

Seasons



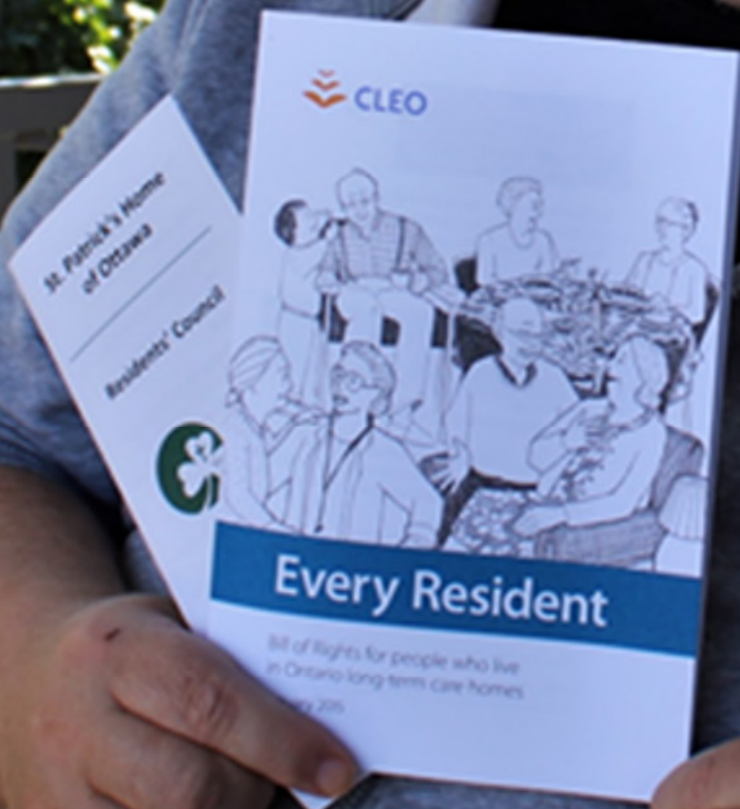
Celebrating the Seasons of Life | For Residents, By Residents

Spring/Summer 2022

**Are you ready for the
Citizenship Model of LTC?**

**Online Fundraising
for Residents' Council**

**Communication
and Food Choice**



**Keeping it REAL with
Resident Leader
Leslie Froats**

Seasons

Seasons is published twice a year and contains news and information of interest to those living and working in Ontario long-term care homes.

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Story Submission

To share your story, email or fax Melissa McVie mmcvie@ontarc.com the following information:

- PICTURES – we love sharing your pictures
- Submission title and authors
- 300-word (maximum) story summary of the event, project, program
- Your contact information

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CONTEST: FIND THE HIDDEN TULIP & WIN!



If you are a resident living in an Ontario LTC home and you find the hidden tulip, please email mmcvie@ontarc.com before May 15.

Be sure to include your name, address, and the page number where you found it!

Winner will be selected by random draw.

Congratulations to our previous contest winners Adele Bates, Linda Desjardins, Beatrice Fowler, Dennis

Hopkins and Louretta Laviolette for finding the hidden slice of pie in our Fall/Winter issue!

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Cover Page Photo

Meet our cover model Leslie Froats, Resident Leader from St. Patrick's Home of Ottawa and member of OARC's REAL group on pages 4-5.



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Save the Date: Residents' Council Week 2022

September 12th-18th, 2022

It's never too early to start planning!

Photo credit: Resident' Council member, Elgin Manor, St. Thomas, Ontario. 2021 Residents' Bill of Rights Video Contest winner.



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Message from OARC's Current and Past President

Each year, the arrival of Spring brings hope and renewal — hope for warmer and longer days, renewal of mind and spirit. This Spring the symbolism is ever more striking, as our province takes further steps to ease some COVID-19 restrictions and move society closer to some semblance of pre-pandemic life.

Since March 2020, in the name of protection and safety, residents living in Ontario's long-term care homes have been asked to sacrifice much, and, in many instances, much more than society at large. The sacrifices continue.

It is now essential to shift away from functioning in crisis mode. We all need to find new ways to support the renewal and sustainability of residents' wellbeing by thinking "outside the box", and working collaboratively as we move forward to a "new normal" in LTC.

To that end, among the many activities that OARC has undertaken over the last two years, OARC is working very closely with residents to develop and meaningfully define a number of core principles which anchor OARC's efforts on behalf of residents.

