have a contingency and do their best to stay on budget.
- The Chair asked about special fundraising initiatives to cover funding gaps not covered by the ministry or resident co-payments. Richard indicated this type of fundraising may happen for large capital projects, e.g. buildings, but not for general resident care. Some LTC homes create foundations to cover large capital projects.

- **Home Information Update – Justine D**

- With the departure of Dr. Tran, residents have been reassigned to the two remaining doctors:
 - Dr. Elahi covers Tulip Terrance (1S), Meadow Lane (3N) and Water Lily Way (3S) and is on the neighbourhood Tuesday afternoon about 1 pm.
 - Dr. Haran covers Salty Shores (2N) and Harmony House (2S) and is on the neighbourhood Thursday mornings about 9:30am.
- Nurses and Care Partner week is 11 – 15 May with celebratory events
- Survey results were shared on February 10, 2026 with Family Council and the Action Plan was shared on February 10, February 19, March 13 and March 18, 2026 with Family Council and most all of the FC WG suggestions were retained on the Action Plan.
- During a recent Ministry on 1 April 2026 GM received no findings. For the first calendar quarter GM had no Critical Incidents (CI) or outbreaks. Details can always be found below: <https://publicreporting.ltchomes.net/en-ca/homeprofile.aspx?Home=2942&tab=1>
- Commission on Accreditation of Rehabilitation Facilities (CARF) accreditation is again up for renewal. Early in 2027, CARF will again be doing their inspections for GM to be CARF Accredited.
- Justine thanked the Chair for participating in the Annual Program Day. Justine stated that there are 626 LTC homes in Ontario; 5 municipal not-for-profit homes in the Peel Region have received Butterfly Certification for only 1 neighborhood not the entire home; 26 LTC homes throughout Ontario provide some form of Emotion Based Care (EBC) however, not certified in any specific model. Justine stated that these are all municipal homes. Currently, there are no fully certified Eden homes in Ontario (although some are working towards this designation). Justine continued that in most instances Butterfly certification does not apply to the whole home but to only 1 neighbourhood. GM did apply for additional ministry funding from the

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Improving Dementia Care Program (IDCP) but was not one of the 17 successful homes. Based on those numbers, Justine questioned the view that HCH is lagging behind in the implementation of an EBC model. The landscape shows only less than 3% which is a very small handful of homes have implemented any emotion-based care model, Grace Manor is one of the leaders in this sector and not behind as suggested by FC's Chair.

- A member commented that Burton Manor LTC in Peel just north of GM, is also a Butterfly home along with a home in St. Catherine (Royal Rose – Jarlette Group). Both are privately operated for-profit homes. The Butterfly model is generally applied to the dementia locked down area.
- The Chair provided context for Family Council's view that HCH is lagging behind in obtaining EBC certification. Approximately 5% of homes in Ontario are EBC certified – some have been certified for more than a decade. The Netherlands has been a pioneer in the implementation of Emotion Based Care dating back to the early 2000s. Within HCH families look to the example of the Netherlands and wonder why HCH has been slow to adopt a better care model. We started speaking about Resident Centred Care at the Residents as Partners (RAP) committee four (4) years ago. It has been a painfully slow process to finally get to a position of adopting a model – Eden. Just because 95% of LTC homes in Ontario have not yet adopted an EBC model does not mean that we are doing OK. We should be ahead of others, we should be part of that 5%. It is great that we are now taking steps in that direction, but from our perspective HCH been slow to the party. Justine respectfully disagrees that HCH has been slow to adopt a better care model and in fact are leaders in the sector.
- GM has an outbreak on Tulip Terrance (1S) with an unknown pathogen affecting 4 residents. Currently only one resident is in isolation and doing well.
- Justine shared that purposeful hourly rounding (PHR) has been done for many years and is being enhanced and Care Partners are constantly being re-educated. Justine clarified that PHR is not part of HCH policy or a Ministry regulation; it is a part of our RNAO Best Practice Guideline. The home is in progress to move away from recording rounding data on paper to electronic tablets linked with POC for better efficiency and tracking, we have seen a reduction of falls since the implementation.
 - A member brought up that PHR is specifically mentioned in the PSW job description (JD). All employees are obliged to fulfill their JD. The Chair commented that while PHR is not a Ministry requirement, it is something GM has committed to in order to attain Registered Nursing Association Ontario (RNAO) certification and GM is accountable to that commitment. Part of that accountability is putting PHR in job descriptions. Justine shared that as part

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of the 2026 Action Plan they are shifting away from a paper based to a tablet based recording of PHR for increased efficiency and better tracking. See Appendix A – HCH RNAO Purposeful Hourly Rounding Summary. See Appendix B - Job Description - Personal Support Worker Final (June 2023, pages 5 and 6)

- Jacquie Vezeau, Eden Lead and Community Builder, resigned from her position. HCH is looking at the Eden program and will share next steps when known. The Chair asked what happens with Eden in the interim until a new person is in place. Justine shared that what was started will continue and will share the plan of how we will move forward once it is confirmed.

