



# Snider Schmooze

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## A MESSAGE FROM DR. DAVID KESELMAN, CEO



### Hello and welcome to this edition of the Snider Schmooze!

As with previous editions, we are hoping to provide you with meaningful and relevant information. We are hoping to increase our reach to both internal and external stakeholders and while we hope to share, we also look forward to hearing from you, our reader. Share your ideas as to what you would like to see in the next editions of our Snider Schmooze and let us know what would be relevant.

With this in mind, I wanted to take the opportunity and highlight a number of important initiatives that will be taking place in the coming days. [November was identified as Violence Prevention month](#). An important element of violence prevention is raising awareness to the experience of violence, sign and symptoms, and how to manage, avoid, and eliminate violence in all aspect of our lives and especially at the work place. As an organization we are committed to provide our employees, residents and their families with a respectful, harassment and bullying free environment to help support the delivery of quality and safe care. If you have missed the many activities please do not hesitate to ask any of the staff for additional information.

Keeping this at the forefront, we are moving into the month of December and another important campaign is rolling hot off the press...we determined that [December is Infection Control month](#). Please watch out for the various activities and information that will be available throughout the month to help you and those around you to stay healthy and safe.

Sincerely,  
**Dr. David Keselman, CEO**

# DECEMBER IS INFECTION PREVENTION AND CONTROL (IPAC) MONTH

Since infection prevention and control within the Snider Campus is every individual's responsibility, we invite everyone to participate, learn and enjoy all activities in a month-long celebration which aims to:

- ✓ Develop hand hygiene as a habit, with a purpose
- ✓ Model a quality workplace through teamwork
- ✓ Promote vigilance in surveillance of infection for improvement
- ✓ Establish conscientiousness in proper use of personal protective equipment (PPE)

After all, IPAC's main goals are to prevent the development of new infections and to prevent the transfer of existing infections between residents, staff, family members, companions, volunteers and visitors.

Schedule of activities will be posted by the IPAC Committee. We enjoy everyone to learn about how we can contribute to make the Snider Campus a better place for everyone, while having fun!

**Lunadel Daclan**  
Infection Control Practitioner

## Let's Go Viral With PICNet

**As part of Louis Brier's commitment to provide exemplary care to our residents and their families,** management has appointed an Infection Control Practitioner (ICP) starting August of this year.

The ICP's main role is to plan, develop, implement, manage and evaluate infection prevention and control programs, with the intent of minimizing the risk of infectious disease for residents, staff, family members, companions, volunteers, and visitors. The ICP also acts as a liaison between LBHH and Vancouver Coastal Health regarding infection prevention and

control guidelines and also in cases of infectious disease outbreaks.



Recently, Louis Brier's ICP was invited by the BC Provincial Infection Control Network (PICNet) to sit in one of the committees which is the BC Hand Hygiene Communications Group. The theme they're currently working on is "Hand Hygiene in Residential Care". The group is coming out with new posters for the campaign and would feature two LBHH staff, **Sayuri Rae** and **Charles Ly-Tong**, as models. These posters will be displayed in LBHH once released by PICNet.

## RESIDENT & FAMILY CENTERED CARE

At the Louis Brier Home & Hospital we view residents and family members as integral parts of the care team.

We know that when families and residents are actively involved in care, this leads to better health outcomes, higher resident and family satisfaction, and greater staff morale.

We encourage residents and families to be involved in all aspects of care, including partnering in care planning, participating in a committee (please see below), involvement in resident and family councils, and providing feedback.

### WAYS TO BECOME INVOLVED

#### Attend Your Care Conference

Care conferences are held annually for all of our residents. The care conference is attended by the interdisciplinary care team and is an opportunity to discuss the care plan, identify areas that may require updating or change, and to address any concerns that residents and families may have.

#### Resident & Family Councils

Louis Brier has active resident and family councils. These councils provide a forum for advocacy, peer support, and education. For information about how to be involved in these councils please contact: Resident Council – **Edy Govorchin**, [egovorchin@louisbrier.com](mailto:egovorchin@louisbrier.com)  
For Family Council – **Tamara Guner**, [tamara.guner@gmail.com](mailto:tamara.guner@gmail.com)

#### Committee Membership

Louis Brier maintains a numbers of committee that are involved in the planning, implementation, and evaluation of our services. We invite resident and family representation on these committee as their input is essential to the work being carried out.

