



Perley Rideau

The Perley and Rideau
Veterans' Health Centre

Family and Friends Council

Minutes of Meeting

April 16, 2015

Boardroom, 2nd Floor

7:00 PM

Attendees: Ray Bailey, Carolyn Young-Steinberg (PRVHC Staff Liaison), Joan Olinik, Vera Abercrombie, Jim LaPlante, Mark Bowman, George Leir, Fran Cordukes, Brenda Tobin, Doreen Rocque, Margaret Crossley, Mary Boutette, Brent Mersey, Maureen Mersey, Margaret Becker, Irene Diacos, Brent Timms, Lori Stuckless, Permjit Sandhu, Heather Moxley

Regrets: Akos Hoffer, Diana Hennessy

- 1) Welcome and Roundtable Introduction
- 2) Review and Approval of April 16th Agenda
 - a) Update requested for item 2 to reflect the correct date of March 19th, 2015 minutes.
 - b) Motion – Fran Cordukes
 - c) Seconded – Mark Bowman
 - d) Approved

Review and Approval of Minutes of the March 19th meeting.

 - a) Update requested to add Brent Mersey to the attendee list
 - b) Motion – Jim Laplante
 - c) Seconded – Brent Mersey
 - d) Approved
- 3) Report from PRVHC Management – Mary Boutette, PRVHC COO for Akos Hoffer, PRVHC CEO
 - a) Resident Quality Inspection, based on governance from the Ministry of Health and Long Term Care (MOHLTC). This was the second inspection under this mandate.
 - i) 5 inspectors for 10 days, randomly selected 40 residents who are interviewed or POA if appropriate. They looked at documents, physical care and all aspects of the resident's life at the Perley.
 - ii) Verbal feedback from the lead inspector, Lynne Duchesne, commented on positive change from her last visit 2.5 years ago, and also on the “beautiful” interactions between staff and the residents.

- iii) Received one Compliance Order from the list of Voluntary Compliance Orders, Written notifications, Compliance Order.
 - iv) Compliance Order – specifically related to management of responsive behaviours of one resident in particular. Action items include regular risk assessments available to staff, medications are reviewed, consultation with Royal Ottawa.
 - v) 3 Written Notifications about the same order
 - (1) Effective system for identifying bed effectiveness. In particular, short mattresses. All beds are being audited and replaced or adjusted as needed.
 - (2) A motorized wheel chair was not being cleaned. It was cleaned while the resident was sleeping and this will be done regularly.
 - (3) Formal documentation for process with lost laundry.
 - (4) Resident and Veterans council – any concerns raised are to be responded to in writing within 10 days beyond the verbal feedback provided. Minuted updates on meal and snack times.
 - (5) Decision tree for reporting to Ministry – determines when and how. One particular incident the inspector felt that a report should have noted a skin irritation that showed up after fall, even though some time had lapsed.
 - (6) Restraints – in one particular case the lap belt. The resident was being monitored appropriately, but it was not fully documented.
 - vi) Locks/access to areas that are not usually resident areas. If there is no door/lock there needs to be a call bell. There is currently a RFP being prepared for a full replacement of the call bell system. Likely a \$700-800K project and will take 2-3 years to fully complete. In the meantime there is a biweekly audit to ensure the current call bell system is being regularly maintained.
- b) Family and Friends Council meeting of February raised questions about the current process to access the complaints system and in general channels of communication. A project is underway to post the permanent staff on the units with name, contact information, role, a photograph, and what to contact the person about. A second phase will have similar information for the staff that may vary on the unit due to shifts. The same information should also be made available on the website. Also work happening with Bell to improve how the phone system can be made more effective.
 - c) News coverage – the change in the Veteran population and the planning the PRVHC is undertaking about the future. 250 of the 450 beds are for WWII and Korean Veterans. PRVHC has a long term commitment to veterans in general, including those after Korea. Also a long term commitment to Seniors and currently working with funding from the Local Health Integration Network (LHIN) to investigate options for the PRVHC to provide care for some Hospital patients that do not need full hospital care. On Wednesday, April 22nd at 5:00pm, Akos Hoffer, PRVHC CEO, will be hosting a Townhall with any family and friends who would like information about the planning process.
 - i) Question about whether a change to provide more convalescent care would it reduce the Long Term Care beds in the region. There have been discussions that are consistent with other Ministry and region efforts to upgrade LTC beds so it may be possible to transfer some of the LTC bed counts to other homes.
- 4) Lori Stuckless – director of Support Services, Chad Haffner is the Manager of Support Services, 2 fulltime Registered Dieticians, Food and Nutrition Supervisors in each building. The main kitchen is in the Perley centre building. Qualified food services staff is trained in safe food handling practices. Education for the positions include two year training at the college level.
- a) Permjit Sandhu, Registered Dietician
 - i) All new residents and family are interviewed to provide an initial assessment on their food and nutrition needs.

