



**Homes Committee of Management  
Orders of the Day**

**Tuesday, June 10, 2025, 10:30 a.m.**

**Council Chambers**

**450 Sunset Drive**

**St. Thomas ON**

**Note for Members of the Public:**

Please click the link below to watch the Committee Meeting:

<https://www.facebook.com/ElginCounty>

Accessible formats available upon request.

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**3. Adoption of Minutes**

Moved by: Councillor Widner

Seconded by: Deputy Warden Ketchabaw

RESOLVED THAT the minutes of the meeting held on November 12, 2024 be adopted.

Motion Carried.

**4. Disclosure of Pecuniary Interest and the General Nature Thereof**

None.

**5. Delegations**

None.

**6. Reports/Briefings**

**6.1 Homes – Committee of Management – Long-Term Care Director's Update October 1, 2024 – December 31, 2024**

The Director of Homes and Seniors Services presented the report that provides an overview of recent updates, and Ontario Health, Ministry of Health, and Ministry of Long-Term Care announcements which impact the three (3) County of Elgin Long-Term Care Homes services and operations for the period of October 1, 2024 – December 31, 2024.

Moved by: Councillor Giguère

Seconded by: Councillor Leatham

RESOLVED THAT the report titled "Homes – Committee of Management – Long-Term Care Director's update October 1, 2024 – December 31, 2024" from the Director of Homes and Seniors Services dated February 11, 2025 be received and filed.

Motion Carried.

**6.2 Homes – Committee of Management – Long-Term Care Operational Report October 1, 2024 – December 31, 2024**

The Director of Homes and Seniors Services presented the report that provides an overview of the day-to-day operations of the three (3) County of Elgin Homes along with pertinent departmental and committee updates and inspections for the period of October 1, 2024 – December 31, 2024.

Moved by: Councillor Hentz

Seconded by: Councillor Couckuyt

RESOLVED THAT the report titled "Homes – Committee of Management – Long-Term Care Operational Report October 1, 2024 – December 31,

2024" from the Director of Homes and Seniors Services dated February 11, 2025 be received and filed.

Motion Carried.

**7. Other Business**

None.

**8. Correspondence**

None.

**9. Closed Meeting Items**

None.

**10. Motion to Rise and Report**

None.

**11. Date of Next Meeting**

The Homes Committee of Management will meet again at the call of the Chair.

**12. Adjournment**

Moved by: Deputy Warden Ketchabaw

Seconded by: Councillor Noble

RESOLVED THAT we do now adjourn at 11:26 a.m. to meet again at the call of the Chair.

Motion Carried.

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Blaine Parkin,

Chief Administrative Officer/Clerk.

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Warden Grant Jones,

Chair.



## Report to Homes Committee of Management

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**From:** Michele Harris, Director of Homes and Seniors Services

**Date:** June 10, 2025

**Subject:** Homes – Committee of Management – Long-Term Care Director's Update  
January 1, 2025 – March 31, 2025

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### **Recommendation(s):**

THAT the report titled "Homes – Committee of Management – Long-Term Care Director's Update January 1, 2025 – March 31, 2025" dated June 10, 2025 be received and filed.

### **Introduction:**

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This report provides an overview of recent updates, and Ontario Health, Ministry of Health, and Ministry of Long-Term Care announcements which impact the three (3) County of Elgin Long-Term Care Homes services and operations for the period of January 1, 2025 – March 31, 2025.

### **Background and Discussion:**

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#### Ministry Updates

On January 2, 2025, the Ministry of Long-Term Care (MLTC) released a memo and Fact Sheet related to policy guidance to support implementation of amendments to Section 80 of the Ontario Regulation 246/22 under the Fixing Long-Term Care Act, 2021. The amendments came into force on January 1, 2025 and included:

- Onsite requirements for registered dietitians in long-term care homes including provisions for a back-up plan (remote care via telephone or video conferencing) to ensure continuous dietary management and support; and, written records of actions and strategies taken related to a back-up plan.

On January 6, 2025, the Ontario Centres for Learning, Research and Innovation (CLRI) announced that they are launching a new ministry funded program "Dementia Care Sector Preparedness Initiative" in January 2025. This initiative aims to enhance dementia care across Ontario's long-term care homes by providing homes with the opportunity to get support in evaluating their current dementia care approaches and

models and in assessing opportunities for the adoption and delivery of new or enhanced dementia care approaches and models. This data, at the home and sector level, will help homes prepare for the proposed new legislative amendments to the *Fixing Long-Term Care Act, 2021* (FLTCA) that if approved, will require all LTCHs to have an organized program for dementia, as part of a broader effort to improve dementia care and supports in Ontario. This initiative aims to advance dementia care practices, improve the quality of life for residents and equip front line staff with the necessary skills and judgement. Homes that participate in this initiative will be provided with a stipend to cover participation costs. All three (3) Elgin County Homes participated in the initiative and received a stipend.