Financial

- The FC account balance is \$170

CLOSING REMARKS/REMINDERS

- 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, as an Advisor, or to lead a new initiative. In the past, family members have initiated and implemented projects like the Who Am I Posters; the chick hatching program and the creation of the activity kits.
- Next meeting: **Wednesday, 13 May April 2026** at 12:00PM by Virtual Zoom.
- Please send your comments, observations and suggestions to:
gracemanorbramptonfc@gmail.com

MEETING ADJOURNMENT

Appendix A – HCH – RNAO Purposeful Hourly Rounding (PHR) Summary

Appendix B – Job Description - Personal Support Worker Final (June 2023, pages 5 and 6)

Purposeful Hourly Rounding

Purposeful Rounding, sometimes known as “Hourly Rounding” or “Intentional Rounding,” is a practice *that improves resident safety, resident experience and reduces call bells. Check your residents every HOUR for the 4“P’s”*: **PAIN, POSSESSIONS, POSITIONING, PERSONAL NEEDS**

PAIN

Is your resident experiencing pain?

Screen for pain by asking residents if they have pain, or observing for signs and symptoms of pain in cognitively impaired residents.

*If pain can not be managed, notify the registered staff.



POSSESSIONS

Are all the items your resident would like placed within their reach?

Make sure that necessary personal items are within easy reach; e.g., call bell, TV remote, telephone, Kleenex, beverages, etc.



POSITION

Is your resident in a comfortable position?

Make sure the resident is comfortable and assist in repositioning as required.



PERSONAL NEEDS

Does your resident need to use the bathroom?

Offer assistance to the toilet or assess if the resident needs to be changed. Is the resident hungry or thirsty, or are they hot or cold?



How do you perform purposeful rounds?

- 1) Use opening words
(i.e. “Good morning, Mr. Smith”)
- 2) Perform scheduled tasks
- 3) Address pain, positioning, and toileting
- 4) Assess additional comfort needs
- 5) Assess personal environment
(e.g. Remove hazards, place call bell or TV remote within reach)
- 6) Close the conversation
(“Is there anything I can do for you before I go? I have time.”)
- 7) Tell resident when you will be back
(“I will be back to check on you in 1 hour.”)
- 8) Document the round on the log



JOB DESCRIPTION

Position	PERSONAL SUPPORT WORKER	Page 5 of 8
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- As applicable, works with residents to identify safety issues, and develop prevention and response strategies

Person-Centered Approach

- Respect and carry out the values associated with a person-centered approach which include rights, dignity, identity, individuality, respect, privacy, choice and independence.
- Focus on the abilities and skills of the individual rather than the labels, statistics and diagnosis.
- Provide individualized emotional and physical spaces for care that are in tune with people's changing needs
- Provide supportive opportunities for social engagement to help people live their life and experience well-being.
- Treat the individuals that you support as an equal partner in their own care provision and have an important role deciding how they are supported.
- Listen, find out the history, preferences, wishes and needs of the individual.
- Provide information in a way that it can be understood and communicate in a way that meets an individual's needs and preferences.
- Do not influence an individual's choices with your own personal views.
- Be compassionate, understanding and empathetic and be non-judgmental, even if you do not agree on a personal level with the choices they make.
- Watch what you say - use person-centered language.

Purposeful Rounding

- **Every employee** working at Grace or Faith Manor is expected to complete "Purposeful Hourly Rounding" during their resident encounter. Purposeful hourly rounding is a practice that improves resident safety, resident experience and reduces call bells. During all resident encounters ask about the 4P's: Pain (do you have pain, or do they appear uncomfortable), possessions (do they need an object i.e. TV remote; is their call bell within reach, scan the room for tripping hazards), position (do they need to be turned or their position adjusted), personal needs (does the resident need to use the toilet/require changing; are they thirsty/hungry or hot/cold). PSWs are expected to sign off on the rounding log to indicate that purposeful rounding has been completed. Interdisciplinary



JOB DESCRIPTION

Position	PERSONAL SUPPORT WORKER	Page 6 of 8
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team members and/or volunteers are expected to **ask** the 4P questions and direct any actions outside of their scope of practice to a registered staff or PSW.

Resident/Tenant and Family Relations

- Monitor resident/tenant, and family satisfaction of the quality of care and services. Report any concerns to the Manager or Supervisor so they can be documented and immediately addressed.
- Keep residents/tenants, and families informed of current problems or concerns related to care and services within the building.
- See concerns as opportunities to improve. Ensure immediate escalation of any concern as required to the appropriate person.
- Participate in the admission orientation process of new residents/tenants and their families.
- Maintain open lines of communication with families and residents at all times.
- Maintain a compassionate and caring attitude at all times with families/residents no matter what type of interaction (positive or negative).
- Maintain confidentiality.
- Do not discuss departmental issues or organizational issues with residents / families / next-of-kin.

Staff Development and Education

- Attend conferences, seminars and workshops.
- Attend In-service Education.
- Attend educational and learning opportunities within the community to keep abreast of new developments within the field of LTC services, Human Resources, technology etc.

Organizational Wide Responsibilities

- Engages in professional activities that promote the Vision, Mission and Values of the organization
- Positively represents the organization internally and externally.
- Sits on in-house and external committees if required.
- Performs other duties and responsibilities as assigned by their direct supervisor.