



Dec 2022

# Family Matters

## Family/Friends Council Newsletter

*"We celebrate life and living"*

Editor: Marilyn Colton

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## Quote of Note/Staff Appreciation/Fiddling

*"It is often the small steps, not the giant leaps, that bring about the most lasting change." Queen Elizabeth, II*

.....

Christmas 2022, FFC is showing our appreciation of all staff for their tireless efforts as they care for our loved ones 24/7.

I sincerely thank families for your individual gifting and for your donations and those of the business community so that we can demonstrate our appreciation to all staff. We have gifted poinsettia's, chocolates/cookies, and gift certificates to local restaurants.

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***Lucie and Wilson Lazarus, from Chapeau, PQ, will entertain residents and families on Dec 30, 2-3 pm in the foyer.... come and enjoy their fiddling and step dancing!***



## 'Twas the night before Christmas

'Twas the night before Christmas at Rock-Away Rest, And all of us seniors were looking our best.

~~~~~

Our glasses, how sparkly, our wrinkles, how merry: The punchbowl held prune juice plus three drops of sherry. A bed sock was taped to each walker, in hope

That Santa would bring us soft candy and soap. We surely were lucky to be there with friends, secure in this residence and in our Depends.

~\*~\*~\*~\*~\*~\*~\*

Our grandkids had sent us some Christmasy crafts, Like angels in snowsuits and penguins on rafts. The dental assistant had borrowed our teeth, And from them she'd crafted a holiday wreath The bed pans, so shiny, all stood in a row, reflecting our candles' magnificent glow.

~\*~\*~\*~\*~\*~\*~\*

Our supper so festive -- the joy wouldn't stop. T'was creamy warm oatmeal with sprinkles on top. Our salad was Jell-O, so jiggly and great, Then puree of fruitcake was spooned on each plate. The social director then had us play games, Like "Where Are You Living?" and "What Are Your Names?"

~\*~\*~\*~\*~\*~\*~\*

Old Grandfather Looper was feeling his oats, proclaiming that reindeer were nothing but goats. Our resident wand'rer was tied to her chair, in hopes that at bedtime she still would be there. Security lights on the new fallen snow made outdoors seem noon to the old folks below.

~\*~\*~\*~\*~\*~\*~\*

Then out on the porch there arose quite a clatter .....

(But we are so deaf that it just didn't matter). A strange little fellow flew in through the door, Then tripped on the sill and fell flat on the floor. 'Twas just our director, all toggled out in red. He jiggled and chuckled and patted each head. We knew from the way that he strutted and jived our social-security checks had arrived.

~\*~\*~\*~\*~\*~\*~\*

We sang -- how we sang -- in our monotone croak, Till the clock tinkled out its soft eight p.m. Stroke. And soon we were snuggling deep in our beds, while nurses

distributed nocturnal meds. And so ends our Christmas at Rock-Away Rest. Soon you'll be with us; we wish you the best!!!



## Family and Friends Council: Terms of Reference

**Name:** The Council name is 'Family and Friends Council' and reflects the inclusion of family and friends, as identified by the residents. 'Family' is defined by the resident not by genetics or law. A family/friend partner (FP) is self-identified and implies the engagement of family and friends in the Grove processes with accountability to the FFC.

For our loved ones living at the Grove, we care about:

- their sense of belonging;
- their safety and security;
- supporting their autonomy;
- respectful and dignified relationships; and,
- their care quality and quality of life

As the FFC, our values are: CHOICE

- **C**-compassion
- **H**-holistic approach
- **O**-open-minded
- **I**-integrity
- **C**-caring
- **E**-equity

**Our Vision:**

- Families, friends and residents are equal partners with the staff of the Home and, as such, are engaged in all aspects of resident's care and service through application of the *family/friend partner* concept. We envision resident and family voices and values facilitating decision-making processes throughout their home at the Grove.

**Our Mission:**

- To improve the care quality and quality of life for all residents by partnering with staff to facilitate an atmosphere of respect, collaboration, sensitivity, and, caring and support among staff, residents, family members, volunteers and friends.

**Our Philosophy:**

We believe:

- That a safe, secure and healthy environment for our residents is a main priority;
- That communication, which is complete, comprehensive and timely from staff to residents, families, volunteers and the larger community is essential to achieving quality experiences for all stakeholders.
- That each resident is entitled to care/service that meets their biopsychosocial, spiritual, intellectual and cultural needs and expectations;
- That care provided is based on individual needs taking into account previous lifestyle and the right to independence and self-determination for as long as possible;