On January 13, 2025, the MLTC released a memo reminding LTCHs about the French Translation Services available for LTCHs. Under the FLTCA all homes must post the Fundamental Principle and the Residents' Bill of Rights in both English and French, and, have strategies in place to support the needs of residents who cannot communicate in the language used within the Home. The Regional Translation Network Program (RTNP) supports translation of eligible materials intended for LTCH residents and their caregivers/families into French. All LTCHs are eligible to request translation services with no charge to the Home. All three (3) Elgin County Homes have met this requirement.

On February 13, 2025, the MLTC released a memo clarifying the reporting requirements for *C. auris* advising that only *C. auris* infections, versus *C. auris* colonization, are reportable.

On February 24, 2025, the MLTC released a memo regarding the provincial election that was held on February 27. The memo outlined the legislative mandate to ensure that all eligible Ontarians, including those living in LTCHs, had the opportunity to vote. Each of the three (3) Elgin County Homes had a polling station that was accessible to all residents.

On March 20, 2025, the MLTC released a memo regarding the 2023 Long-Term Care Home Annual Report (LTCHAR) and Long-Term Care Home Subsidy Calculation Worksheet with instructions providing financial staff members with information for completing the LTCHAR by June 18, 2025.

#### Ministry of Long-Term Care, Ontario Health and Health Quality Ontario Reporting

Long-Term Care Homes continue to have weekly, quarterly, annual and other one-time sensitive reporting and document extension/submission obligations and requirements which are completed within the authority of the delegation bylaw.

Reporting and documents submitted for the three County of Elgin Homes during the timeframe of January 1, 2025 – March 31, 2025, within the delegation bylaw include the following:

- Each home continues to complete the LTCH data submission (L9 Form) weekly to provide details regarding bed vacancies, bed rate changes, etc.

- Each home continues to submit, in consultation with finance and human resource department staff, quarterly staffing reports to the MLTC.
- Completion of integrated technology solutions (ITS) funding survey.

### Continuous Quality Improvement Requirements

The FLTCA requires long-term care homes to:

- Establish an interdisciplinary quality improvement committee.
- Ensure the home's continuous quality improvement initiative is coordinated by a designated lead.
- Annually prepare a report on the continuous quality improvement for the home and publish on their website.
- Maintain a record of the names of the people who participated in the evaluations of improvements in the continuous quality improvement report.

All three homes prepared and published the annual report on the Homes website as required and have submitted a quality improvement plan (QIP) to Health Quality Ontario for the 2025 – 2026 timeframe, prior to the deadline of March 31, 2025.

The Continuous Quality Improvement Committee at each Home meets monthly to work on the QIP and other key performance indicators all of which is discussed quarterly at Professional Advisory Committee Meetings.

Bobier Villa Annual Report for 2024-2025, and, 2025-2026 Quality Improvement Plan (QIP) Progress Report, Narrative Report and Workplan Report

[Bobier Villa CQI Initiative Annual Report 2024-2025](#)

[Bobier Villa QIP Progress Report 2025- 2026](#)

[Bobier Villa QIP Narrative Report 2025- 2026](#)

[Bobier Villa QIP Workplan Report 2025- 2026](#)

Elgin Manor Annual Report for 2024-2025, and, 2025-2026 Quality Improvement Plan (QIP) Progress Report, Narrative Report and Workplan Report

[Elgin Manor CQI Initiative Annual Report 2024-2025](#)

[Elgin Manor QIP Progress Report 2025- 2026](#)

[Elgin Manor QIP Narrative Report 2025- 2026](#)

[Elgin Manor QIP Workplan Report 2025- 2026](#)

## Terrace Lodge Annual Report for 2024-2025, and, 2025-2026 Quality Improvement Plan (QIP) Progress Report, Narrative Report and Workplan Report

### Terrace Lodge CQI Initiative Annual Report 2024-2025

### Terrace Lodge QIP Progress Report 2025- 2026

### Terrace Lodge QIP Narrative Report 2025- 2026

### Terrace Lodge QIP Workplan Report 2025- 2026

### Agreements and Documents Executed

The following agreements and documents have been developed and executed in consultation with legal services, the procurement team, and, as required, the Chief Administrative Officer (CAO), and align with the authority of the delegation bylaw.