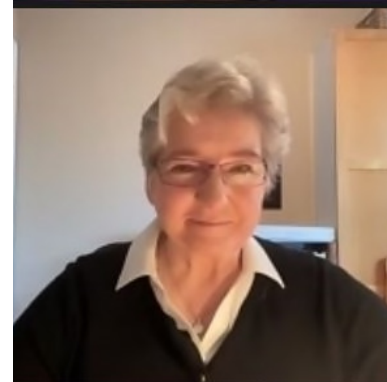
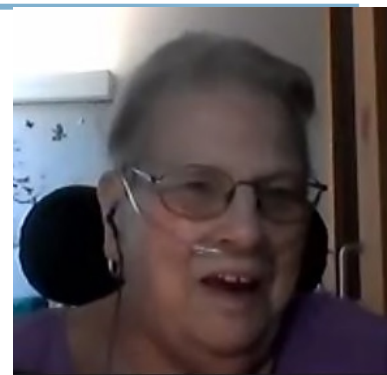
Among these principles is a most powerful statement: that residents living in LTC homes continue to be active and contributing citizens of society. Working to truly define what that means and, more importantly, what that looks like in the life of each and every resident, lies at the core of OARC's efforts. It is also the topic of Joan Devine's contribution to this edition of Seasons; we encourage you to read her article (pages 12-15) and allow it to inform your thoughts on this critical subject.

Pandemic restrictions, as well as the realities of resourcing and focus in LTC homes over the last 24 months, have left many Residents' Councils without the supports or ability to function effectively, if at all. One of the ways to bring to life the true meaning of the principle of citizenship, is to put dedicated time and effort into reinvigorating your Residents' Council. All Resident Leaders need to work together to develop ways to rebuild the culture in their own homes — to be united and proud.

An active, well-functioning Residents' Council, with each resident participating actively in the life of the LTC home, are among the most critical ways residents bring self-determination and citizenship to life.

We wish every resident continued strength and a sense of hope, as we all navigate the next steps of society's re-opening. Let us hold onto the thought that we are now closer to the end of the pandemic than we are to the beginning.

We leave you with these words of encouragement — Hope and Renewal — as we wish you the very best of the Spring and Summer months.



Sharron Cooke
Past President, OARC

Mary Nestor
President, OARC



Meet Leslie Froats: Ottawa-based Resident Leader and REAL member

When OARC launched the Resident Advisory group last summer, commonly known by its acronym, the REAL group—[Resident Experts Advisors and Leaders](#), Les' application caught the team's attention because of his optimism, solutions-oriented lens, and his desire to make things better for others. Les' range of quality-improvement engagements at the place he calls home, St. Patrick's Home of Ottawa, was another highlight from his application. Les is a Residents' Rights champion and with the support of his home team, keenly adopted OARC's [Through Our Eyes](#) program. Les has worked with

his Residents' Council Assistant David and teamed up with social work students completing placements in his home to re-envision the delivery of Residents' Rights education, infusing his own lived experience into each presentation/in-service. Les has seen his home's culture transform as team members become increasingly familiar with person-centred care and their role in upholding Residents' Rights.

Les is a sensitive and empathetic Resident Leader. He is passionate about cultivating relationships with his peers— both through his active involvement in Residents' Council (which moved over to a virtual Zoom format during the pandemic), and by visiting fellow residents door-to-door to socialize and offer emotional support.

You also might recognize Les as one of OARC's weekly [Resident Forum](#) facilitators. Les appreciates staying connecting with residents from across the province and elevating shared challenges and opportunities through his involvement as a REAL member. Les is a big believer that social connection plays an important role in personal health and wellness. On the following page we asked him to share some strategies that he uses to support his own sense of well-being and that of his peers.





Question:

What do you do to support your own wellness as a resident living in long-term care?

Answer: Staying busy! I find the best thing for me is to get involved in a wide range of activities in my home. Being part of Residents' Council and various committees and helping others gives me purpose. Recently, the team at St. Pat's set me up with some art materials to help explore my creative side with painting and drawing.

Question:

How do you support the wellness of your fellow residents at your home?

Answer: I make a point of walking around on my home area and saying hello to people everyday. Some like to talk more than others, but my greetings usually generate a positive response. I remind other residents that I am here if they need me, so they never feel too isolated or alone.

Question:

Do you have any advice for residents who might be struggling with their personal wellness?

Answer: I would encourage others to talk to someone they trust. Ask for what you need. Don't hide the fact that you're struggling. You don't need to be ashamed or keep it to yourself.

I am not done yet... I am still here and I am whole.

I am Leslie Froats

Learn about Les:

- ◇ Grew up on a farm in Elma, Ontario
- ◇ Worked as a Foreman for Procter and Gamble in Brockville, Ontario
- ◇ Proud father, step-father and grandfather
- ◇ Enjoys Country and Western music
- ◇ Favourite community pastime: neighbourhood walks and Sunday drives
- ◇ Thrives when connecting with friends and family
- ◇ Has lived in long-term care for 3+ years
- ◇ Welcomes opportunities to be involved in quality improvement and the operations of his home including:
 - ◇ Interviewing potential new team members as part of a panel
 - ◇ Contributing to safe medication management project
 - ◇ Teaching about Residents' Rights
 - ◇ Welcoming new residents to the home
 - ◇ Collaborating with students
 - ◇ Mental Health ambassador

The Concept of Choice at Meals

By: Dale Mayerson, Registered Dietitian
Ontario Seniors Nutrition and Advocacy Committee (OSNAC)



One resident said to me, “If fish and liver are on the dinner menu, and I hate liver, I really only have one choice.”