**The following committees are seeking family and resident participants:** Resident Safety Committee, Ethics Committee, Utilization Management Committee, Policies & Procedures Committee, Infection Control Committee

**JoAnne Fernando**, Manager, Quality and Risk

## VOLUNTEERS



*Hazel Miller, volunteering in the Shalom Garden.*

### The Surprising Benefits of Volunteering

We all know that volunteering is good for society. What about the benefits to the volunteers themselves? This topic has been studied and researched and the results reveal that volunteers reap many benefits.

**Volunteering – The happiness effect.** Helping others kindles happiness.

**Volunteers live longer and are healthier.** Older people who volunteer remain physically functional longer, have more robust psychological well-being, and live longer.\*

**Volunteering time makes you feel like you have more time.** Giving your time to others can make you feel more time affluent and less time-constrained than wasting your time, spending it on yourself, or even getting a windfall of free time.\*

**Volunteers establish strong relationships.** Working alongside people who feel as strongly as you do about supporting a particular cause creates a path to developing strong relationships with others.

**Volunteering empowers you and gives you a sense of purpose.** Volunteers choose to spend their time on issues they feel strongly about.

If you would like to discuss volunteering at the Snider Campus, please contact:

**Nomi Fenson**, Coordinator Volunteers Services  
[nfenson@louisbrier.com](mailto:nfenson@louisbrier.com) or 604-267-4736

*\*Excerpts from Mark Horoszowski: Next Avenue Contributor and Dawn C. Carr: Psychology Today March 12, 2014*

## SPECIAL ANNOUNCEMENTS

As you may know, a little while back and after more than 10 years, Dr. Eric Cadesky stepped down from his role as the Medical Coordinator for Louis Brier. Recognizing that the role of the Medical Coordinator is pivotal to the delivery of quality care to our residents and families, and support our staff, we were committed to fill the position with the right candidate. I am happy to announce that **Dr. Merrick Tosefsky** has agreed to step into the role of the Medical Coordinator for Louis Brier. You may have seen or even met Dr. Tosefsky through his work here at Louis Brier caring for some of our residents, he has been in family practice for 28 years, for much of the time worked in Coquitlam and as of 2014 has a private practice out of the Marpole Medical Clinic. The role of the Medical Coordinator is not foreign to him, as he was a Medical Coordinator at the Eagle Ridge Manor in Port Moody between 2004-2017. He is a clinical instructor at the department of Family Practice at UBC and is involved in numerous other exciting areas. He is joining the Louis Brier at an exciting time and amidst many changes to help us continue our journey on the path of quality improvement to help us become the centre of excellence for geriatric care. His official start day will be November 20th. We will share appropriate contact information after he has started and settled into his new role. Please join me in welcoming Dr. Tosefsky! - **David Keselman**

I am excited to inform you that **Phillipa Bartley** will be joining Louis Brier home and Hospital and Weinberg Residence in the role of Director of Human Resources. Phillipa will be joining us effective January 8th and brings with her a wealth of knowledge, experience, and education in the area of Human Resources. Her work experience spans through a wide range of organizations and most recently as Manager, Regional Human Resources Operations at WorkSafeBC. Phillipa holds a Master of Arts in Leadership degree from the Royal Roads University and is a Chartered Professional in Human Resources (CPHR). I am excited to welcome

Phillipa to our organization and join us at a pivotal time of growth, transition, and our journey of becoming a centre of excellence. Her contact information will be made available closer to her start date, although her office will be located on the 2nd floor in the Director of HR office.

