

Maxville Manor Family Council Minutes June 5th, 2023

This was a dual Format Meeting conducted in person and via Zoom

Family Council Members	Rainer Pethke (Chair), Gail Seguin, Carol Hambleton (V), Judith Stanway (V) * (V) = virtual
Guest (s)	Dina Murray-MacDonald, Kelly Keeler (V)
Regrets	Diana Kemp, Beverley Hersovici, Muriel Aitken, Lynn Stevenson, Keith Penny, Heather Ross,

1. Welcome and opening remarks by the Chair

The previous minutes from Mar 2023 can be found here: <https://maxvillemannor.ca/family-council/>. Previous minutes are considered approved at this time, as they are typically circulated for comment and approval after the last meeting.

Alzheimer's information sessions are going well with one session left on June 21st.

MS training for staff was held on March 1st. Not everyone was able to attend, and additional staff have expressed an interest in so Kelly/Dina will look into holding another session.

This session was recorded and could be made available to FC attendees. The camera in the laptop provided by the Manor turned out not to be working so some visuals containing the attendees in the Manor Library were not captured.

Thanks to Gail Seguin once again for her excellent notes.

2. Inspection Report by DoC - Kelly Keeler

This inspection report dated April 27, 2023 was distributed prior to the FC meeting and is available at <http://publicreporting.ltchomes.net/en-ca/homeprofile.aspx?Home=c540&tab=1>

This visit was a follow-up to an earlier inspection. Ministry inspectors were onsite March 13, 14, 15, 16, 20, 21 2023 - Primary Inspector and two were being trained - Ministry inspection offsite March 22, 2023. Additional non-compliances most notably around the wearing of masks in proximity (within 6 feet) to residents were observed while inspectors were present.

A failure to report to the Director was noted re: a resident's concern that they did not see their medication before it was put into their mouth. The conversation was noted in RPN reporting.

A resident room was observed to have a PPE donning station but additional precaution signage was not in place. The IPAC Lead was interviewed and confirmed the room had contact precautions in place for specific procedures. Contact precaution signage was put in place prior to the end of the inspection.

Three staff members were observed in the family room of a resident home area hallway with their masks removed and there was a resident in the room completing an activity. On the same day, two other staff members were observed in the town square area of the home seated at separate round tables behind residents taking part in an activity. Masks must be worn at all times in the Manor with limited exceptions such as eating but always when residents are in proximity.

Medication management was reviewed for Oct-Nov 2022 as part of the follow-up. A new system was implemented in December and the inspector found a concern therein.

During the Pandemic last fall the pharmacy encouraged less wastage because of shortages of certain medications. The Manor was asked to save as much medication as possible and followed procedures used elsewhere to label the syringe with patient's name, date, dosage etc. The Ministry ruled that per legislation: medication must stay in the original bottle.

All things have been addressed and unfortunately there is some wastage of medications that leads to increased costs but legislation must be followed.

3. Update on Parkinson's information by Carol Hambleton

An Information session is scheduled for July 10, 2023 at 6:30 to be presented by Donna Greenings. (Program Service Co-ordinator Parkinson's Canada). The host will conduct the session via Zoom from Saskatchewan.

Carol will prepare posters for the front lobby and nurse's station.

Interested persons will be asked to register with Dina so that she has contact info to distribute the Zoom and any updates. Registration cut off will be the day prior to the session.

Participants can join via Zoom or an in-house option (10-12 capacity in the library) - Registration cut off will be the day before.

There is only one session planned at this time expected to be 45-50 minutes long with time for questions following presentation.

4. Intake Process review – a new resident's experience Rainer Pethke

Prior to the FC meeting the chair distributed notes gleaned from his mother's experience during a late April intake. Notes were based on personal observation and limited comments from other family members. The intent was to gain comments and feedback from other FC members to gain agreement on what worked well and areas that could be improved in general for the benefit of all future intakes. Unfortunately, the small attendance coupled with the amount of time that has passed, limited discussion on other intakes. Following are 22 recommendations based largely on this particular experience.