Currently, Ministry regulations state that 2 choices of main course, vegetable and dessert are to be offered at lunch and dinner. Nutrition Managers are ultimately responsible for planning the menu with input from residents, families, cooks, serving staff, and anyone else who knows what residents of a particular home like to eat. Culture, religion and collective expectations are taken into consideration throughout the menu planning process. Because there are 2 choices at meals, menu planning is a slow and careful task, in order to ensure that meal choices are different from day to day, and varied in flavours and textures.

New Regulations for Meals

Regulations are on the cusp of changing with the Fixing Long-Term Care Act, 2021. The requirement for 2 menu choices is changing to the following wording (in section 77.1):

The daily menu cycle:

(d) includes a minimum of one entrée and side dish at all three meals and dessert at lunch and dinner

(e) includes a choice of other available entrees and side dishes at all three meals and a choice of other desserts at lunch and dinner, to meet resident’s specific needs or food preferences

This allows the menu to have one main course and dessert at meals, along with a brief list of menu alternatives for residents who do not like the main meal. Homes may choose to stay with 2 choices at all meals or they can move to a simpler menu.

Benefits of a Simpler Menu

For the residents, this allows for more favourite food items on the menu, as well as more variety in the alternate choices for residents who are not satisfied with the main menu option. This also allows the cook to spend more time and focus preparing the main meal.

For the dietary department, it means simpler food ordering, and less inventory in fridges, freezers and storerooms. Menu planning becomes more basic with less repetition of menu items and therefore more variety.

It will be important for the manager to create a short list of menu alternates that please the residents of the home. Ideally, alternate food choices should be popular with residents and easy to prepare for staff. Alternates for lunch (or the lighter meal of the day) may include sandwiches, cottage cheese with fruit, or meat pie, while dinner alternates (or the heavier meal of the day) might include baked chicken

leg or sliced ham. There may be favourite foods within the home, such as baked macaroni and cheese, which could be pre-portioned and added to the list. Alternative choices will need to be available in minced and pureed textures, for residents with chewing concerns or swallowing disorders.

It's exciting to see these changes coming up and to find new ways for staff to please residents at meal times. We hope residents will be ready to help through this new process and make changes that are satisfying. □



Did you know...?

Your long-term care home must ensure that:

- ♦ The Residents' Council reviews menus prior to each menu cycle.
- ♦ The Residents' Council provides input on meal and snack times.
- ♦ Minutes/records of meetings reflect that this review has taken place.

Author Dale Mayerson is an active member of the **Ontario Seniors Nutrition & Advocacy Committee (OSNAC)**, a volunteer group of Registered Dietitians and Nutrition Managers currently working within the Ontario Long Term Care (LTC) sector. Our focus is on advocacy initiatives for seniors' nutrition and food service. OSNAC has an advocacy working group called the **Food and Nutrition Advisory Team (FNAT)** that we collaborate with regularly on advocacy initiatives. This smaller team works directly with the government and Ministry of LTC, advocating for regulatory and legislation changes as well as larger picture advocacy efforts. FNAT has also advocated for an increased raw food budget for resident meals and dietary staff hours. For support or questions, contact OSNAC/FNAT at osnac.fnat@gmail.com or follow them on social media:



@osnac.fnat



Osnac Fnat

Enhancing the Dining Experience *with* Residents

OARC Recommends: Exploring various ways that residents might work in partnership with their LTC teams and contribute to a positive dining experience at your home, such as:

- ♦ Consider having residents trained as **Dining Room Ambassadors** to complete mealtime audits and collect peer input following meals as part of your home's Quality Improvement plan.
- ♦ Invite residents to suggest ways to **enhance the physical environment** in the dining rooms. This could include the furnishings, utensils/dinnerware, paint colours/artwork and music etc.
- ♦ Forming a **Food/Pleasurable Dining Committee** that meets separately and provides a report at your Residents' Council meeting allows for more fulsome discussion about this topic .
- ♦ **Kitchen Tours** help residents to feel connected to their Dietary teams and food preparation.
- ♦ Work with Recreation on **food-related programming** such as cooking clubs, socials and dine-in clubs to provide opportunities to meet outside of set mealtimes to enjoy food and drink.
- ♦ Identify opportunities for **coaching and education** for residents and team members. Ex. if medical procedures are taking place in the dining room, this might be an area to focus on.



Culinary Hero: Team Member Spotlight

Shared by: Résidence Champlain LTC

This column profiles long-term care team members that have been recognized by residents and celebrated for going above and beyond. Similar to residents, our team members each have their own unique story and their own personal “why” that has guided them to pursue a career in LTC.