- January 3, 2025, agreement with Vitalis for one-year extension as outlined in original agreement for provision of foot care services.
- January 19, 2025, agreement with Medline Canada for one-year extension as outlined in original agreement for provision of incontinence supplies.
- January 27, 2025, agreement with Point Click Care (PCC) for skin and wound application.
- January 27, 2025, CAO and Director of Homes and Seniors Services signed and submitted extension of respite bed, one/home, for January 1, 2025 – December 31, 2025.
- January 27, 2025, Schedule A, Description of Home and Services for each of the three LTCHs.
- February 2025, agreement signed with Anderson College for nursing clinical student placements.
- February 4, 2025, updated fire plan, sign off by local fire department for Terrace Lodge inclusive of Phase 3 of the Terrace Lodge redevelopment project.
- February 20, 2025, signed extension letter for Long-term Care Service Accountability Agreement (LSAA) for each of the three (3) LTCHs.
- February 21, 2025, agreement with Mohawk College for clinical student placements.
- February 27, 2025, Medical Director Agreement with Dr. Eric Wong for Terrace Lodge Medical Director services.
- February 27, 2025, Attending Physician Agreement with Dr. Eric Wong for Terrace Lodge resident medical services.
- February 27, 2025, Medical Director Agreement with Dr. Derek Vaughan for Bobier Villa and Elgin Manor Medical Director services.
- February 27, 2025, Attending Physician Agreement with Dr. Brendan Boyd for Elgin Manor resident medical services.
- February 27, 2025, Attending Physician Agreement with Dr. Derek Vaughan for Bobier Villa and Elgin Manor resident medical services.
- February 27, 2025, Terrace Lodge Redevelopment, Phase 3, Part A, Building Readiness Pre-Occupancy Inspection Checklist submitted to MLTC.



- February 27, 2025, Terrace Lodge Redevelopment, Phase 3, Part B, Nursing Pre-Occupancy Inspection Checklist submitted to MLTC.
- February 27, 2025, Terrace Lodge Redevelopment, Phase 3, Part B, Dietary Pre-Occupancy Inspection Checklist submitted to MLTC.
- February 27, 2025, Terrace Lodge Redevelopment, Phase 3, Part B, Environmental Pre-Occupancy Inspection Checklist submitted to MLTC.
- February 2025, Memorandum of Understanding between County of Elgin (Elgin Manor) and Thames Valley District School Board (Southwold Public School) regarding emergency evacuation plans.
- March 11, 2025, agreement with Westminster Mobile Imaging for one-year extension as outlined in original agreement for provision of xray and ultrasound services.
- March 19, 2025, Schedule E, Declaration of Compliance for Long-term Care Service Accountability Agreement (LSAA) submitted with one exception related to ongoing DEI and Indigenous Training and implementation work (training and work is in progress and ongoing).
- March 19, 2025 letter signed by CAO for one-time funding received for diagnostic equipment for skin and wound app, vital signs machines/software to integrate with PCC, submitted to Ontario Health West.
- March 28, 2025, Terrace Lodge Redevelopment Phase 3, Confirmation of First Resident Form submitted to MLTC.
- Clinical placement Stipend Master Agreement with the MLTC as part of the Personal Support Worker Stipends and Incentives Program submitted by Elgin County Homes, awaiting final sign off by Ministry.

### Project Updates

- Registered Nurses Association of Ontario (RNAO) Clinical Pathways, Year 1, implementation go live date set for April 1, 2025.
  - Year 1 focus includes Admission Assessment, Delirium Assessment, and Resident and Family Centred Care.
  - Front-line staff training continued throughout January – March 2025 and funded through ministry one-time funding.
  - Policy and procedures and assessments reviewed to streamline processes, reduce duplication, standardize assessments and align with legislative requirements.
  - The Clinical Pathways project aligns with the RNAO Best Practice Spotlight Organization (BPSO) project work.
- InterRAI LTCF
  - Management staff of the Home and MDS RAI coordinator staff continue to attend/participate in webinars and educational opportunities to prepare for implementation, and to minimize any potential financial impact.
  - MLTC has notified LTCHs that our three (3) Homes will receive training June – September 2025 and go live implementation is October 1, 2025.
- Skin and Wound Application (PCC)
  - Funding received related to diagnostic equipment application approval.
  - Training scheduled for registered staff and management April 2025.
  - Implementation of skin and wound application May 2025.

- Skin and wound champions to implement first and “train the trainer” model to train all front line registered staff.
- Streamline process and accuracy in skin and wound assessments, treatment and outcomes.
- Real time data and photos for skin and wound team meetings, professional advisory committees, care conferences, team huddles to support quality improvement goals and positive wound and skin care outcomes.
- VitalLink implementation
  - Funding received related to diagnostic equipment application approval.
  - Training scheduled for April 2025.
  - Implementation May 2025.
  - Streamline resident care and services, provide registered staff with additional opportunities for direct resident care and services

### Policy and Procedure Updates

While policy work was undertaken by the management team during January – March 2025, education and policy changes will be implemented in April – June 2025.

