GLEN STOR DUN LODGE
Family Council
Wednesday, June 11th, 2025
1:30 p.m. (Location: GSDL Library & Virtual)
- MEETING MINUTES -

Attendance: Heather Lariviere, Monique Lapierre, Frances Whaley, Aline Gareau, Michel Beaudin, Trudy King-Brazeau, Brian Leroux, Linda Blanchard, Tony Rossini, Frank Allard
Staff Liaison: Shelby McLean
Chair of Meeting: Alison Bateman
Invited Guest: Cathy Fisher
Regrets: Luc Guindon, Helene Cousineau (resigned), Carole Snider, Brigitte Lefebvre Malyon, Julie Lefebvre

ITEMS	*POINTS BROUGHT OUT*	*ACTION*
Motion to begin meeting	***All in favour***	
1. Approval of Agenda	Approved by Linda and seconded by Brian	
2. Approval of Minutes from April 9th	Approved by Heather and seconded by Linda Completed round table introduction of new members. New members to sign confidentiality forms.	Shelby to print forms and have member's sign.
3. Business Arising from Minutes		
a. Responses from concern forms	Concern: Temperature in tearoom is cold when food served (noted today for the fish), and specifically during Mother's Day event. Potatoes are uncooked in the potato salad (on-going issue and other complaints have been made wit no response or change), and carrots undercooked (specifically noted today May 14th. Always the same cookies being given during programs in the tearoom, can new cookie be given and have more of a rotation/variety. Responses from Alyssa (food service manager): - Homemade potato salad will be removed and will start to bring in a pre-made potato salad for consistency. - An assortment of cookies have been purchased for rec programming. - I have implemented a mid-service temperature check in the tearoom to ensure palatable temperature. Lids will also remain on the food while there are no customers. - I've adjusted the cooking times in the vegetable recipes to cook longer.	No complaints to be added. FC Chair asked that any on-going concerns be brought forward at next meeting in September.

	Concern: Is a sign able to be posted as a reminder to all staff of no phone on the floors. Can we add an on-duty white board sign at the PSW stations, and reinforce the nurses use theirs as well. Response for "Getting to know me" sign, if it will be implemented and a timeframe. Responses from Cathy: - White boards have been ordered for each home area. Great suggestion thank you. - We will remind staff at our town hall meeting this month. - We cannot commit to getting to know me yet we want to discuss with Resident Council. Concern: When is the deadline for the CQI to be posted, the last one was posted March 2024, when will the 2025 one come out? What is the timeline for the minutes to be available online. Can the organizational chart and manager email contacts also be available online. Responses from Cathy (Administrator): - Thank you we have asked for this years QIP to be posted under Public Reports on our Website.	Minutes are now posted online under Family Council Minutes. Manager emails already linked on website under About the Lodge – Management and/or Obtain Information, Raise concerns, Lodge a Complaint – who to contact Organizational chart will not be posted as it is provided upon admission.
b. Review proactive inspection by MOLTC from April 2025	Cathy reviewed report: Written Notification 1 – Resident and Family/Caregiver Experience Survey →the home completed the survey but failed to share the working plan with Resident Council. This has been corrected and will not be missed this year.	

	Written Notification 2 & 3 Powers of Residents' Council/Family Council →The home failed to respond to concerns in the minutes. This process has been resolved with the new form for Family Council and Resident Council to submit. Written Notification 4 & 5 Air temperature →two home areas were not being logged and two common areas were above 26. A comment log has now been put in place so the maintenance team will document what immediate actions are taken. Written Notification 6 General Requirements →The home did not have a staffing plan. Staffing plan has since been implemented. Written Notification 7 Infection prevention and control program →Staff were not donning the appropriate PPE. Re-education provided to the specific staff. Written Notification 8 Annual evaluation →Missing the Medical Director and Dietitian during the annual evaluation of the home's medication management system for 2024. This has been corrected to ensure they are present at the Professional Advisory Committee meetings to meet compliance. Overall, the Ministry also commended us on the kindness of our staff.	
c. FCM had asked Kristen for what legislation is being used by GSDL to bypass RN being in the building 24/7.	FCM stated this question has been an ongoing concern with no response. Cathy explained charge duty becomes different when Agency RN is in the building they cannot take on charge duty but thy are still an RN in the building and one of our RPNs can be charge. Cathy provided reassurance an RN has always been in the building since she started. Cathy explained two RNs are scheduled for every shift, although cannot speak to the past apologize on behalf of the home if this situation did arise.	