Here is Lisette’s story:

Welcome OARC members to our home, Résidence Champlain Long-Term Care! We are situated in the small Francophone town of L’Orignal, Ontario, which is about equidistant between Ottawa and Montreal along the Ottawa River. Our residents are primarily

Francophone and our Head Cook Lisette Beaulne, Food Services Manager Christiane Ravary, and the team make sure that our residents not only eat well, but also rejoice and celebrate eating culturally appropriate culinary favourites.

Lisette is a star! Born and raised on a farm in Ste-Bernadine, Ontario, Lise developed a strong work ethic from an early age. She has worked at Résidence Champlain for 44 years. Lisette recalls the excellent training she received from her mother, who was then the Head Cook. As a youth, Lisette started to work in the kitchen during her summer holidays. Summers came and went and after her high school graduation, Lisette commenced her love affair with cooking homemade meals for the residents. Quickly, Lisette realised that our home is special.

***“It is not a large home, it is more like a big family.
You get to know all of the residents’ likes and dislikes.”***

Champlain is home, not only because it is small, but also because Lisette has made lifelong friends here, including meeting her husband when he was employed as an orderly; they are soon to celebrate their 40th wedding anniversary!

As Head Cook, Lisette likes to create themed meals for our residents, often collaborating with the recreation department to coordinate Chinese luncheons, BBQs, St. Patrick’s Day dinner, Valentine’s Day dinner and Christmas supper.

At Christmas in 2021 when COVID-19 physical distancing rules prevented Champlain from hosting the annual family dinner, family members received Christmas lunch boxes complete with bûche de Noël and homemade Christmas cake made by our residents. Other traditional menu items included: Christmas ragoût, tourtière, tête de fromage, crétons, gâteau aux fruits. Last, but not least, the “dîner cabane à sucre” or the sugarbush lunch menu included: pea soup, omelette, bacon, pork rinds, sausages, homemade baked beans, pancakes, lots of maple syrup and for dessert...tarte au sucre, pouding chômeur and la tire sur la neige.

There have been challenges along the way. In 1998, during the great ice-storm, Lisette remembered the Military’s assistance. Also COVID-19 has created other complications such as having to use disposable styrofoam dishes which the residents do not like, and other special events such as the family picnic were also cancelled.

All in all Lisette is happy, cooking hearty soulful homemade meals such as chicken pot pie that satisfies the residents. Who does not like meatloaf?

Reflecting on how rewarding her career in LTC has been, Lisette shared, “my pay is when a resident says that they have enjoyed their meal.” She goes on to share about her home’s work culture: “I like my co-workers and my supervisor— it’s teamwork and we work well together!”

Thank you for visiting our kitchen!



How to Speak to Your Care Team in Trying Times



Residents and families often wish they could help their care team understand what they want and need. But no one wants to be a burden - and during the pandemic, residents have often stayed silent about their needs out of a wish to lighten the load on the care team.

Enter the Huddle tool. This tool can help you share your situation or need with your long-term care team in an organized way so that your care team can work with you to understand and find a solution that is reasonable and possible.

The Huddle tool will help with care planning and delivery, including making decisions together. Research studies have found the Huddle tool to be helpful in communication between residents, families and care teams.

The Huddle tool is made up of **5 guiding questions** that will help you reflect on your experience, need or concern and then organize how to share this information in a clear, efficient and effective way.

Think of your most important/significant experience lately:

1. Situation:

Describe an experience that you had lately that impacted you or your care. What details can you share about that experience?

2. Background:

In what ways did this experience affect you? Is the experience still affecting/ bothering you? [If a positive experience, what about the experience/event made you feel happy/ good?]

3. Actions:

What help (if any) did you receive for this experience?

4. Recommendations:

What are your ideas for us to work together? [How can team members help you next time? What could be done differently?]

5. Requests:

Is there a team member you would like to talk with about this experience? Are you looking for more information/resources?

Using the Tool to Implement a Change:

For example, say that your preferences or needs have changed and it's important to start your morning routine at a different time. The Huddle tool can help you to organize and articulate your thoughts and clearly communicate your ideas for how to work together with your care team to identify and carry out a new plan.

Communication with New Team Members:

Consider using the 5 questions to collaborate with new, part-time or agency team members, who may not have the background or context they need to respond to your situation. Families and care partners can also use the Huddle tool to communicate and collaborate with LTC care teams.

By working through these five questions, the resident can lead the conversation and share all the information that is important to them in a way that helps the care team understand and respond as quickly as possible. Learn to use the Huddle tool in different scenarios on the Ontario CLRI eLearning Hub - visit clri-ltc.ca/huddle.

Consider bringing this Huddle tool to a future Residents' Council meeting. What strategies have residents used to enhance communication in your home? Share your stories with us!