### Financial Implications:

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On January 2, 2025, the MLTC released a memo regarding the 2024-2025 LTC Staffing Increase Top-Up and Resident Health and Well-Being Program Consolidation. Effective January 1, 2025, eligible LTCHs will receive an adjustment to the monthly funding provided for staffing investments to help increase direct hours of resident care. The ministry also communicated an investment to enhance access to social support services provided by registered social workers (RSWs), social service workers (SSWs) and other allied health professionals (AHPs) to increase overall health, well-being and quality of life in LTCHs through the Resident Health and Well-Being (RHWB) program. The County of Elgin Homes have achieved the direct care hours target of 4 hours/resident/day within the required timelines.

On January 6, 2025, the MLTC announced one-time funding specific to the Skin and Wound Professional Growth Fund, in addition to the Supporting Professional Growth Fund. This change was effective January 1, 2025 for the 2024-2025 year. All three (3) Elgin County Homes received, utilized and reported on the one-time funding (\$4.39/bed/month for January 1 – March 31, 2025) as per the criteria – prioritized for skin and wound care education and training, and additional funding for education unrelated to skin and wound care.

On March 21, 2025, the MLTC released a memo regarding Funding for LTC Infection Prevention and Control (IPAC) Leads. The MLTC advised that they would be providing up to \$4,411,100 of remaining reserve funds to support the salary and benefits for IPAC leads in LTC Homes. All three (3) Elgin County Homes receive IPAC funding to support the IPAC lead roles in the Homes.

### **Advancement of the Strategic Plan:**

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The long-term care director's update report aligns with the following Corporate Strategic Plan priorities:

- Strategy 2: Organizational Culture and Workforce Development
- Strategy 3: Service Excellence and Efficiency

### **Local Municipal Partner Impact:**

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The announcements from the Ministry of Long-Term Care and Ontario Health West support the quality of care and support positive outcomes for the three (3) County of Elgin Long-Term Care Homes as staff and managers work collaboratively to provide care and services to the residents of our Homes and community clients.

### **Communication Requirements:**

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Information has been communicated to the appropriate departments, resident council, family council, residents, staff and visitors as required.

### **Conclusion:**

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The long-term care homes management team continues to be thankful for the support from Council, the Chief Administrative Officer, the Senior Management Team, and staff in all departments as we work collaboratively to maintain and improved the quality of services and care for our residents, families, staff and communities.

All of which is Respectfully Submitted

Approved for Submission

Michele Harris  
Director of Homes and Seniors Services

Blaine Parkin  
Chief Administrative Officer/Clerk



## Report to Homes Committee of Management

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**From:** Michele Harris, Director of Homes and Seniors Services

**Date:** June 10, 2025

**Subject:** Homes – Committee of Management – Long-Term Care Operational Report  
January 1, 2025 – March 31, 2025

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### **Recommendation(s):**

THAT, the report titled “Homes – Committee of Management – Long-Term Care Operational Report January 1, 2025 – March 31, 2025” dated June 10, 2025 be received and filed.

### **Introduction:**

This report provides an overview of the day-to day operations of the three (3) County of Elgin Homes along with pertinent departmental and committee updates and inspections for the period of January 1, 2025 to March 31, 2025.

### **Background and Discussion:**

#### Ministry of Long-Term Care (MLTC) Compliance Inspection Reports Summary

MLTC inspections are unannounced and last from 1 day to 2 weeks depending on the purpose of the inspection. There are several types of inspections of long-term care homes as follows:

- Reactive Inspections which are done in response to complaints or critical incident submissions and generally focus on the substance of the complaint or incident; and follow-up inspections conducted to ensure that any compliance orders have been addressed.
- Proactive Inspections which are broad-based inspections carried out on a regular basis to ensure that a home is in ongoing compliance with the Act and Regulation.
- Other types of inspections include pre-occupancy and post-occupancy inspection visits to a home undergoing the development/redevelopment of beds.

### Bobier Villa

Ministry inspectors visited the Home on March 19, 20, and 21, 2025 to conduct a critical incident inspection regarding an outbreak at the Home. Inspection protocols utilized during the inspection included Infection Prevention and Control.

During the course of the inspection the inspector made relevant observations, reviewed records and conducted interviews. A written notification was issued related to the debrief requirement following an outbreak.

### Bobier Villa Inspection Report March 2025

### Elgin Manor

Ministry inspectors visited the home on February 11, 12, 13, 14, 18, 19, 20, and 21, 2025 to conduct a proactive compliance inspection. Inspection protocols utilized during the inspection included Resident Care and Support Services, Skin and Wound Prevention and Management, Residents' and Family Councils, Food, Nutrition and Hydration, Medication Management, Infection Prevention and Control, Safe and Secure Home, Prevention of Abuse and Neglect, Quality Improvement, Staffing, Training and Care Standards, Residents' Rights and Choices, and Pain Management.

