

CASSELLHOLME
BOARD OF MANAGEMENT MEETING

THURSDAY, OCTOBER 24, 2024

MINUTES

Date: Thursday, October 24, 2024

Location: Cassellholme Garden Room

Present: Mark King, Chair
Chris Mayne, Vice Chair
Peter Chirico
Michelle Lahay
Robert Corriveau

Staff: Angie Punnett, Administrator
Billy Brooks, Chief Financial Officer
Dave Smits, Director, Capital Facilities
Camille Bigras, Quality Assurance Director
Julie Pilkey, Secretary

Regrets:

Guests: Will Petrie, Accounting Intern
Monique Peters, Family Council

	ITEM	ACTION
A.	CALL TO ORDER	
	<p>MEETING RECORDED</p> <p><i>“Moved by Robert Corriveau and seconded by Chris Mayne that the meeting be called to order at 5:03 p.m.”</i></p> <p>Res. #113-24 <u>Carried</u></p>	
	1. Approval of Agenda	
	<p>Peter requested to add a Notice of Motion – 7.4 In-Camera – Confidential Matter</p> <p><i>“Moved by Peter Chirico and seconded by Michelle Lahay that the Board approved the Agenda for this meeting, as amended.”</i></p> <p>Res. #114-24 <u>Carried</u></p>	
	2. Conflict of Interest	
	<p><i>“Moved by Chris Mayne and seconded by Robert Corriveau that no Board Members present have declared a conflict of interest.”</i></p> <p>Res. #115-24 <u>Carried</u></p>	

3. Approval of Minutes		
	<p>3.1 Approval of the Minutes of the Regular Board Meeting held on September 26, 2024</p> <p>Remove Angie Punnett from the attendance. She did not attend the meeting.</p> <p><i>“Moved by Chris Mayne and seconded by Robert Corriveau that the minutes of the Regular Board Meeting, held on September 26, 2024, be adopted as amended.”</i></p> <p>Res. #116-24 <u>Carried</u></p>	
4. New Business		
	No New Business Noted	
5. Redevelopment		
	<p>5.1 Construction Update <i>(Dave Smits)</i> Report in package. New resident move in date is scheduled for May 4, 2025. All window testing will be completed next week. Angie received a response from Ontario Health – the proposal for the Designated Specialized Units funding was not selected at this time. Angie will continue to reach out and submit a new proposal for the next round of funding.</p> <p>5.2 Government Relations Angie, Billy and Dave have been attending the Municipality Council Meetings. They have one more to attend next week. Feedback from these meetings is a request for all Municipalities to get together and move forward with asking for funding as a group. Julie to send out some tentative dates to the Board in November. Once a date is confirmed, send an invite to the Municipalities to have someone from their council attend.</p>	
6. Operations		
	<p>6.1 Operations Update Update in package. Ministry of Labour Visit – Oct 16/24 – Slips, Trips and Falls Prevention Initiative. Fire Department Annual Inspection – Oct 23/24 – minor violations and recommendations. Dave added that a 3rd Party was contacted to review the Infection Control processes in the construction site to ensure they are meeting all infection control standards.</p> <p>6.2 Cassellholme Q3 Year-to-Date Operation Budget</p> <p><i>“Moved by Peter Chirico and seconded by Michelle Lahay that the Board approve the Cassellholme Q3 Year-to-Date Operating Budget-to-Actual Results for the period ending September 30, 2024, as presented.”</i></p> <p>Res. #117-24 <u>Carried</u></p> <p>6.3 Capital Budget-to Actual Results for the Redevelopment Project</p> <p><i>“Moved Chris Mayne and seconded by Robert Corriveau that the Board approve the Capital Budget-to-Actual Results for the Redevelopment Project ending September 30, 2024, and Forecasted Capital Levy Estimates, as presented.”</i></p> <p>Res. #118-24 <u>Carried</u></p>	