- ii) A preliminary diet plan is set up and monitored for the first week in particular and updated as needed.
 - iii) There are a number of standard diet plans – but it may be necessary to set a specific plan for more complex needs
 - iv) The dietitians follow all the more complex cases and the food and nutrition supervisors do quarterly reports on the others unless their needs change.
 - v) Referrals to the dietitians may come from the doctors, unit staff, the resident or family members
 - vi) All residents are weighed monthly and if there is more than a 5% change in one month, 7.5% change in 3 months or 10% change in 6 months there will be a specific follow-up to understand the underlying situation.
 - vii) The dietitians attend all initial care conferences and most annual care conferences
 - viii) Menu approval – original menu was developed quite a long time ago, but it has evolved to bring in different products or change items based on resident recommendation. New items are evaluated to understand which diets it can be added to.
 - ix) Meet with other dietitians in LTC on a quarterly basis.
- b) Resident Food Services
- i) 17 dining rooms
 - ii) \$7.85/resident/day for 3 meal and 3 snacks funding from MOHLTC
 - iii) Member of group purchasing – provides good prices/rebates based on commitments for one year as long as it meets the Perley needs.
 - iv) Standardized recipes – needed to manage costs and also for health/allergy reasons
 - v) Computerized menu software program – Computrition program.
 - vi) Strict control and Just in time inventory management. 2-3 days in specialized thaw / defrost units, prepare the food in the central kitchen and then served on the unit. The planning cycle is 10 days in advance.
 - vii) Ministry requirement to provide two choices at each meal. Also standard portion sizes are set up by the ministry. The quantity and foods that the resident consumes are recorded in Point Click Care.
 - viii) Cafeteria and Catering also part of the Food services program. The catering service provides 57 meals to tenants for breakfast, lunch and supper in the Commissionaire’s building attached to the Perley. In the Seniors Village, closer to Russell road, there is a menu of frozen meals available that is less expensive than meals on wheels. Catering services on site. The revenue generated is invested back into Perley operational budget. Families in the LTC units can use the frozen food option and heat it up in the unit microwaves. Lori had some copies of the catering services menus, and will be putting the same information up on the PRVHC website.
 - ix) Fresh fruit always available on the units – bananas, oranges, apples and other items seasonally. Any food that needs to be specially prepared (such as oranges sectioned) can be done as part of the regular snack cycle and labelled for the resident.
 - x) Fridges – residents can have fridges (small size) in their rooms, but they need to be inspected by the services team before installation. The operation and contents of the fridge are the responsibility of the resident and their family.
- 5) Family and Friends Discussion
- a) This standing item on the agenda is a confidential discussion family and friends on the quality of care provided to residents, unless otherwise noted.

- 6) Treasurer review of the March statement – there was no activity this month so the statement will be provided next month.
- 7) Report of the FFC Executive – there was no specific updates beyond those discussed throughout the meeting.
- 8) Adjournment – 8:35pm.