- That care and services are provided by an interdisciplinary/interservice team of qualified and caring staff in addition to volunteers, family members, friends and community partners;
- That residents, family members and friends are actively involved, as equal partners, in decisions that affect the resident's care/service;
- That meaningful connections with the local community are essential to each resident's quality of life;
- That residents/families have choices related to the end-of-life with the right to indicate their preferences through advanced care planning and directives, and that they are provided support and comfort through the dying process;



- That the residents and families are the best judges of quality care and quality of life as measured through resident experience and family/friends experience;
- That participation in research opportunities to enhance quality of life for our residents reflects a commitment to quality, enhances our reputation, and fosters community support.

### **Our Responsibilities and Opportunities as FP's and FFC:**

- To inform and educate families and friends, residents, staff, and the community at large;
- To foster open lines of communication between residents, families, volunteers, friends, staff and the broader community;
- To advocate for resident's quality of care and quality of life on behalf of residents, families, friends and the community served;
- To provide feedback on, and ideas for, initiatives and programming with the potential for enhancing the person-centred model of care;
- To promote a positive attitude toward aging and the role of resident's families as essential caregivers;
- To welcome new families and friends and to assist with their orientation to the Home;
- To advise on potential quality improvement initiatives;
- To advance resident and family/friends engagement in decision-making;
- To engage in fund-raising, as appropriate, to support the residents' quality of life; and,
- To advocate for positive change within the LTC system.



### **Membership:**

Members of the FFC are all family members and friends of those currently living at the Grove, or of those who previously lived there, as well as those persons with Power of Attorney.

A chair and co-chair are nominated or self-identified. Their role is to facilitate the *Family/Friend Partner* concept\*\* including the quarterly sharing of partner

activities, improvements realized and outcomes achieved and to act as the primary contacts for the Grove leadership team.

**Meetings:** Quarterly beginning in 2023 (**Jan 10/April 5/July 5/ Oct 4**) and when the majority of families request one and/or there is an urgent need and desire for group discussion.

Approved February 2022

## Accreditation 2022: Report

Accreditation 2022 condensed report captures comments and evidence noted when our surveyor was on site at The Grove, in September of this year. While we continue to celebrate our Exemplary status, we also continue to improve quality every single day. We have already begun gathering evidence for our toolkit in preparation for our 2026 survey. The best way to ensure standards are met and quality is being monitored accurately is to be intentional every day. We will launch our accreditation teams for 2026 early in the new year. We would love to have more families and residents involved in the process. Please let me know if you have any questions or if you would like to be part of our accreditation team 2026.

Please see the condensed report under separate cover.

\*\*\*\*\*



...to residents, families,

family partners, volunteers, staff and our community from the *Family and Friends Council!*

If you look for me at Christmas,  
You won't need a special star.  
I'm no longer just in Bethlehem,  
I'm right there where you are.

You may not be aware of me  
 Amid the celebrations.  
 You'll have to look beyond the stores  
 And all the decorations.

But if you take a moment  
 From your list of things to do  
 And listen to your heart, you'll find  
 I'm waiting there for you.

You're the one I want to be with,  
 You're the reason that I came,  
 And you'll find me in the stillness  
 As I'm whispering your name.

Love, Jesus

## Meet the Food Services Team!

### Manager of Food Services

**Christina Carnegie**

Christina is responsible for managing Food Service operations at the Grove, the Arnprior Hospital and ancillary food services.

Christina is directly involved in all aspects of food service operations with specific focus on the development and maintenance of the budget, contracts, staffing, menu planning, food service policies/procedures, and compliance to food service regulations. She implements quality and engagement initiatives, program evaluation and process improvement activities.

*Christina is at the Grove 2 days a week (Monday and Wednesday)*