When to Use the Huddle Tool: Care Planning

Every resident has the right to be actively engaged in the development of their personal plan of care. This care plan captures resident preferences and routines in all areas of life: from dietary, recreation and leisure, to activities of daily living. Residents can request to see a copy of their care plan at any time and are encouraged to be part of ongoing discussions to update its contents.

In between Annual Care Conferences, where members of your care team come together once a year to review and provide reports on areas captured in your care plan, it is important for residents to speak freely with their supportive partners in LTC to voice their desires and needs. The Huddle tool can be useful in these conferences as a tool to enhance communication.

Huddle was developed by the Ontario CLRI at Baycrest and University of Toronto Bloomberg Faculty of Nursing, in collaboration with families and residents in long-term care and other stakeholders. The Ontario CLRI is mandated by the Ministry of Health and the Ministry of Long-Term Care to be a resource for the sector by providing education and sharing research and innovations to enhance the health and well-being of people who live and work in long-term care.

Are You Ready for the Citizenship Model?

By: Joan Devine, Director of Education, Pioneer Network
and OARC Board Director



What happens to a person when they move into a long-term care (LTC) home?

Do they instantly become a different person?

Do they lose their voice or the desire to have meaning and purpose in their life?

As Director of Education with the [Pioneer Network](#), a national United-States-based non-profit organization committed to transforming the culture of aging, and as Director on the Ontario Association of Residents' Councils (OARC) Board, I often hear perspectives from residents that highlight how much work is yet to be done to achieve the transformation we're seeking.

According to Gale Ramsden, a member of OARC's Resident Advisory group, when she moved into LTC, she didn't expect to be viewed any differently from when she lived in her own home in the community. Personally, she had not changed at all, aside from health issues that needed more support, and yet nothing could have prepared her for the attitude shift she felt from others towards her when she became a resident. OARC Director Dorothy Asselstine echoed these thoughts, asking the question, "why am I now a resident, not simply a person living in a different home setting?"

"Resident," she shared, "feels like a label given to people upon moving in, and it conjures up the notion that they are now different, entitled to different things, and even deserving of different things or treatment."

Gale and Dorothy's experience may be similar for many individuals who live in LTC homes. We know that once a person moves into LTC, it is common for them to be seen and treated differently. In such a highly regulated and routinized setting where resources are stretched, it makes it increasingly difficult for resident voices to be heard, and all too often there is little consideration for finding ways to support even the simplest of preferences, let alone true meaning and purpose. Often quite unintentionally, residents are seen as passive recipients of care – by their caregivers, their family members and sometimes even the resident themselves. The question is why, and does it have to be this way? There have been many people, going

back as far as 50 years ago, who clearly have been saying NO, and yet, the institutional structure that is the foundation of LTC services, that has been a part of creating this reality, has persisted, and these individuals will tell you that change has not happened anywhere close to the speed in which it should have.

The change that many people have been working to bring about is the very culture of LTC homes. They see a need to create a culture that drives out institutional practices, replacing them with practices that are grounded in the [values of person-directed care and services](#). It seems like this would be common sense, and such a natural thing – who doesn't want to be a part of a culture in which they have a say? And yet, it has not happened. Why has this been so elusive for so many individuals who not only live, but work, in a LTC home?