During the course of the inspection the inspectors made relevant observations, reviewed records and conducted interviews. Two written notifications were issued. One written notification which was related to safe storage of drugs during medication pass; and one written notification related to medication destruction and disposal.

### Elgin Manor Inspection Report February 2025

### Terrace Lodge

Ministry inspectors visited the Home on February 3 and 4, 2025 to conduct a critical incident inspection. Inspection protocols utilized included Infection Prevention and Control and Falls Prevention and Management.

During the course of the inspection the inspectors made relevant observations, reviewed records and conducted interviews. There were no findings of non-compliance.

### Terrace Lodge Inspection Report February 2025

### Critical Incident Systems Report Summary for all Three (3) Homes

Types of Critical Incidents – January 1, 2025 – March 31, 2025	Total Number – Three Homes
Abuse & Neglect – Any alleged, suspected or witnessed abuse of a resident by anyone or neglect of a resident by the licensee or staff that resulted in	10

harm or risk of harm to the resident, misuse or misappropriation of residents' money, misuse or misappropriation of funds provided to licensee.	
Unlawful or Improper or Incompetent Treatment or Care – Includes care of a resident that resulted in harm or risk of harm to resident.	5
Unexpected death – Including a death resulting from an accident or suicide.	1
Medication Incident – Includes a medication incident or adverse drug reaction in respect of which a resident is taken to hospital.	0
Environmental Hazard – Includes breakdown or failure of the security system or major equipment or a system in the Home that affects the provision of care or the safety, security or well-being of residents for a period greater than six hours.	2
Disease Outbreak	6
Contamination of Drinking Water Supply	0
Incident that Causes Injury and Transfer to Hospital – includes injury in respect of which a person is taken to hospital resulting in significant change in status.	5
Controlled Substance Missing/Unaccounted – Includes missing or unaccounted for controlled substance.	0
Written Complaint	2

The above noted critical incidents have been reviewed and internally investigated. It is important to note that the abuse and neglect critical incident reporting includes “harm or risk of harm”. Each of the three Homes has a memory care resident home area supporting mild to severe cognitively impaired residents that may, at times, and despite interventions, exhibit responsive behaviours resulting in “risk of harm”. The Homes are diligent in reporting responsive behaviours in the “risk of harm” category with 8 of the 10 reports falling into this category. Follow up to each incident is conducted by the management team in collaboration with both the internal and external Behavioural Support Ontario (BSO) teams and is ongoing to develop interventions and update plans of care to support all residents on the memory care resident home areas and throughout the Homes.

Two (2) written complaints were received in this quarter across the Homes and were responded to as per legislative requirements.

The management team and continuous quality improvement teams have developed and implemented a plan of action to address each of the critical incident related areas and written complaints, including, but not limited to, providing additional training and education as required.

### Outbreaks

Home	Number of Outbreaks and Agents	Timeframe of Outbreak	Number of Resident Cases
Bobier Villa	1 Suspect Outbreak – COVID 19	January 10 -22, 2025	1 Resident Home Area, 3 residents

Elgin Manor	2 Confirmed Outbreaks #1 – Rhinovirus (Common Cold) #2 – Coronavirus	#1 January 9 – 17, 2025 #2 March 17 – April 7, 2025	#1 Entire home – 6 residents #2 One Resident Home Area – 12 residents
Terrace Lodge	3 Confirmed Outbreaks #1 – Influenza A, COVID 19 #2 – Norovirus  #3 – Influenza A and COVID 19	#1 – Dec. 30, 2024 – January 21, 2025 #2 – February 6 – March 6, 2025 #3 – February 21 – March 13, 2025	#1 – Entire Home, 37 residents #2 – Entire Home, 51 residents #3 – Two Resident Home Areas, 10 residents

Elgin and Oxford communities experienced increased infections/illnesses during the January – March quarter cold and flu season which did result in an increased number of outbreaks across the three LTCHs. The IPAC teams across the Homes continue to provide education to staff, residents and families and promote the recommended vaccinations (RSV, COVID, influenza, pneumococcal, etc.). Staff vaccination promotion continues across the Homes.

Infection Prevention and Control (IPAC) managers continue to participate in the IPAC Hub and Community of Practice meetings/opportunities. Ongoing collaboration with Southwestern Public Health continues to support accuracy in decision-making and planning regarding updated circulating pathogens, guidance documents and policy and procedures.

Each Homes IPAC team conducts biweekly IPAC audits and provides staff, residents and visitors with education to support IPAC measures including, but not limited to, hand hygiene, personal protective equipment, passive screening for symptoms, etc. IPAC audits are conducted weekly during suspect/confirmed disease outbreaks.