Please join me to welcome her. - **David Keselman**

I am very pleased to announce our new temporary social worker **Manprit Chutai**. Manprit is a recent social work graduate who completed her BSW from Vancouver Island University (for those of you who have been in the building for awhile: one of Manprit's professors was our former social worker Louise Stern!). Manprit brings with her years of experience working in social services and is skilled in conflict resolution, counselling, and client advocacy. In her last position at the Elizabeth Fry Society, Manprit worked in a residential support program for women with substance abuse issues. We are very excited for Manprit to join us here at the Louis Brier. Her first day will be Wednesday, November 22. Manprit will be working out of the social work office across from the first floor dining room. We will be setting up her phone and email address this week and will send that contact information out shortly. Please join me in welcoming Manprit! - **JoAnne Fernando**



**Dr. Merrick Tosefsky**  
Medical Coordinator

**Manprit Chutai**  
Temporary Social Worker

**Phillipa Bartley**  
Director of Human Resources



## RESIDENT CARE

### MDS-RAI – The Foundation to Delivering Integrated Care

#### What is RAI-MDS (Resident Assessment Instrument)?

It is a standardized, research-based assessment tool mandated by the BC Ministry of Health in 2009.

It is designed to enhance resident care and promote the quality of resident's life. Each resident has an assessment completed every three months. Resident observed and assessed by the interdisciplinary team using MDS assessment.

Once it is documented in the computer software, the computer generates RAI Data that is submitted to the Canadian Institute of Health Information (CIHI). The RAI Data output is then used for benchmarking, quality improvement, performance measurement and other operational decisions.

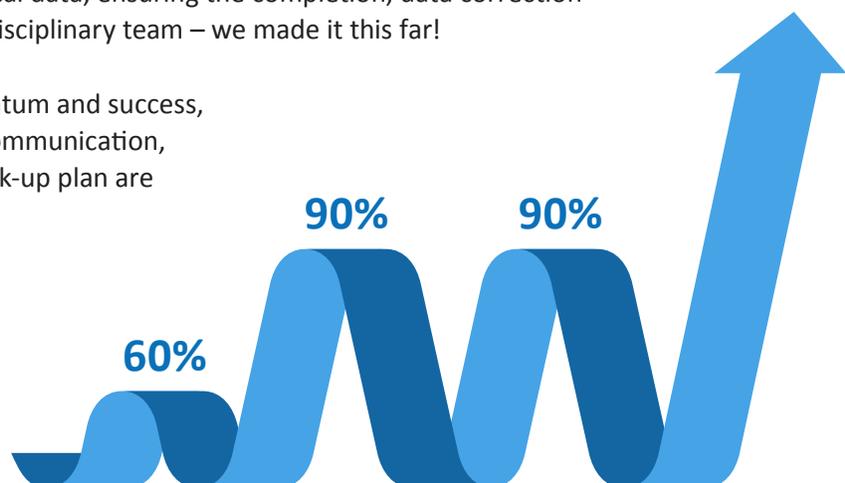


#### Soaring to Greater Heights

Louis Brier Home and Hospital has one of the highest completion rates among the residential care facilities under Vancouver Coastal Health.

From 60% in 2016, we have achieved 90% data submission and completion for two consecutive quarters of 2017. With the full commitment of the senior management and interdisciplinary teams – the massive roll out of MDS Education started January 2017, RAI Coordinator was put in place to oversee the cleaning of historical data, ensuring the completion, data correction and coding accuracy of the interdisciplinary team – we made it this far!

In an effort to sustain our momentum and success, teamwork is essential, efficient communication, standardized work flow and a back-up plan are in placed.



## RECREATION, CULTURE AND MUSIC THERAPY

### Commemorating Remembrance Day: The Veteran Photo Wall

In an effort to honour LB residents who are veterans and who served in the war (as soldier, in the resistance, or in other ways), Recreation Therapist Ginger Lerner has created a photographic installation of residents' personal and historical photographs.

The exhibit, the brainchild of companion Anna Oleksiak, is a montage of professionally copied and mounted photographs, is a moving and historical tribute.

If you or a resident you know would like to have a photograph as part of this display, we would be honoured to facilitate this as we are still accepting photographs.

The installation is located on the 2nd floor (in the east lounge) and will be there for an indefinite period of time.