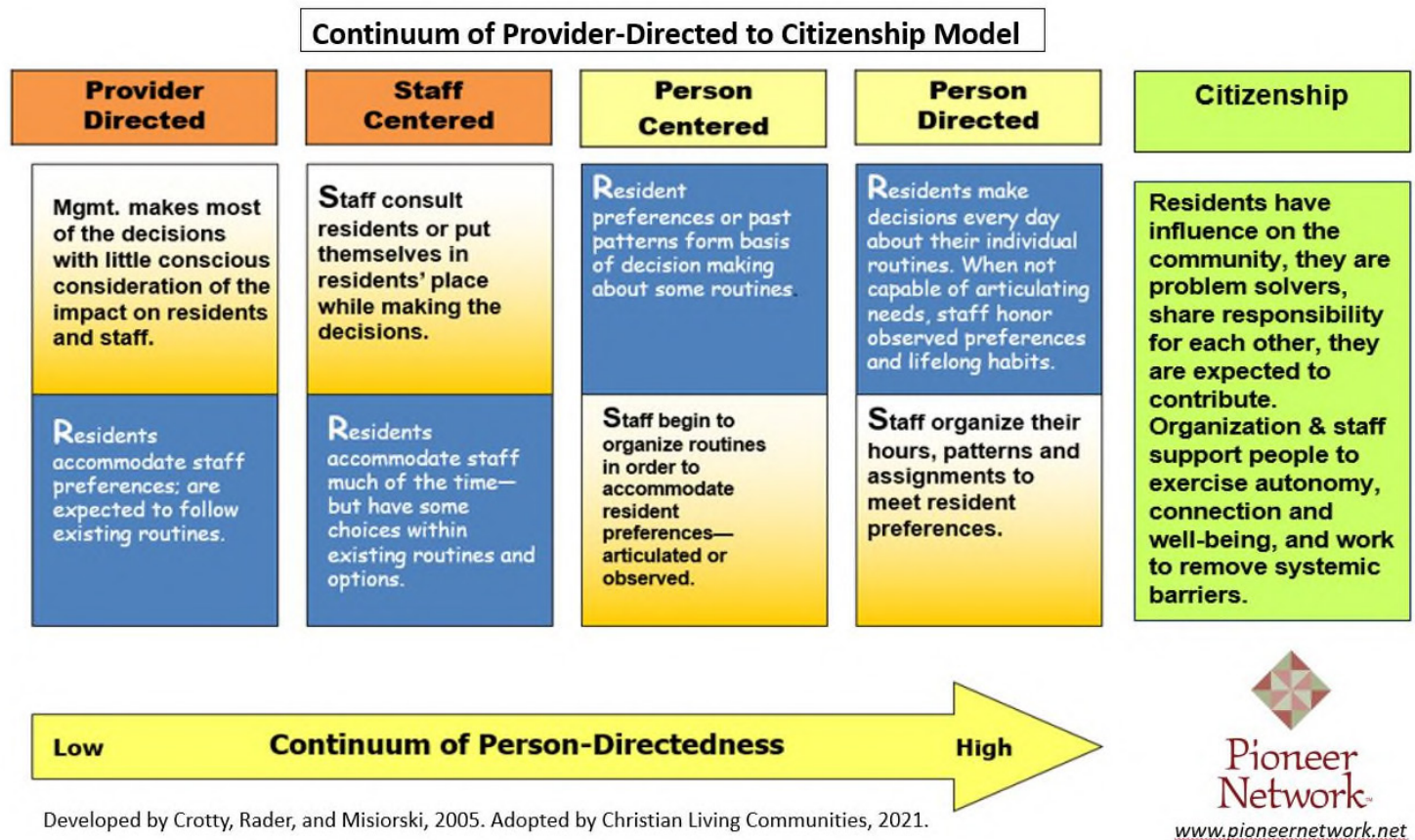
It was 25 years ago that [Pioneer Network](#) was founded by a group of innovative leaders whose mission was to advocate for and facilitate deep system change in the culture of aging. And yet, even today, far too many LTC homes continue to be run based on a model and a culture that is Provider-directed, with management making the decisions and residents expected to accommodate staff preferences.

But there are many other LTC homes who haven't been standing still these past 25 years. They have worked hard to change the culture, moving forward along the **Continuum of Person-Directed Culture**, defined by Mary Tess Crotty, Joanne Rader, and Sue Misiorski and developed in collaboration with Pioneer Network in 2005 (pictured on paged 14).

The continuum starts with 'Provider-directed', the model on which LTC homes were first built. From there, it moves to a 'Staff-centered' approach in which residents are consulted by staff when decisions are being made, and yet residents still accommodate staff much of the time. As an organization's culture grows, they move to 'Person-centered', where resident preferences and past patterns are considered when making decisions and defining routines. This is certainly better than where we started, but still leaves residents without the voice they deserve to have, and so the continuum moves on to 'Person-directed'. At this stage of the continuum, residents make decisions about their individual routines and staff organize their hours and daily work in order to meet resident preferences.

For many years, the continuum stopped here. It was felt that by creating a culture that was Person-directed, you had achieved the ultimate goal. Achieving this level on the continuum is not easy, and while there are many LTC homes who have achieved this, it is not as common as it should be. But the good thing for all of us is that for some who did achieve this level on the continuum, there was a nagging question – is this as good as it gets? How could it be better?

Citizenship Model of LTC



One community that asked this question – and found an answer – was Clermont Park, a Christian Living Community (CLC) located in Denver, Colorado. In [Can We Talk? A Culture of Citizenship](#), a blog written by Verna Cavey, Independent Living Resident and Moriah Bernhardt, Senior Director of Rhythms Programs for CLC, they share that **the Citizenship model is all about disrupting the status quo**, which as they had learned during the COVID-19 pandemic, wasn't working. It is about addressing the need for radical transformation.

In a Citizenship Model, all members of the community — leadership, team members, residents and their families — are participants in community with obligations toward each other. All are accountable for treating each other with respect and dignity. Residents are no longer perceived as customers or consumers, but rather active citizens of the community, and staff are not seen as “serving” the residents.

Sound pretty radical? Yes, but when introduced to residents and providers, there was a resounding call for change and a strong statement that they were ready to get started.