In response to the updated IPAC policy and procedures in December 2024, this quarter has seen the implementation of a revised Antibiotic Resistant Organism (ARO) screening tool which includes C. Auris, as required by the MLTC and Public Health Ontario. Additionally, the recommended changes to the Tuberculosis (TB) screening tool has resulted in a decreased number of chest xrays (CXR) being required upon admission. CXRs are now only required as per criteria within the TB screening tool.

Bobier Villa has implemented a closed hand sanitizing system in the common areas, hallways and resident rooms at the point of care. Additionally an electronic hand hygiene audit has been rolled out and is available for all staff to utilize via a QR code and on all desktop computers and is being utilized by all staff across all departments. Both of these initiatives support hand hygiene compliance, effectiveness, awareness and minimize transmission risk.

Mandatory Masking continued for staff, students and volunteers during this quarter due to the increased outbreak activity within the Homes and throughout the community. Mandatory masking continues to be evaluated and adjusted based on local activity and guidance documents.

### Occupancy Data

A 97% occupancy rate is required to support full ministry funding. All 3 Homes continue to work diligently to support >97% occupancy rates, despite outbreak(s).

Home Name	Occupancy Data excluding respite bed January 1 – March 31, 2025	Admissions	Discharges
Bobier Villa	99	6	4
Elgin Manor	99.9	10	10
Terrace Lodge	97.67	10	14

### Health System Partners (i.e. Fire, Public Health, Ministry of Labour)

- Monthly fire drills and health and safety inspections are conducted each month on all shifts at all three Homes.
- The annual 2024 fire inspection report at Bobier Villa was received in January and compliance was achieved. One fire extinguisher was replaced in the main kitchen.
- Bobier Villa received a visit from the Ministry of Labour (MOL) on December 27, 2024 in regard to Personal Protective Equipment (PPE) and a follow-up visit on January 3, 2025. Orders were received on January 3, 2025, in regard to an obstruction in the basement related to a delivery of supplies; and, in regard to expired PPE with an extended expiry date. The orders were complied with prior to the MOL compliance date and the MOL confirmed that the Home was in compliance on January 27, 2025.
- Terrace Lodge fire plan was updated to reflect the final Phase, Phase 3 of the Redevelopment project and was approved by Malahide Fire Department in February.
- There were no public health inspections for the dietary departments across the 3 Homes, however, Public Health was involved in the pre-occupancy inspection for Phase 3 of the Terrace Lodge Redevelopment Project to support occupancy approval.

### Dietary and Housekeeping/Laundry Departmental Updates

Department	Bobier Villa	Elgin Manor	Terrace Lodge
Dietary	St. Patrick's Day traditional Irish	The dietary staff and kitchen were	Terrace Lodge main kitchen



	<p>meal was prepared and enjoyed with entertainers in Whitelock to complete the Irish celebration.</p> <p>The new winter menu was launched in January with the addition of new menu items requested by residents including Meat Lovers Pizza, Sauteed Shrimp Scampi, Colossal Carrot Cheesecake and Baked Salmon with a Lemon Dill Sauce!</p> <p>The purchase of a new conveyer toaster to help improve the preparation of toast for breakfast was very well received by residents.</p>	<p>creative delivering theme meals with January celebrating Chinese New Year and February Valentine's Events.</p> <p>The dietary team successfully managed providing services during a boil water advisory in the month of February. An efficient way to test the Boil Water Code policy!</p> <p>Elgin Manor provides Meals on Wheels services through a partnership with VON. Our staff participated in the March 4 Meals promotion event along with the County Warden, staff from VON and volunteer drivers.</p>	<p>renovations were complete and the kitchen in full use. Staff were excited to participate in the Phase 3 move into the Pine and Chestnut serveries, dining rooms and home kitchen spaces which are being enjoyed by residents and staff.</p> <p>Terrace Lodge provides Meals on Wheels services through a partnership with VON. Our staff participated in the March 4 Meals promotion event along with staff from VON and volunteer drivers.</p>
Food Committee	<p>Theme meal planning continued with February enjoyment of tacos and nachos and a 70's themed entertainment; and March focusing on Irish celebrations. Families were invited to join their loved ones for the festivities.</p>	<p>Theme meal planning continues – Chinese New Year and Valentine's Day.</p>	<p>Finalization of the new menu was completed. Residents suggested a new idea – "Chefs Choice" meal which involves the cook of the month creating a menu 1 day/month – this will begin in May.</p>