For more information, please contact:

**Ginger Lerner**, Recreation Therapist  
glerner@louisbrier.com, x 4735

*\*All original photographs will be scanned and copied with the original returned to the owner immediately after the image is reproduced.*

## RESIDENT CARE

### Hypoglycemia Awareness

#### What is Hypoglycemia?

When the amount of blood glucose (sugar in your blood) has dropped below your target range (less than 4 mmol/L), it is called low blood glucose or hypoglycemia.

#### What are the signs/symptoms of Hypoglycemia?



If you are experiencing the signs of a low blood sugar level, check your blood sugar immediately. If you don't have your meter with you, treat the symptoms anyway. It is better to be safe.

#### How do I treat low blood glucose?

1. Eat or drink a fast-acting carbohydrate (15 grams)
2. Wait 10 - 15 min then test your blood sugar again. If it is still low (<4 mmol/l) then treat again.
3. If your next meal is more than one hour away, or you are going to be active, eat a snack. Wait 45 - 60 minutes before driving.



#### Fast Acting

1 tbs of Honey



#### Snack

1 slice bread and pb

#### Why is it important to treat low blood glucose?

If your blood glucose drops very low, you may need help from another person. Very low blood glucose can make you:

- Confused and disoriented
- Lose consciousness
- Have a seizure

References: Diabetes Canada. [www.diabetes.ca](http://www.diabetes.ca) accessed Nov 21, 2017

<http://guidelines.diabetes.ca/CDACPG/media/documents/patient-resources/lows-and-highs-blood-glucose-level-feb2014.pdf>

## CHANUKAH – THE JEWISH FESTIVAL OF LIGHTS

Every year between the end of November and the end of December, Jewish people around the world celebrate the holiday of Chanukah, the Festival of Lights.

Every year, Chanukah begins on the 25th day of the Hebrew month of Kislev, but the starting date on the western calendar varies from year to year. This year, Chanukah begins at nightfall on Tuesday, December 12 and ends after the last candles go out on Wednesday, December 20, 2017.

The holiday celebrates the events which took place over 2,300 years ago in the land of Judea, which is now Israel. The Syrian king Antiochus, ordered the Jewish people to reject their G-d, their religion, their customs and their beliefs and to worship Greek gods. There were some who did as they were told, but many refused. One who refused was Judah Maccabee.

Judah and his four brothers formed an army and chose as their name the word “Maccabee”, which means hammer. After three years of fighting, the Maccabees were finally successful in driving the Syrians out of Israel and reclaimed the Temple in Jerusalem. The Maccabees wanted to clean the building and to remove the symbols and statues. On the 25th day of the month of Kislev, the job was finished and the temple was rededicated.

When Judah and his followers finished cleaning the temple, they wanted to light the eternal light, known as the Ner Tamid, which is present in every Jewish house of worship. Once lit, the oil lamp should never be extinguished. However, only a tiny jug of oil was found with only enough oil for a single day. The oil lamp was filled and lit, then a miracle occurred as the tiny amount of oil stayed lit not for just one day, but for eight days. The holiday lasts for eight days to commemorate the miracle of the oil.

Every year, Jews round the world celebrate The Festival of the Lights, and the word Chanukah means “rededication.”

In North America, families celebrate Chanukah at home. They give and receive gifts, decorate the house, entertain friends and family, eat special foods (LATKES! and all good things fried in oil, including sufganiyot – amazing donuts), and light the holiday menorah.

At Louis Brier & Weinberg, we will be lighting the candles every day during Chanukah and celebrating throughout the week of Chanukah.

We hope that you will join us.

### Edy Govorchin

Leader Recreation, Culture,  
Music Therapy and Volunteers

### THE ANNUAL CAMPUS-WIDE CHANUKAH PARTY

**Sunday, December 17, 2017**

2:00 to 3:00pm

In The Homeside Lounge

Live Music By **SULAM**

**Why are there so many ways to spell Chanukah?**  
(Sixteen ways, actually!)

*Hanukkah, Chanukah, Hanukah, Hannukah,  
Chanuka, Chanukkah, Hanuka, Channukah,  
Chanukka, Hanukka, Hannuka, Hannukkah,  
Channuka, Xanuka, Hannukka, Channukkah,  
Channukka, Chanuqa*

While there are many different ways to spell Chanukah, we can all agree that it is a celebration of a miracle that took place long ago.