4. New Business		
a.	Waiting on the report from MOLTC from January 15th. FCM asked if Cathy had surprises coming into the Home. Cathy shared she researched the home before coming and looked at previous inspections. Cathy stated you can only gauge the culture of the home once you arrive, Cathy has no regrets joining the GSDL team. Cathy shared she grew up in Dundas close to McMaster. She has been in LTC for 25 years, Including working for the City of Hamilton, Peele Region and most recently head hunted for Athens. Cathy currently drives from the other side of Brockville. Question from FCM regarding the Annual Reconciliation report (ARR). Cathy is still inquiring with Lisa to see how it will be shared. FCM stated CQI is very similar to 2023. Cathy stated they want to make changes slowly and want to set attainable goals. Antipsychotic use and falls increasing unrealistic to add large changs after only been at the home for 2 weeks before the CQI was due. Working on aligning with the doctors to be a least restraint home. Will continue to come to Family Council when introducing large changes to the home such as least restraints, beds positioning in rooms, falls, etc. FCM questioning why EKG and bladder scanner still un-used. Cathy explained there have been many changes in leadership leading to inconsistencies. Staff have been trained on the bladder scanner.	Cathy has received this report and will see why it is not posted.

b. Cathy to address Family Council	FCM questioned why so many nursing barriers why not train the trainer? Cathy explained currently staffing levels are too low to pull for additional training. Cathy addressed family concerns about staffing levels. Cathy explained the minimum staff is two PSW per home area, 1 RPN per floor and 1 RN in the building. The ideal staffing levels are 4 PSWs and 1 RPN per home area and 2 RNs in the building. We have prebooked agency for the summer to allow summer vacations, we are now working on staff call-ins. There are additional floats scheduled every weekend. The nurse is expected to be an additional support to staff when only 2 PSWs are on the home area and the nurse needs to be out on the floor. FCM questioned what occurs when one home area has 4 male staff of the same ethnicity. Cathy explained it is the Resident home first and a workplace second. The ideal would be one of everything to provide harmonious care however this is not the case, we do the best we can, and staff can be pulled from another unit as needed to provide care. FCM commented that sometimes accents can be a barrier to care as well. Cathy explained all staff take a written and verbal test, so all staff can speak English. Will continue to work on cultural beliefs perceptions, provide education and diverse programs. Cathy expressed appreciation being invited to the meeting and informed Family Council Shelby will no longer be the secretary as it is not her roll and wants the Council to function independently. Cathy explained she is happy to be invited to every meeting to share directly and answer questions.	Family council to invite Cathy as needed but will not have open invitation at this time. Linda agreed to be secretary, all in favour.

c. Getting to know me form	Getting to know me form will be taken on by recreation. An email will be going out to all families if they would like to provide the information. Cathy is currently sourcing the frames to have the form displayed outside of every room.	
d. Information sheet	Information sheet has been laminated and posted in every resident closet. It was placed in the closet to follow PHIPA regulations. If families want the sign posted in the bathroom it needs to be care planed.	
5. Other		
a. Tearoom	FCM asking when tearoom will be open in the evening.	To be discussed when new Food and Nutrition Manager begins, Alyssa is now on maternity leave.
Next Meeting	**All in favour to skip July and August meeting** **Next meeting will be Wednesday September 10th, 2025**	
Motion to end Meeting	**Motion seconded and meeting adjourned**	

Minutes taken by: Shelby McLean Date: June 24, 2025

Reviewed by Administrator: Cathy Fisher Date: June 24/2025

*No concerns brought forward in these minutes