The teams at CLC and Pioneer Network have added Citizenship to the [Continuum of Resident-Directed Culture](#) document, challenging us all to see this as the new goal. Will moving to a Citizenship model be easy? No, as the team at CLC will tell you, but then **most things worth doing aren't easy**. There is a lot of education to be done for residents, staff, family members, regulators, and the general public.

Consider what living in a LTC home whose culture is grounded in a Citizenship Model would be like. How it would feel to be seen as an active, vibrant, and equal member of the community in which you live? What it would be like if when a new individual moved into the home they were asked “what will provide meaning and purpose for you – and what gifts and talents can you bring to the community?”, rather than focusing on what they have lost, or as Dorothy and Gale experienced, feeling like they were now labeled and different.

It's time to push the envelope and advocate for moving along the continuum of Person-Directed Culture. There may be stops along the way, but we all need to keep our eye on the final destination, Citizenship. It's what every person living in a long term LTC deserves! □

Resident Reactions to the Citizenship Model :

“I love the idea of a Citizenship model. Asking someone what they think they might like to contribute to the community is such an empowering idea. I'm thinking of my husband Dean when he had to move into a long-term care setting. He needed help with everything. But with compassionate conversation you would find someone who loved one on one conversations, wrote poetry, had a great sense of humour, was great at resolving conflict etc.... He was not done yet!” - Dorothy, Resident Voice Director, OARC

Resources:

[Continuum of Person-Directed Culture](#), Developed by Crotty, Rader, and Sue Misiorski, 2005. Adapted by Christian Living Communities and Pioneer Network, 2021.

[Disrupting the Status Quo of Senior Living – A Mindshift](#) by Jill Vitali-Aussem.

[Pioneer Network Mission, Vision and Values](#)

[Can We Talk? A Culture of Citizenship](#) by Verna Cavey and Moriah Bernhardt.

[More about Resident-Directed Communities: Findings from a Conversation with Colleagues](#) by Verna Cavey and Moriah Bernhardt.

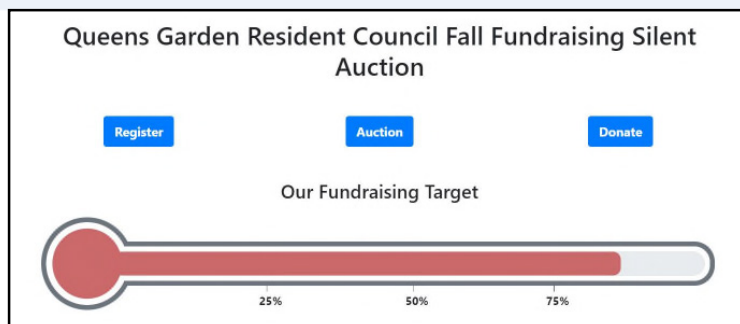


Online Fundraising Success at Queens Garden

Shared by: Sue Walsh, Program and Support Services Manager

Since Queens Garden long-term care home opened in 2002 in Hamilton, Ontario, the Recreation department has helped to facilitate an annual Fall Bazaar. To support the event, residents have welcomed opportunities to be actively involved in the

preparations, including baking, knitting, making crafts and selling raffle tickets from September through November. Each year, on the day of the Bazaar, the home was alive with hustle and bustle. Community members, residents, family and friends enjoyed volunteering and soaking up the fruits of their labour with shopping, indulging in baked goods and winning prizes! This event has traditionally raised several thousand dollars every year for the Residents' Council to spend in various ways— investing in fitness equipment, sponsoring special outings, stocking alcohol for Pub Nights and purchasing Christmas gifts for the in-home Daycare children, staff and residents.



In 2020, with the pandemic in full swing, hosting an in-house Fall Bazaar was not a possibility. Determined to find a creative solution, the Recreation department and Family Council members partnered to envision and execute an online Auction-style fundraiser using the website auctria.com to generate funds for the Residents' Council. The group worked together to solicit donations of raffle prizes ranging from curated gift sets to single items appealing to folks of all ages. The virtual event raised \$2000 in its first year and over \$2500 in 2021.

Reflecting on the active involvement and generous contributions of the Queens Garden Family Council, the Residents' Council felt strongly that they should receive part of the funds. The Family Council has been instrumental in hosting staff appreciation events and hosted a celebratory luncheon in honour of the home's 20-year anniversary.

Queens Garden Residents' Council President and OARC REAL group member, Steven Wenzowski, speaks highly of the collaboration between the Council groups at his home. "We have a very progressive Family Council here and they are always looking out for the residents," he says. Steven has recently approached the Family Council to incorporate a review of the Residents' Bill of Rights at each of their meetings (the way Residents' Council currently does) to increase education and awareness of all stakeholders. ***Great work Queens Garden team!***

Enhancing Resident-Centred Care During a Pandemic

Shared by: Kelly Couwenberg, PSW, BSO, Watford Quality Care Centre



The above images were part of a photo project completed during our person-centred care journey.

