

## **FAMILY COUNCIL Minutes**

**THURSDAY, September 19, 2019 @ 7:00 P.M.**

### **WEINBERG CLASSROOM**

Attendance: Lisa Dawson, Charlotte Katzen, Ellen Rappaport, Kitty Cates, Tamara Gunar, Shelly Osapof, Kathy Gordon, Cheryl Robson, Keren Gertsman, Roslyn Belle, Paula Terrio-Boyd, Neil Simces, Barbara Jones, Sarah Armstrong, Joy Lin Salzberg, Jeff Weisler, Lisa Ford

Guests: David Kesselman, Lunadel Declan

**Approval of June 20, 2019 minutes**, moved to October meeting.

#### **1. David Kesselman – Louis Brier Strategic Plan - roll out last May**

See PowerPoint Presentation attached

#### **Highlights:**

Residents must qualify for long term care under specific criteria; more residents enter with complex needs and the average length of stay is 16-18 months; 216 residents; -VCH funds staffing by HPRD (Hours per Resident per Day); this recently increased from 2.62 hours to 3.00 hours because we are at the higher threshold of need - allied health increase from 0.18 to 0.36 (PT, OT, SW, recreation) - food cost per resident per day is \$6.25, with the foundation and the Kosher requirements we are funded at about \$9.00.

Resident and Family Centred Care: letting the resident navigate their own care (with their choices and requests), trying to involve families and residents.

Strategic Plan: 2019-2023, many stakeholders and leaders were involved. Louis Brier/Weinberg will be *guided by* Jewish values and traditions (currently about 40% of residents are Jewish), recognizing a need to restructure things to acknowledge other's traditions as well, more language around health and safety and quality of care, reaching out to the community, fostering a culture of compassion, with an effort to be recognized as a centre of excellence, with the understanding that we are a team of human beings doing their best, making a structure so that Jewish people who want to come to Louis Brier/Weinberg are able to.

The Louis Brier Foundation solicits money from the Jewish community only, although there are donations from the wider community. 67% of the funding for Louis Brier is from Vancouver Coastal Health (VCH). \$20,000,000 is the entire budget. Funds are restricted and funding limited, so there is a big initiative to engage the community.

VCH designates building status as red, amber, or green levels, from neediest to best. Despite the age and inefficiency of the building, Louis Brier is currently at the green level.

Contingency plans for emergencies: 24 hours on call manager, for anything that can't be done in house, by the nursing staff. As of November, there will be CNLs available for 12 hours a day.

Clarification of the complaint process, for families and residents: See attached complaint form and policies and procedures. There is also a link on the website, and forms are available the reception desk. For the complaint process, the initial complaint goes to the nurse, then the CNL if necessary, then, if still not satisfied, to senior management. All formal complaints are acknowledged by management, in an email to the initiator of the complaint.

Palliative Care and End of Life Care: needs to be improved. Nothing has been done yet, but the discussion has begun.

Emergency preparedness: there is an emergency preparedness plan that should be rolled out to families. Safety in general needs to be addressed.

Jeff Lee and Lenora Callingson are the temporary Social Workers. Management will be hiring two social workers to replace Kristina Zoe.

Louis Brier management is working on ways to attract and keep the best employees in a climate of stiff competition in Vancouver.

Chaplaincy - Rob Menes is now on the job and available to provide spiritual care and support. He can be contacted directly, on referral, and will be initiating his own care plans.

## **2. Welcome new families and introductions**

### **3. Housekeeping Items**

- Families eyes and ears to resident care is important. We ask that you continue to copy Family Council ([lb.familycouncil@gmail.com](mailto:lb.familycouncil@gmail.com)) on any email communications you have with administration where you feel it may be helpful to have council aware of an incident. We will reply to you asking if we can assist in any way.
- We save time every meeting for-personal care concern, to be raised at the end of the meeting. Please ask the chair to add your name to the agenda.
- Please try to keep emotion to a minimum and focus, instead, on how you might have preferred the outcome or what kind of solution you might have for future families in the same situation.
- Thank you to all families who have taken part in the Foundation Survey.
- Thank you to all families who have come out to support Staff Appreciation and

Dragon Boat challenge. We encourage more participation in volunteering or supporting those who volunteer.

- Lisa Ford has resigned her post as Secretary effective October 4 and Charlotte Katzen is passing the baton as Co-Chair. A notice will go out to all on distribution list regarding elections at the October 17<sup>th</sup> meeting.

**4. NEW: Update on Seniors Survey Meeting July 31**

Taz Esmail, Louis Brier, and Shelley Rivkin, Vice President, Planning, Allocations and Community Affairs of the Jewish Federation of Greater Vancouver came to Family Council to test out a survey aimed at identifying the emerging needs, in the lower mainland community, of those who are not yet of age to enter into seniors' residence or who may have a family member figuring out whether or not to transition to a seniors residence and what is important to them in making their decision on kind of institution.

**5. Companion Program Update**

- Final consent of the policies and procedures, fee structure and companion advisory committee is in the hands of Management. Time was spent by WCB on making a determination as to the "status" of a companion. They have concluded a companion is a Sole Proprietor for WCB purposes. We should see an updated P&P this fall and a companion advisory committee formed soon thereafter.