## GIFT SHOP



The Louis Brier Gift Shop is the “heart of the Home” for the residents. We make their day brighter and it brightens my day when I see them smile.

In the Gift Shop you will find loads of goodies – ice cream, chocolate bars, cookies, chips, drinks as well as sundries. We also carry scarves, shawls, pottery and numerous gift items.

We have contributed a number of necessities to the Home during my management such as:

- Mattress Pressure Map Sensors  
*\$11,200.00*
- Dishwasher And Installation  
*\$22,762.88*
- 25 Dining Room Chairs  
*\$8,000.00*
- Barbeque Grill  
*\$4,500.00*

Please stop by the Gift Shop for your goodies and say hello!

**Goldie**, Gift Shop Manager

## REDEVELOPMENT

The **Redevelopment Project team** has made significant headway over the past few months and has gathered a magnitude of evidence based information. This information and reports, which will help guide future planning and provide insight to the current operations.

The team is actively working on another key planning phase that will focus on the clinical service delivery. This phase will include analysis and consultation with experts on how to deliver leading-edge care in a state of the art future facility. The clinical planning phase will also identify which elements could potentially be implemented immediately.

The September 2017 Redevelopment Newsletter highlighted a number of reports that have been completed by subject matter experts. This comprehensive review of information will support recommendations and decisions for the future facility and also helps us improve our current facility. The newsletter also highlights exciting state of the art projects that we are learning from and partnering with as part of our continuous learning process. You can learn more about those projects by visiting their website.

Please pick up a copy of the September 2017 Redevelopment Newsletter for more information.

**Jeannie Dhaliwal**,  
Project Director Redevelopment

## LOUIS BRIER JEWISH AGED FOUNDATION

Visit the [Foundation website](http://thelouisbrierfoundation.com) for information on the services & programs made possible by your generosity. One-step donations are available.

[thelouisbrierfoundation.com](http://thelouisbrierfoundation.com)

## HEARTFELT GRATITUDE

### To All the Staff & Companions who supported Heidi Meyer,

We can't thank you enough for the care and attention you gave to our mother Heidi over the past few years. Throughout Mom's slow deterioration, your professionalism and great care made Mom's life comfortable and at times joyful.

We are grateful not only for the warmth you showed Mom, but for the smiles and patience you shared with us. The time you took to inform us and to be advocates for Mom was a generous gift.

We were very relieved to find a home for Mom where she could spend her last days so well cared for.

With heartfelt gratitude,

**Heidi's Family**

## THE LOUIS BRIER INTRANET

**Great news!** Our campus-wide Louis Brier Intranet will be launching very soon. All staff will be given their own personal login for access to all things Louis Brier. The intranet will be your new resource for both internal and external communications – ie. download forms, find education courses, access pay stubs and T4's, and to learn about the latest and greatest news relevant to our organization.

**Stay Tuned!**

## JEWISH SERVICE ORGANIZATIONS

### Linking you to local organizations that support our Jewish Community:

- Jewish Family Service Agency (JFSA)
- Jewish Seniors Alliance (JSA)
- L'Chaim Day Centre
- Jewish Federation
- Hadassah Wizo Chapter
- Kehila Seniors – Beth Tikvah Synagogue

## NO GUILT

### At the Louis Brier Jewish Home and Hospital, many suffer with different levels of memory loss (dementia).

The residents' capacity to receive (their desires) are limited to various degrees. Please also note that all our capacities to receive the light from the Creator are limited to various degrees but with the residents it may be a little more visible. In talking to some scholars when a resident at the facility attend a kiddush on the Sabbath, or listens and partakes with the blessing on the bread or attend a service even in part it is as if they have fulfilled all the requirements of the Sabbath. A person does not get judged for the bad he's going to do in the future, or for the good he's already done. They're benefited for the good they are going to doing right now, and for the good they are going to do in the future. It could be that right now someone is not so good, but they are given time for the good things to come. Time was created by Creator to apply Chesed, loving kindness for self-actualization/adjustment/earning the light by exercising our free chose.