Watford Quality Care Centre (WQCC), is a 63-bed long-term care home, located in the rural community of Watford. In 2019, WQCC embarked a journey with Registered Nurses' Association of Ontario (RNAO), to become a Best Practice Spotlight Organization (BPSO). Person-and Family-Centred Care (PFCC) was a Best Practice Guideline (BPG) implemented and integrated into every aspect of the organization. In this article, we've highlighted some of the strategies our home embraced to become more person-centred while also navigating the challenges of Ontario's constantly changing pandemic guidelines.

Our team set out to educate members of our community about how a person-centred approach has the potential to improve clinical outcomes and resident satisfaction with care. The BPG identifies the tenets of empowerment, communication and shared decision-making as being central to this work.

Our home made the decision to embrace OARC's *Through Our Eyes: Bringing the Residents' Bill of Rights Alive* program as an educational tool to support us during our process. We incorporated the "27-the line" video (which is part of the *Through Our Eyes* resource) into the mandatory training for all Watford team members to make this learning more impactful. Early on in our journey, our group met with the Watford Residents' Council to explain what we were doing and why. Having resident support and understanding was an important part of our process.

Our team blended the *Through Our Eyes* "I Am Statement" template with the *All About Me* resource from the Alzheimer's Society to create a home-specific document to capture each resident's personhood and individualism. It included tidbits of personal information that was posted (with permission) above each resident's bed, to be used as a conversation starter for team

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members when interacting with residents.

These person-centred resources also helped to inform a “Daily Report and Tip Sheet” which detailed each resident’s individualized aspects of care, preferences, and changes in medical status to ensure residents’ care and needs are being met consistently by our team.

During the pandemic, isolation and social distancing posed new challenges to communication, and the physical separation from their loved ones increased resident frustrations and, in some cases, resulted in expressive behaviours. Using a person-centred approach allowed team members to become more sensitive and responsive to resident needs during this time. Team members adopted strategies to validate the behaviours and better understand the meaning behind them. Staff actions, reactions and body language positively affected situations and outcomes. This heightened awareness of the staff also resulted in a decrease in resident complaints. By communicating with residents and engaging them in shared decision-making, residents had more opportunities to be meaningfully involved when exploring alternatives or adaptations in care, which also contributed to increased satisfaction.

Our team also embraced technology as a way to keep residents and their loved ones connected through virtual visits, emails and Facebook. Families appreciated seeing pictures and videos of residents engaging in activities within the home as these exchanges provided

much-needed reassurance and a sense of peace that resident care and interactions reflected dignity and respect.

The Life Enrichment Department used a range of creative strategies to ensure that residents were engaged in activities they enjoyed pre-pandemic. Window tic-tac-toe was a hit, providing range of motion to clean windows to play again. Lucynt, an interactive magic table, projects images, games and activities (as pictured below). It increases physical and mental stimulation by simulating fishing using a pool noodle as a pole to catch fish projected onto the table. Robotic cats and dogs soothed the pet lovers. A newly purchased blanket warmer wrapped around a resident comforted those missing hugs. The decrease in anxiety and behaviours empowered residents to be more engaged in daily life in the home.



By implementing RNAO's Person-and Family-Centred Best Practice Guideline, we were able to cultivate a positive living and work environment where the mental health and well-being of everyone was supported and prioritized. We have witnessed first-hand how empowered, happy and healthy staff, who enjoy their work and get to know the residents on a more personal basis, are better equipped to contribute to a person-centred home environment.

Reflecting on the transformation in care and home culture at Watford, resident Audrey Beattie shared, "we couldn't ask for better nursing care; kindness, understanding, patience, and knowledge - almost always with a smile!"

For resident Linda Eastman, her home's person-centred efforts continue to be a source of pride and satisfaction. She says, "the most positive thing about being here is, you can be yourself!"

Great work, Watford Quality Care Centre! Thank you for sharing with us!

Peer Connection Through OARC Resident Forums



Have you ever wondered how other residents have fared during the pandemic? Are you curious how other Residents' Council groups operate and how they've adapted over the last 2+ years? Would you like to meet new people from other long-term care homes?

Consider joining us on **Thursdays at 2pm** for OARC's weekly Resident Forums.

Facilitated by OARC Resident Leaders using the Zoom platform (with phone-in option), our Forums provide an avenue for ALL residents from across Ontario to meet new friends, ask questions, share concerns and successes and to stay informed.

Learn more here: <https://www.ontarc.com/resident-forums.html>.

SAVE THE DATE

Residents' Council Week 2022

September 12th - 18th!



What makes your Residents' Council unique?

What makes you the most proud about your Council and their collective achievements?

It's never too early to start planning for a successful week of recognition for your home's Residents' Council!

Stay tuned for a special #RCWeek promotional package coming to your home this summer with posters, stickers, placemats and more!