### Dietitian

**Michele Mylrea**

As the Dietitian, families may direct any diet, texture, fluid consistency or intake concerns to Michele. Michele works closely with the health care team including Physicians, Nurses, PSWs and Food Service staff. She is responsible for developing individualized interventions, assessments, and maintaining nutrition care plans for all residents. Michele is a key member of weekly Resident Assessment



Protocol meetings in which health care professionals review assessment results and care planning needs with stakeholders. She is also involved in menu planning activities, policy development, and quality initiatives. As a Dietitian, Michele can write or change diet orders which are entered into the resident care plan.

Information is then passed on to the Dietary staff.

*Michele is at the Grove 2 days a week (Wednesday and Friday)*

### **Food Service Supervisor**

*Ashley Angel*

As the Food Service Supervisor, Ashley is the go-to for families who have meal service-related questions.

Ashley maintains the flow of communication by ensuring resident changes are updated on relevant forms used by staff and communicated. She facilitates Food for Thought Meetings with residents and families to plan themed meals and address any concerns, or suggestions. She facilitates weekly dining room meetings with staff, residents, and families to identify any issues related to the seating plan.

She meets with residents to obtain food preferences. Ashley is also responsible for maintaining the production system, purchasing in accordance with the menu and compliance to food service regulations.

*Ashley is at the Grove 3 days a week (Tuesday, Wednesday, and Thursday)*

### **Cooks**

Cooks are required to have a Cook Certificate and a current Food Handler Certificate.

Operating out of the central production kitchen, Cooks prepare food in accordance with standardized recipes, therapeutic guidelines, IDDSI textures, individualized resident preferences and care planned interventions.

Food is prepared in food bulk following production sheet numbers, then cold plate food when the orders are received. In addition to preparing meals for residents, Cooks also provides meals to external clients including Adult Day Program and Community Meals on Wheels clients. Cooks do a great job accommodating many preferences to meet the needs of residents.

### **Dietary Aides**

Dietary Aides must have completed or be in the process of completing their Food Service Worker Certificate and have a current Food Handler Certificate.

Dietary Aides work out of resident home area serveries for the duration of their shift, to be available to residents. They maintain great relationships with residents and families. They are responsible to ensure all residents are provided with the resident chosen meal in accordance with diet, texture, fluid consistency, adaptive aides, portion size, care planned interventions and individualized preferences. Their work requires concentration at mealtime as they direct the flow of service. Meal orders for lunch and supper are taken in advance using show plates when Dietary Aides pass out the nourishment cart. (10:00 a.m. & 2:00 p.m.) After the orders are taken, Dietary Aides go to the central production kitchen to provide the Cook with the orders verifying the plated meal. Plated meals are racked and stored in the refrigerator until mealtime where they are placed into the programmed combi-oven. Dietary Aide responsibilities include maintaining information for accuracy, engaging residents to help with tasks that they are interested in (i.e.: setting tables, folding linens) following infection prevention and control measures and participating in continuous improvement initiatives. Dietary Aides relay resident feedback back to the Cooks, Supervisor, Dietitian and Manager as applicable. They are key members of the front-line interservice team providing exceptional care and services.

Hours of Operation for Service Delivery: 8:00 a.m.-7 pm

## Person Centred Care Simplified

Person-centred care is a way of thinking and doing things where residents and families are seen as equal partners in assessing, planning, implementing and evaluating resident care/service. This means putting residents and their families at the centre of decision-making and valuing them as experts in their own health and life experiences as they too value the staff expertise so that optimal outcomes are achieved.

In simplifying PCC, I will describe 7 principles.

1. Respect for resident preferences: Beginning at move-in, the resident and family must be given the necessary information to be able to make thoughtful decisions about their care, their activities, their involvement in the Home, etc. The staff expertise should complement and enhance the resident's perspective.
2. Coordination and Integration of Care: Care and resident experience must be considered as an integrated whole with providers from every

department/service working in concert with the resident/family to achieve the resident's goals for care and for healthful and enjoyable living.