This is because the nature of the Light is good (G-d is Good), and anything this person is going to do will benefit us all, collectively. We are all interconnected where time is not a factor.

We also should not take the all or nothing approach and realize that we do not get punished, unless you can call unfulfilled capacity as punishment and it may be fair to think that way. Unlike other religions/beliefs or philosophies when we do not perform something we may not receive a certain beneficial connection and that in itself is the sadness and many times self-imposed. However, we should focus on the merits of doing what we can and keep expanding ourselves (our vessel) to always do a little more.

The Jewish philosophy is not one of punishment or guilt only to keep striving to do good not only for themselves but for everyone else

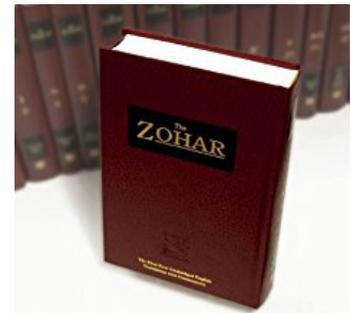
**Neil Simces**

## ZOHAR PORTIONS

### Zohar Portion – Vayishlach

*December 2nd:* In this week's portion, we continue the story of Jacob and Esau. Jacob fled from Esau after their fight because he knew that Esau wanted to kill him. But now, 22 years later, Jacob wants to make a connection with Esau, so he sent angels with presents to him. But the angels came back and reported that Esau didn't accept their message or their presents. So, Jacob gathered up his four wives, his cattle, and his possessions and went off to meet with Esau. On the way, he fell asleep and had a fight with an angel. We all have people in our lives that we don't like, or who are our enemies.

Why do we have these people in our lives, and why do we want them there? If a person really doesn't like me and I don't like them, and if they hurt me in my life, why do I have to be friends with them?



### Zohar Portion – Vayeshev

*December 9th:* Vayeshev means "settled," and refers to Jacob settling down, after what appears to be a very chaotic life. The concept of settling down is the essence of this portion, and it relates to us, not just Jacob. Look at Jacob's life - he stole the right of first-born from his brother, ran away so he wouldn't be killed, spent seven years working to marry Rachel, only to be tricked into marrying her sister, then he worked another 7 years for Rachel, had his brother chasing him, etc. FINALLY, he settled down. But the moment he does, there's turbulence. It's so obvious that this is all about us.

### Zohar Portion – Miketz

*December 16th, 5th day of Chanukah:* This week's portion is about Joseph who had the power to interpret dreams. He interpreted a dream for a man that became a minister to Pharaoh, and when the man was released from jail, Joseph asked him to remember that he had this talent, so that Pharaoh would release him from jail. But the man forgot, and Joseph remained in jail for two more years. It wasn't until Pharaoh had a dream that needed interpreting that the minister remembered Joseph and called him out of slavery. Of course, the Zohar tells us the meaning behind these events. The main essence of this portion makes us realize the illusions we have in our lives. The Zohar teaches that IT CAN NEVER BE THAT EVIL CAN WIN OVER GOOD. But illusion can make you think this is true.

### Zohar Portion – Vayigash

*December 23rd:* The Zohar explains that Vayigash (to come close) indicates to us that Yehuda is the Malchut, our physical world. He represents our vessel, us. Joseph is Ze'er Anpin, the provider, the upper world. Their closeness created a combination of these two worlds –receiving and sharing. We know that there are parallel universes in this world, this reminds us that our job is to put them together in harmony. And a connection of this nature – this type of combination - always involves conflict. This portion continues the story of what is happening with Joseph. Now we're at the point where Joseph's brothers come to Egypt to get food for their people, but they don't know Joseph is there, alive, or in the position he's in. Instead of revealing his identity, Joseph toys with his brothers a bit. Joseph's brother, Yehuda, keeps asking for food for his people, and Joseph keeps giving him these tasks to do. Finally, Yehuda can't take it anymore, so he approaches Joseph to talk to him.