**6. Update from Nicole and Alex on ongoing matters:**

*Not presented at the meeting: With all issues, we'd like families to know the best outcomes will be working with the immediate team (care aide/nurse) first. We discussed families trying to get to know the care teams better, even if there may be different people from time to time. Just as families expect staff to treat their family member as an individual, with attentive care and compassion, families too can try using the same sense of respect (GPA approach) with staff to build relationships. SCU, apparently, has been consciously using this approach for some time now. The number of issues reaching Nicole and Alex have greatly lessened. The point is trying to reduce the size of the issue, by working with the immediate teams who are responsible. This is one way we can avert future issues of the same nature, take care of the problem quickly, as well as avoid making a mountain out of a mole hill. This frees up Nicole and Alex to work with really high-level challenges that need to take their time.*

**1. Hydration**

CNLs are ultimately responsible and use constant reminders & education to ensure care aides are acutely aware of the importance of hydration. It is part of the ADL. It is protocol. It is a

compliance issue, not lack of training, if there is a hydration issue. Food Services is working on the idea of water coolers throughout Louis Brier but, essentially, hydration is top of mind. If a family member does somehow recognize a resident needs hydration, then the immediate answer is to work with staff to resolve the issue.

## **2. Communication**

Whiteboards did not work

ADL - regular weekly reviews by care aides result in updated ADLs

Procedure:

- Weekly review by care aide results in a change required
- Care aide tells Jennifer or Romelan, (CNLs)
- They enter the change in the computer and print out a new ADL for posting

Not reading the ADL is a compliance issue. Care aides have been given direction to write on the ADL if a change needs to be made before the new one gets put up.

Families can help by writing on the ADL (name/date/the change) and advising their care aide to make the change in the system. \*\*Need for families to keep

## **3. Lost Personal Items**

Residents/Families sign a release form at time of admission which states LBHH is not responsible for lost or stolen items. However, loss due to staff negligence is not the same. There is constant communication and training about resident care as it relates to personal items. There is an investigation procedure for reports of lost/stolen items. Loss of items such as hearing aids or dentures due to carelessness considered for replacement by LBHH under their insurance and exceptions. Families are encouraged to use first level/front line staff for reporting lost items. Work with the unit level first. Help be part of the solution by looking into it with the team.

## **7. NEW: Unit Representatives**

- Discuss potential of FC with unit reps.
- Intent is to strengthen perspective of our feedback to SLT, to be more inclusive in suggestions, and reach all residents.
- Unit Reps would be responsible for bringing advances or challenges to FC meetings for discussion. From this input we can better determine priority items for SLT meetings.

## **8. LBHH Management Updates**

Julie Coleman, Volunteer Coordinator to attend an upcoming FC meeting

- Bob Menes, Chaplain, to attend our October meeting

9. **Not presented at the meeting: Accreditation Committee – September 30 – next meeting**

10. **Not presented at the meeting:**

**Senior Leadership Team (SLT) – Update on meeting August 6/September 11**

- Volunteer Coordinator line of reporting:

Megan = Quality and Risk Manager

The Volunteer Coordinator will report to her

- REHAB: Based on physio communication wheelchair fitting not to standard, benched in garden set too low/high risk, wheelchair maintenance/cleaning substandard being discussed in light of the price hike for wheelchair rental

- Continued discussion re: Food and Dining Room experience

- Informed of new recreation plan to discontinue large concerts and have a more robust small group and one on one program.

- Working with Sheila Kern, Executive Director of the Foundation regarding the environmental impact on dementia patients and the elderly, in general and, hopefully, leading to a fundraising initiative among families to help improve our public spaces

- New FC bulletin board soon coming to the lobby

- Meeting with SLT re: results of the LBHH survey Sept.24

- We ask FC to consider your attention to getting to know staff. For the first time, FC will be sending our nominations to the staff (including companions) recognition committee, take part in the review and select who shall receive an award from FC separate from the committee's choice. The details will be out in October and the awards sometime in December.

11. **Food and Dining Room Experience Committee – Update on Meeting (Sept. 19) -**

Michael put on a tour of the kitchen, presented the new menu schedule, new foods - Rachel will be do the cakes and desserts -Management will work on the process of reporting the quality and experience, and staff is now paying attention to the waste as an assessment tool for services.

12. **Family Council Communication Initiative**

- Family Council Information Communication is complete. Our introduction has gone out to families by way of snail mail with the August billing, email by Lunadel's list, Snider Schmooze and our own distribution list. As well, an updated Admissions package will have a specific communication from FC and the website will be updated

with a fresh communication on FC

**13. Information Desk/Awareness Initiative**

Sunday, September 29 – 10-noon

**14. Alzheimer's Climb and LBHH community fundraiser event/cancelled**

**15. Alzheimer's Association Presentation,**

- Life in Care. Thursday, October 3, 6pm-8pm, Weinberg classroom. Please RSVP Family Council [lb.familycouncil@gmail.com](mailto:lb.familycouncil@gmail.com)

**16. Next meeting date October 17 at 7:00pm**

**Attachments: VCH complaint form and policies, Strategic Plan and PowerPoint**