Key Recommendations:

1. Issue Resident handbook and FC materials the same day that the bed offer is confirmed.
 - a. Ensure website copy is kept up to date as it is not.

2. Identify a key contact person for questions and to be a family liaison. Identify where FC minutes and information can be found on the website and encourage participation.
3. Avoid intakes on the last days of the week as much as possible.
4. Reserve a meeting room or other private area with sufficient seating for the intake.
5. Implement extra staff awareness/instructions to weekend and shift staff when a new resident is admitted.
6. Implement a facilities room audit checklist and leave a copy of the completed checklist and staff contact information in the room for the new resident.
7. Confirm in advance of making the sign that the resident name is posted as commonly used/how they wish to be addressed.
8. Include the head nurse or unit manager in the intake to ensure that all relevant medical information and special needs are documented and part of their care plan from the first day.
 - a. 21+ days is felt too long and too much of a risk to find out something critical was missing.
9. Share the assessments/information that the Manor has documented, with the POA/Caregiver within the first 2 days of admission. It is felt that there exists a real risk of gaps without the 2-way confirmation.
10. Within 48 hours hold a review of the PSW summary sheet with the Unit Mgr and POA to ensure all key info is captured therein.
 - a. Ensure that it includes little things that add to comfort, such as providing reading materials, turning the tv on/off a certain time, a pillow behind their back if the chair tends to cause slouching, allergies, preferences etc.
11. Have the resident name and seating prepared at the dining area in advance of the first meal.
12. Ensure that roommates as well those sharing dining seating are properly introduced.
13. Confirm that snacks and drinks are part of the daily provisions starting the day of arrival.
 - a. This is especially important if the individual is a grazer who does not normally consume a full meal in one sitting, otherwise they may be increasingly confused/afraid of the changes if basic needs are not being met.
14. Do daily call bell reviews for the first few days and over the first few weeks and take action on Zero or low usage to train/assure the new residents' that its ok to ask for help.
15. Provide regular activities report to families so that they can coordinate the calendar of activities with visits.
16. Develop a short written description of the activities found within the calendar that also includes the expected duration.
17. Confirm transfer of medical records from their current physician and pharmacy. Don't rely on HCCS as their information can be dated or even incorrect. Apparently, the Manor pharmacy is to call the POA prior to admission but no-one present could confirm it happened.
18. Confirm the POA with the family as HCSS records were found to be dated or incorrect.

19. Communicate with families and caregivers regularly, promptly and often during the first few days, weeks and month until everyone is comfortable then monthly thereafter (suggest alignment with when the invoice is issued) so that families better appreciate the service provided for the money. A summary report of the nursing notes, medications taken, activities attended, call bell report etc would all be appreciated.
 20. A good first step would be considering what could the Manor do to improve an experience that was described from the new resident's point of view. Right or wrong, there is a reason behind each comment and should not be discounted/discouraged.
 21. Update the Admission Process accordingly as part of a quality process including the FC and RC.
 22. Develop a new resident intake survey and integrate it into a QC process that includes regular review and updates.
- It was noted by Kelly that assessments are completed quarterly per legislation and coded information is sent to the MLTC that could not be easily communicated with family contacts. Family is contacted only if there is a change. Family is included in the annual reviews.
 - The above recommendations were passed on to Kelly for discussion at a management team meeting as intake process review and updates are on the priority projects list for this quarter.

Roundtable – final comments, feedback, schedule next meeting

Thanks were expressed by Judith for the activity staff for the garden centre as well as noting the excellent work done on the completion of the FG Piper lounge after the fire.

Construction design activities have restarted for the Manor reconstruction. We can expect fundraising to start soon with a Spring 2024 target to start construction.

The next Family Council meeting is scheduled for **Monday August 14th at 6:30pm.**

Emergency evacuation plans were previously suggested as a potential topic for the next meeting pending the development of a mandatory Emerg. Preparedness Policy and Procedures Manual by the Manor in Q2. Your ideas and input are welcome for this and future FC meetings.