Compiled by  
**Neil Simces**, [neil2@telus.net](mailto:neil2@telus.net)

*DISCLAIMER: The views expressed by Neil Simces are neither endorsed nor represents the views of the Louis Brier Home and Hospital.*



# ACCREDITATION CANADA

**November's Workplace Violence Prevention Month** sought to raise awareness around violence in the workplace and educate staff on strategies to develop a safe, respectful workplace. Prevention of workplace violence is a Required Organizational Practice (ROP) for Accreditation.

## Questions that you may have:

### What is the Required Organizational Practice related to Workplace Violence Prevention?

- ROP 2.10 of the Leadership Standard, requires the organization to have a documented and coordinated approach to prevent workplace violence is implemented.

### Why is this important?

- Workplace violence is more common in health care settings than in many other workplaces, with one-quarter of all incidents of workplace violence occurring at health services organizations. It is an issue that affects staff and health care providers across the health care system.
- Workplace violence is defined as follows: "incidents in which a person is threatened, abused, or assaulted in circumstances related to their work, including all forms of harassment, bullying, intimidation, physical threats, or assaults, robbery or other intrusive behaviours. These behaviours can originate from clients, co-workers, at any level of the organization".

### What are some of our standard systems / processes that support this ROP?

- Louis Brier has a Respectful Workplace policy and process to assist staff in dealing with incidents of workplace violence.
- Through our Purple Dot Campaign, we help staff to identify residents who are prone to aggressive response behaviours.
- The Louis Brier incident management system reviews workplace violence events and develops plans to prevent reoccurrence.

### What is your role in meeting this standard?

- Be in compliance with the internal responsibility process around incident management
- Ensure all training that is required is up to date.
- Comply with all policies and procedures related to Respectful Workplace
- Assist other staff who may need direction related to violence prevention

For more information about Accreditation or how you can become involved please contact **Angela Millar** at [amillar@louisbrier.com](mailto:amillar@louisbrier.com) or **JoAnne Fernando** at [jfernando@louisbrier.com](mailto:jfernando@louisbrier.com)





21 November 2017

David Feldman  
Home West, Room 22  
Louis Brier Home and Hospital

**RE: Response to letter sent to the Board outlining various issues at Louis Brier**

Dear David,

Below is a summary of the concerns that you outlined at the Board meeting that you attended in May 2017, as well as my responses to these concerns (in blue):

- a) **Jewish Traditions:** This is a home for the Jewish elderly, but we are too strict in our Jewish ways.

The Louis Brier Home and Hospital follows the Jewish Orthodox values and traditions, this has been in place for quite some time and continues to govern all of our activities. At this time a different direction is not considered for the organization, however this may be further discussed at the next round of strategic planning commencing 2018.

- b) **Mashgiach:** David raised questions as to the work the Mashgiach does. It is perceived that the function of the Mashgiach has a “police” approach to the job, and is too strict in how the role and the functions are enacted, i.e. people are afraid of him. There have also been instances where food has been served cold to residents as the Mashgiach has not been there.

The role of the Mashgiach is essential in our commitment to provide and comply with the requirements of BCK. Allowing non-Jewish people to turn on the oven will not meet the regulations and requirements of BCK and as such will not allow us to meet our commitment of serving kosher food. With this in mind as we review our strategic directions and goals for the next cycle, as well as review the structure and management of Food Services, the role of the Mashgiach will be reviewed and examined as well to ensure they are functioning within their scope and role within Food Services.

- c) **Food Suppliers:** Our food is provided by Omnitsky Kosher – David suggested that we shop around and find a variety of other suppliers.

We have explored alternative suppliers and sources for Kosher food, there are very limited sources and suppliers for Kosher food and those that can provide Kosher food are outside the province (QC and ON) and cannot guarantee delivery of food during inclement weather conditions. In addition, once the cost of transportation and delivery is added the cost of the food is not cheaper at all. We continue to explore other options and look for opportunities to reduce costs and improve quality. We are in the midst of reviewing our Food Services department and hoping to achieve increased effectiveness, efficiency, and above all quality and value.