			<p>The reopening of the tuck shop in the new event &amp; tuck shop space occurred and the space is extremely well utilized and enjoyed 7 days/week!</p> <p>The Auxiliary members should be congratulated for successfully providing tuck shop opportunities for residents and visitors during Phase 3 of the project temporarily in the library space.</p> <p>Events supported by the dietary department included Valentines and St. Patrick's Day celebrations with an authentic Irish menu, special snacks and green beer.</p>
Housekeeping/laundry	The Manager of Support Services completed the Public Health Ontario Infection Prevention and Control Environmental Best Practices modules for long-term care.	The housekeeping team was kept busy with outbreak IPAC management, and, supporting the dining room floor replacement project in each RHA. Throughout the month of March the team prepared the chapel to become a	Housekeeping staff have experienced significant change in job routines throughout the project and should be commended for their ability to adjust and accommodate to support both operational needs and the needs of the residents.

		temporary dining room each week while working through the 4 dining room replacement project. Dietary and housekeeping staff made this timeframe special for residents with many feeling as though they were “going out for meals to a restaurant” – kudos to all staff, all departments for supporting this work and resident experience!	Housekeeping staff completed training as part of the Public Health Ontario Infection Prevention and Control Environmental Best Practices modules for long-term care.
Joint Health & Safety	<p>Code Drill Reviews included Code White, Code Blue and Code Red.</p> <p>Additional eye wash stations and fire extinguishers were installed as a proactive measure.</p> <p>Regular inspections and fire drills.</p>	<p>Code Drill reviews included Code Yellow and Code White drill</p> <p>Active drills – Code Orange, Loss of Essential Service (water), and Boil water.</p> <p>Workplace Violence Risk Assessment finalized.</p> <p>Regular inspections and fire drills.</p>	<p>Monthly Code Drills with team members with an enhanced focus this quarter on Code Red related to the building updates as part of the redevelopment project.</p> <p>Code Brown drill.</p> <p>Regular inspections and fire drills.</p>

### Resident & Family Council Updates

Resident Council	Bobier Villa	Elgin Manor	Terrace Lodge
January 2025	Average of 8 residents attend the monthly meetings. Topic highlights for	Average of 10 residents attend the monthly meetings. Topic highlights –	Meeting delayed due to outbreak. Information shared with residents from

	January, February and March – Resident and family satisfaction survey results, CQI update including review of and opportunity to participate in 2025-2026 QIP, Recreation programs.	satisfaction survey results 2024, special events and outings, Ontario Association of Resident Council membership renewal.	Ontario Association of Residents Council. 11 residents attended January 30 meeting. Topic highlights - redevelopment project, water temperatures, front door, HVAC system, IPAC,
February 2025	Topic highlights for January, February and March – Resident and family satisfaction survey results, CQI update including review of and opportunity to participate in 2025-2026 QIP, Recreation programs.	Topic highlights – CQI updates, review and opportunity to provide input into proposed 2025-2026 QIP, car show in June	Meeting cancelled due to outbreak status.
March 2025	Topic highlights for January, February and March – Resident and family satisfaction survey results, CQI update including review of and opportunity to participate in 2025-2026 QIP, Recreation programs.	Meeting cancelled due to outbreak.	4 residents attended the March 13 meeting. Topic highlights - redevelopment project, front door, TSN sports coverage, IPAC, 2024 resident and family satisfaction survey results, CQI update including review of and opportunity to participate in 2025-2026 QIP.
Family Council			
January 2025	5 members part of Family Council which is an increase by one member. Continue to meet monthly in person and virtually	8 members part of Family Council. Continue to meet monthly in person and virtually to support attendance.	Meeting postponed due to outbreak.

	to support attendance.		
February 2025	Topic highlights for January, February and March include CQI updates, proposed QIP 2025- 2026 review and opportunity to provide input, Diners Committee, Recreational Programs.	Topic highlights for February and March – CQI updates, Resident and family satisfaction survey results, CQI update including review of and opportunity to participate in 2025-2026 QIP, Recreation programs.	6 members attended the February 5, 2025 meeting. Topic highlights – 2024 Satisfaction survey results, IPAC and outbreak updates, referrals, redevelopment project, Public Health Inspection, new and special event menus, program and leisure.
March 2025	Topic highlights for January, February and March include CQI updates, proposed QIP 2025- 2026 review and opportunity to provide input, Diners Committee, Recreational Programs.	Topic highlights for February and March – CQI updates, Resident and family satisfaction survey results, CQI update including review of and opportunity to participate in 2025-2026 QIP, Recreation programs.	4 members attended the March 12 meeting. Topic highlights included clothing labels, redevelopment update, election polls, CQI update, review and opportunity to provide input on proposed QIP for 2025 -2026, dental services, recreation programming and upcoming events.