3. Information and Education: When residents and families are fully informed and given the trust and respect that comes with the sharing of all relevant facts, they will feel more empowered to take responsibility for the aspects of care/service that are within their control.
4. Physical Comfort: Staff must always ensure that the details of the resident's environment are in line with their needs and preferences. Residents must always feel safe, secure and as comfortable as possible surrounded by people with whom they have built, and continue to build, relationships.
5. Emotional Support: Practicing PCC means recognizing the resident as a whole person, having a multi-dimensional human experience, eager for knowledge and human connection and who may need support and encouraged independence in activities of daily living.
6. Involvement of family and friends: Life does not exist in a vacuum. Residents must be involved and integrated with their family and friends and their local community. Within the culture of PCC, staff get to know the resident's life prior to move-in so that relationships can be nurtured, activities planned appropriately, and basic preferences respected.
7. Continuity and transition: A transition from one level of care to the next should be as fluid and seamless as possible. Residents and their families must be well informed about care processes and expected outcomes. The staff must understand fully the resident/family advance directives and their expectations regarding dignity and symptom relief and what is medically appropriate.

**The bottom line:** PCC is about considering resident/family desires, values, family situations, social circumstances and lifestyles. It is about staff seeing the resident as an individual and relating to that person and family as equal partners who share the same goal, a celebration of life and living.

Contact Marilyn Colton or Faith Black for more info.



## Alzheimer's Month: January

By understanding what people living with dementia experience in their day-to-day-lives – their struggles, their successes and their hopes – together we can raise awareness of dementia throughout Canada.

Awareness is the first step to **fighting stigma**, **reinforcing human rights** and **pushing for policy change**, as well as other actions that can lift up Canadians living with dementia.



## FFC/Recreation Meeting

November 17, 2022

**Participants:** Craig Beattie, Michelle Tilley, Jennifer Theron, Audrey Edwards

**Purpose:** Follow up on issues raised by FFC pertaining to the Recreation Program.

1. The possibility of providing a wider variety of offerings on the community televisions was discussed. Suggestions included Hallmark Christmas movies, hockey games etc. It was noted there has been a change in cable services and some channels may not be available. Audrey will look into getting additional channels e.g. one resident has requested the Disney channel. She will also be looking into getting audio books and different types of music, particularly during palliative care.
2. A more holistic and rigorous approach to capturing resident's individual recreation and social needs and preferences was discussed. The "All About Me" form does not capture things like important life celebrations, traumas, achievements etc. Audrey noted this information would be better captured in an interview resulting in a fulsome recreation assessment to be kept with the resident's file and then distilled down to a one page profile which could be posted in the resident's room. While the "All About Me" form is posted in some resident's rooms, it is not in all. Some families do not fill in this form. It was suggested that the 6-week review meeting would be a better time to review social and recreational needs. Jenn to provide the Extendicare Recreation form to Craig and Michelle for review.

3. Jen and Audrey review activity/event participation statistics monthly. This information to be reviewed with the family programming committee going forward. No family members attended the initial meeting. An alternate time to facilitate greater participation and input to the recreation program to be identified. FCC to poll members for more suitable times. Residents do provide input into programming but it has been limited to only a few individuals. More informal approaches will be explored to increase resident input. Residents are enjoying the recent increase in outings.
4. There is a desire to provide recreational programming on holidays and increase it on week-ends. The Grove is not currently funded to provide programming on holidays. Jenn is working on establishing additional casual recreation positions.
5. Move to the new building has resulted in some challenges to provision of programming. For example, while residents *can* attend activities in all 3 resident areas, they rarely leave the areas they live in. PSWs to be encouraged to help out with rec programs e.g. portering. Families also can be asked to assist with recreation activities. Currently there is one volunteer who has been very helpful in this area. It was noted that the process of becoming a “volunteer” can dissuade some community members who might otherwise be interested.