- d) **Community:** This used to be a vibrant community. We now have a high occupancy of non-Jewish residents, as VCH appears to have the monopoly. The issue with this is that they tend to place unsuitable residents in LBHH, i.e. incognitive residents who are not aware of their surroundings or capable of conversation or interaction with other people.

We continue to maintain a Jewish majority in the organization, however these numbers fluctuate from time to time and are not consistent. It is true that we are bound to Vancouver Coastal Health's catchment area, however individuals from other areas are able to access Louis Brier, although not directly and mainly through being placed on the inter facility transfer wait list. VCH is very aware of our requirement to provide priority to Jewish individuals and are very cooperative in that respect. The population demographics is changing and over the last few years we are seeing a significant shift in those individuals who access residential care services, for the most part individuals arrive to residential care increasingly more fragile (health wise) and with increased complexity and compromised health status. Unfortunately we cannot decline individuals based on their cognitive status only, Jewish or non-Jewish. We do our best to support all residents by reaching out to the mental health team and working their family physicians, and families.

- e) **Kosher Food:** David asked that the kosher rule be revisited as many residents do not keep kosher, and this prevents them from having a better variety of food. He also advised that the presentation of the food was not desirable and the portion sizes were too big, causing a lot of waste.

Please see point B and C.

- f) **Synagogue:** We can never seem to have a minyan for services. David alleged that he once witnessed the Mashgiach wheel in a non-Jewish person to appear to have a minyan. There have also been instances whereby we don't have anybody to read the Torah on Saturdays.

We have reviewed and revised some of our processes, and have made a concerted effort to ensure that there is Minyan every day, we believe this has improved and has been consistent over the last few months.

- g) **Curtains:** David questioned how often the curtains are cleaned in residents' rooms, and when was the last time they were cleaned, as he suffers from COPD and believes it is aggravated by the curtains.

Curtains are washed and replaced at least once per year and more frequently should the need arise. We have recently implemented environmental rounds to help manage circumstances where the environment is not safe or meets the required standards for health care. We

encourage residents and families to alert us for any other conditions that may require additional attention especially if this is affecting their quality of life.

I hope this letter addresses all of your concerns and questions. Please be assured that we are always striving to ensure the best for our residents.

Best wishes,

A handwritten signature in black ink, appearing to read "D. Keselman". The signature is fluid and cursive, with a prominent initial "D" and a long, sweeping underline.

David Keselman  
*Chief Executive Officer*



# SICK TIME

## OUR SICK BANK IS PRECIOUS USE IT WISELY IF YOU ARE ILL OR INJURED

STAY HOME

DECREASE

ALTERNATIVES

AFTER 20  
UNPAID DAYS

55% OF YOUR  
SALARY

SHORT TERM  
DISABILITY  
INSURANCE

6 MONTHS  
WORTH

WHEN NOT  
TO USE  
SICK TIME

FULL TIME  
PERMANENT  
EMPLOYEES

PROOF  
OF ILLNESS



Stay home and seek medical attention when ill.



Every time you use a sick day, you decrease your sick hours bank.



Alternatives to sick time are outlined in your collective agreement.



After 20 unpaid days, you are responsible for paying your own benefits, which could be over \$400 a month.



If your sick bank is empty, Medical EI only covers 55% of your salary. It takes 28 days before you receive your first payment.



Your sick bank is your short term disability insurance and provides income during the long term disability qualifying period.



You need 6 months worth in your sick bank to pay you until long term disability kicks in. That can take over 5 years to earn!



When not to use sick time:  
• Time off to care for children and other loved ones  
• When vacation is not approved  
• Poor weather



Full time, permanent employees earn 1.5 days/month of sick time to a maximum of 18 days/year.  
• HSA: 1170 hrs (156 days)  
• BCNU: 1170 hrs (156 days)  
• HEU: 1170 hrs (156 days)



Proof of illness may be required.  
• BCNU: 3 days  
• HEU: due to excessive absenteeism, notable patterns and legitimacy of claim  
• HSA: employees who are absent may be required to prove sickness