### Program and Therapy Department Updates

Item	Bobier Villa	Elgin Manor	Terrace Lodge
Special Programs & Event Highlights	Chinese New Year Lunch Outing  Muffins & Movies  70's Show and Dinner Music  Art Classes	Subway Lunch Club  Shiloh Mennonite Choir  Visit from Animal Aide	Shiloh Mennonite Choir  Catfish Creek Conservation Authority Presentation

	<p>Sunday Tea with Entertainment</p> <p>Irish Day Party</p> <p>Pizza and Trivia Night</p> <p>Spring Luncheon</p> <p>Easter Bunny Visit</p>	<p>Chinese New Year</p> <p>Art Therapy</p> <p>Celebration of Life</p> <p>Pottery Class</p> <p>Waffle Breakfast</p> <p>Celtic Dancers (Auxiliary Sponsored)</p> <p>St. Patrick's Day Party (live music)</p> <p>Tai-Chi</p>	<p>– Blue Bird Habitats</p> <p>Crafting with Helen</p> <p>Sensory Visits</p> <p>Wheel of Fortune &amp; Family Feud &amp; Jeopardy Challenge</p> <p>Puppy Visits</p> <p>Little Hobby Hill Animal Visits</p> <p>St. Patrick's Day Party</p> <p>Spring Cookie Decorating</p> <p>Travelling Goats</p>
Volunteer Services	<p>9 active, 15 registered volunteers</p> <p>2 new applicants to start April 2025</p> <p>1 exceptionally dedicated volunteer who visits every Tuesday morning for 1:1 visits with residents</p>	<p>13 active and registered volunteers</p> <p>4 new applicants</p>	<p>4 new volunteers (Gift Shop)</p> <p>Recruitment ongoing for portering, horticulture, lending library management</p>
Education & Training	<p>Alzheimer's Society – healthy brains, dementia in the younger population</p>	<p>Alzheimer's Society – healthy brains, dementia in the younger population</p>	<p>Ongoing annual education</p>

	No student placements this quarter	No student placements this quarter	No student placements this quarter
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## Nursing Department Updates

Item	Bobier Villa	Elgin Manor	Terrace Lodge
Education	Clinical Pathways – admission assessment, delirium assessment registered staff	Clinical Pathways – admission assessment, delirium assessment registered staff  Wound Care	Clinical Pathways – admission assessment, delirium assessment registered staff
Phase 3 Move Day	Bobier Villa Manager of Resident Care provided support to the Terrace Lodge readiness for Phase 3 Move Day.	The Education Lead/Quality Improvement Coordinator dedicated additional time to support Phase 3 move day education.	Significant planning and collaboration across all departments to support residents and families for 2 Phase 3 move days!

## Continuous Quality Improvement

Indicators reported within the Homes – Committee of Management – Directors Report through the Quality Improvement Plan (QIP) progress report, narrative, workplan and annual report for each Home.

## Administrative Updates

Item	Bobier Villa	Elgin Manor	Terrace Lodge
Clinical Connect	Training and implementation in progress as connectivity issue resolved.	Training and implementation in progress as connectivity issue resolved.	Training and implementation in progress as connectivity issue resolved.
Staffing Updates	No changes  Recruitment of the Education Coordinator Position across the 3 Homes	No changes  Recruitment of the Education Coordinator Position across the 3 Homes	Manager of Resident Care position Recruitment of the Education Coordinator

			Position across the 3 Homes
Education	Management and MDSRAI staff attending educational opportunities for inter-RAI LTCF and Clinical Pathways	Management and MDSRAI staff attending educational opportunities for inter-RAI LTCF and Clinical Pathways	Management and MDSRAI staff attending educational opportunities for inter-RAI LTCF and Clinical Pathways
Individual Home Highlights	Bobier Villa worked collaboratively with the continence care provider to achieve budgetary targets and positive resident outcomes – well done!	Elgin Manor team was well prepared for, and celebrated an excellent proactive compliance inspection, congratulations to all staff, all departments!	Terrace Lodge management and staff worked diligently to successfully prepare for pre-occupancy Phase 3 inspection and two (2) move days into the Pine and Chestnut Resident Home Areas. We could not have done this without the valued support from all 3 Homes, library, facilities, and administration!

#### **Financial Implications:**

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None

#### **Advancement of the Strategic Plan:**

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The long-term care operational report aligns with the following Corporate Strategic Plan priorities:

- Strategy 2: Organizational Culture and Workforce Development
- Strategy 3: Service Excellence and Efficiency

#### **Local Municipal Partner Impact:**

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None

#### **Communication Requirements:**

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Information has been communicated to the appropriate departments, resident council, family council, residents, staff and visitors as required.



**Conclusion:**

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The long-term care homes management team continues to be thankful for the support from Council, the Chief Administrative Officer, the Senior Management team, and the staff in all departments as we work collaboratively to maintain and improve services and care for our residents, families, staff and communities.

All of which is Respectfully Submitted

Approved for Submission

Michele Harris  
Director of Homes and Seniors Services

Blaine Parkin  
Chief Administrative Officer/Clerk