6. A resident is now permitted to identify an unlimited number of essential caregivers. This to be confirmed by Jenn.
7. Will look into opportunities for residents to help with daily tasks around the home, for example. meal logistics, mail delivery, laundry.
8. Possibility of having staff shadow recreation staff in other homes was discussed. This is a challenge as time away shadowing elsewhere means fewer staff delivering programs.
9. Ability to have more dynamic recreation calendars was discussed. Calendars were sent to families, but there were some issues with being able to access them. Saving calendars as pdf files should rectify the issue. Craig has offered to provide technical assistance to improve use of and access to calendars. In the meantime, Jenn is working on getting a Facebook page set up for the Grove recreation program.
10. Progress on having more active involvement of recreation staff during Care Conferences is being made and will be tested out next week during a number of scheduled conferences.

## Greetings from Janice Dunn

Dear Family and Friends,

It is beginning to look a lot like Christmas here at The Grove. For those that have visited recently, you will know what I mean. Staff and Residents have participated in the ARH Hospital and Grove activities all week. Today we are judging "Gingerbread Houses" and staff are dressed in plaid. With snow in the air (literally) the excitement is building. Residents are enjoying the hustle and bustle of activity in the home. Organizations within the community have dropped off poinsettias and various items so that all Residents will receive gifts on Christmas morning.



With 2023 fast approaching, the team at The Grove are finalizing the strategic priorities and plans for the upcoming year. We are so grateful for the partnership and support that continues to grow with Family and Friends. Thank you for your generous Christmas contributions for the staff gift card draws that will be happening next week. We appreciate your contributions of time and investment and look forward to a great year ahead, as we work together.

I want to take the opportunity both personally and on behalf of all staff at The Grove, to wish you and yours a wonderful Christmas and a happy, healthy New Year.

Merry Christmas to all,  
Janice

## FFC/Leadership Team Meeting

November 8/22, 4:30-5:30 pm, Grove Meeting room

Participants: Michelle Tilley, Craig Beattie, Janice Dunn, Angie Fraser, Jennifer Theron, Marilyn Colton



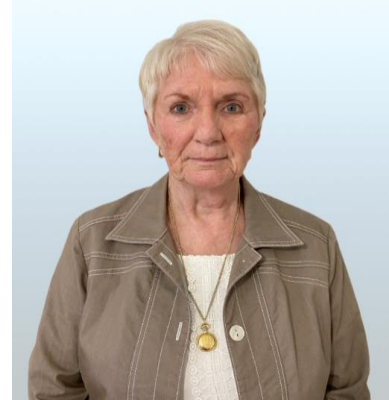
### **Purpose: Follow up on Sept 2022 video conference with FFC**

1. **Documents available to FFC:** The Home has a Staffing Plan, which is accessible to FFC, and an HR plan that sets out the HR objectives. The HR consultant did not provide a formal report. Rather, she provided recommendations for a number of recruitment initiatives, including 12 hour shifts and temp 1 year FT positions, that have been successfully filled. Ongoing recruitment through Willis College and Algonquin College have also been of benefit. The accreditation report 2022 will be shared when available.
2. **Person-centred care (PCC) Implementation Team:** The leadership team is in favour of creating a PCC Implementation team. In the interim, the chair, FFC, will share a PCC 1 hour presentation (virtually) with the leadership team and then with front-line staff (reduced time) per schedules that are accommodating to the leaders and to the staff. The presentation is being offered to families in November (3 dates) via jitsi video conferencing. The PCC Implementation team will be established subsequent to the PCC presentations. The initial focus of the team will be on the evaluation of the current state of PCC, identification of areas for improvement, identification and actioning of steps to achieve the desired outcomes and ongoing monitoring of our progress. Managers are attending PCC education through AdvantAge Ontario.  
(Additional Note):  
AdvantAge Ontario (JD is a member) is interested in our presenting at their 2023 Convention on the topic “Emotion-focused and social living environment”. Such could be a joint presentation by M. Colton and J. Dunn. MC/JD will prepare a proposal for submission by Nov 25/22 deadline. There is the potential for this event to enhance the visibility of the Grove with positive effects on staff recruitment and retention, family/resident applications to the Home, provincial networking, ministry connections and the Grove’s reputation.
3. **Resolution of Family Issues:** M. Colton to prepare a list of common questions families have and Angie will identify the appropriate staff resource(s). This info will be included in the Dec newsletter, *Family Matters*. Families are encouraged to speak directly to the appropriate resource relative to any issue; however, if reluctant to do so, families can add an anonymous note to the box at the front desk. It is noteworthy that

family members do not contact FFC or the FFC chair re issues of resident care or concern unless such issues represent a trend over time.

4. **Resident/family Care Conferences:** It was noted that the LTCH Act requires interdisciplinary care conferencing. It was also noted that while all areas provide written assessment for their area, personal attendance at the conference is challenging. This is due to the need to respect the physician's availability and the fact that some areas, e.g., dieticians and physiotherapists are not on-site full-time. The managers will work toward ensuring recreation staff attend each care conference, even if for a limited time. For those areas where direct participation in the care conference is not possible concerns will be forwarded to the appropriate manager who will personally follow-up with the family member.
5. **Quality of Care/Quality of Life:** The Home now has a Physiotherapist and a Physio Assistant providing contractual services. The ministry has required each LTCH to provide 3 hrs of direct care per resident per day, as of March 2022, with an increase yearly to the goal of 4 hrs/r/d by 2025. The PCC Implementation team will be well positioned to review and monitor how this is measured and our progress in meeting the targets established by the ministry.
6. **Staff assistant to FFC chair:** The role of the staff assistant, as per the LTCH Act, is to promote the Family and Friends Council at every opportunity and to support the FFC chair. In doing so, effective and efficient communication with the chair is essential. Angie agreed to check recent move-ins regarding contact info referrals to the chair, FFC.
7. **FFC Bulletin Board:** The board will be placed in the foyer across from the elevators within the next few weeks. Please check the board for meeting minutes and other key info for families. The board is especially important for those families who do not have email access.
8. **On behalf of all residents and families, our administrator, Janice Dunn, was asked to advocate with the ARH Board and CEO to change the name of the Grove from the Grove Nursing Home to the Grove Home on all signage.** The intent is to reflect the Person-centred culture and social model of care within the Home of our residents ('nursing home' terminology is institutional and reflects the medical model).

As families and friends of the residents, we have a voice in their home and directly to the leadership team. Through this voice, we are partnering with all staff to establish the vision of the home, consistent with a family-centric and resident-centric culture, and to ensure that everyone including staff, residents, families and volunteers, see themselves in that vision. According to Family Councils Ontario, diverse and empowering means of family engagement are preferred. As families and friends of the residents, we are collectively empowered to have our voices heard in the operation of the home of our loved ones and in the improvement in resident care/service.



Currently, the following Family Partners (FP) are advocating for all residents and families through direct collaboration with staff:

**Quality Committee:** Theresa Whitwell [whitwell\\_theresa@hotmail.com](mailto:whitwell_theresa@hotmail.com) and Terry McCormick and Marilyn Colton [mcolton@explornet.com](mailto:mcolton@explornet.com)

**Orientation of new families:** vacant

**Renovation to the former Grove building:** Susan Reid [susan.reidheurter@gmail.com](mailto:susan.reidheurter@gmail.com)

**Policy/practice development/revision:** Residents' Council/Marilyn Colton

**Falls Prevention:** Bernie Culhane [bculhane18@gmail.com](mailto:bculhane18@gmail.com)

**Continence Team:** vacant

**Pain Management:** Melba Cavanagh [melbacavanagh@outlook.com](mailto:melbacavanagh@outlook.com) and Connie Legg [connie.legg@hotmail.com](mailto:connie.legg@hotmail.com)

**Food for Thought committee:** Bill Thompson and Marjorie Kelly [marjoriekelly55@hotmail.com](mailto:marjoriekelly55@hotmail.com)

**Skin/Wound Care:** Ann Fuisz [amfuisz@gmail.com](mailto:amfuisz@gmail.com)

**Responsive Behaviours team:** Jennifer MacElwee [jlmacelwee@gmail.com](mailto:jlmacelwee@gmail.com)

**Recreation Services:** Melba Cavanagh [melbacavanagh@outlook.com](mailto:melbacavanagh@outlook.com)  
and Craig Beattie [mistahbt@gmail.com](mailto:mistahbt@gmail.com)

**Human Resource Management including hiring panels:** Michelle Tilley  
[mtilley273@gmail.com](mailto:mtilley273@gmail.com)

**Palliative Care:** Connie Legg

We strongly encourage other family members to self-identify in the above areas, according to your interest and availability, as well as to provide relief when one of the above partners is unavailable.

## Contact

**Do you have suggestions for content? Do you have something to share? Feel free to contact the editor, Marilyn Colton, at [mcolton@xplornet.com](mailto:mcolton@xplornet.com) or Faith Black co-chair, FFC, [faithblack10@gmail.com](mailto:faithblack10@gmail.com)**