	<p>6.4 Community Support Services Q2 Year-to-Date Budget</p> <p><i>“Moved by Robert Corriveau and seconded by Chris Mayne that the Board approve the 2024/25 Community Support Services Q2 Year-to-Date Budget-to-Actual Results for the period ending September 30, 2024, as presented.”</i></p> <p>Res. #119-24 <u>Carried</u></p>	
7. IN - CAMERA		
	<p>Guests left the meeting</p> <p><i>“Moved by Peter Chirico and seconded by Michelle Lahay that the Board proceed to an In-Camera session at 5:56 p.m.”</i></p> <p>Res. #120-24 <u>Carried</u></p> <p>7.1 Approval of the In-Camera Minutes – dated September 26, 2024</p> <p style="text-align: center;">In-Camera Motion – Res. #121-24</p> <p>7.2 Confidential Matter 7.3 Confidential Matter 7.4 Confidential Matter – Peter requested a Notice of Motion for the next meeting</p> <p><i>“Moved by Chris Mayne and seconded by Robert Corriveau that the Board approve the In-Camera session to be adjourned at 6:42 p.m.”</i></p> <p>Res. #122-24 <u>Carried</u></p>	
B. CORRESPONDENCE		
	<p>B.1. Chris Mayne shared a motion passed at the last Castle Arms Management Services Board Meeting. The CAMS Board approved to donate up to \$20,000.00 towards the purchase of the Cassellholme Trishaw Bike.</p>	
C. REQUEST FOR FUTURE AGENDA ITEMS		
	No Items Noted	
D. DATE OF NEXT MEETING		
	Regular Meeting - Thursday November 28, 2024 @ 5:00 p.m. – or at the call of the Chair.	
E. ADJOURNMENT		
	<p><i>“Moved by Peter Chirico and seconded by Michelle Lahay that the meeting be adjourned at 6:45 p.m.”</i></p> <p>Res. #123-24 Carried</p>	

Secretary

Chairman

Oct 21, 2024

Subject: Cassellholme Redevelopment Update – October 21, 2024

Construction Activity

Highlights:

Phase 00 - Work complete.

Phase 1-A – Work complete

Phase 1-B sequencing remains unchanged from the previous report.

Updated schedule (Rev. 4) for Phase 1 is included and coordinated with Cassellholme.

Schedule comments in this report are up to date with site progress as of the date of issuance for this report.

PHASE 1-B

- Exterior cladding work is in progress, including masonry and metal cladding.
- Interior framing work on all floors is largely complete. Small areas remain to be framed and are being coordinated with other trades.
- Interior boarding is ongoing on Levels 1, 2, 3, 4, and 5.
- Elevator installation is ongoing
- Mechanical and electrical above ceiling rough-ins and are ongoing, as well as wall rough-ins.
- All roofing work is complete, except for the balconies.
- Concrete slab floor crack repair is scheduled.
- Link construction is in progress.
- Painting and millwork installation is in progress.
- Drywall and T-bar ceiling in progress.
- Floor prep work for flooring is in progress.
- Landscape work along Olive Street in progress.

Schedule:

The new resident move date is May 4th 2024. As shown in Percon's monthly report they have identified their schedule comments. IPAC activities have improved and Percon is receptive to work/catch up to meet the 2017 standards. We continue to review the schedule, as always, and we will provide a further update when it is received.

Transition Planning

An updated summary is attached for reference.

Highlights:

NFN Partnership/Indigenous Unit Operation and Licensing – No further update.

Bed Application Licensing – Continue to have discussions with OH and Ministry on next steps.

Staffing Plan - No further update this month.

Staff Training Plan – Plan has been developed using a number of different delivery methods. Trainers will be selected in early fall and training will commence.

Laundry Plan - No further update this month.

Storage Plan – Proposal for Just in Time delivery proposal expected Fall 2024. Work continuing on detailed planning for storage room configuration on each RHA.

Move Plan – New schedule date for week of April 28th and resident in rooms May 4th 2025. Next scheduled meeting January 2025, in person review.

Training Plan – Meetings with various new equipment suppliers continuing so training plans can be confirmed.

IT – All network and CCTV equipment supply and installation pricing has now been approved. Work ongoing for the resident entertainment system and facility phone system.

Waste Handling – No further updates at this time.

Outdoor space – Completed

FF&E Budget – Budget validation ongoing with a final check back to departments in terms of the items they will require.

Nursing Transition Planning – Work underway.

Occupancy Planning –Occupancy Plan to be submitted mid December-Mid January to MLTC.

MLTC Check Lists – Work continuing.

Art/Fundraising – Working group being established.

Emergency Planning – Work progressing well; on track

Change Order Log - Please see the attached

Budget Update - September summary attached.

Change Order Log - Oct 16 2024																
Percon																
RFE	RFE	PC	CD	SI	RFI	CO	Work Description	Reason	Status	Date Issued	Quote Sent	Approval Date	Quoted	Approved	Contract Time (days)	
1	1			1		1	Millwork revisions/clarifications	Coordination	Approved	18-Feb-22	17-Mar-22	28-Mar-22	\$34,553.53	\$34,553.53		
2	2	1				2	Emergency Switchboard revisions	Coordination	Approved	17-Feb-22	17-Mar-22	28-Mar-22	\$4,919.20	\$4,919.20		
3	3					3	Increase Builders Risk Insurance to Include Soft Costs	Lender Requirement	Approved	30-Mar-22	30-Mar-22	05-Apr-22	\$29,846.88	\$29,846.88		
4	4					3	Cost associated to add Wrap Up Insurance Policy	Lender Requirement	Approved	30-Mar-22	30-Mar-22	05-Apr-22	\$282,579.86	\$282,579.86		
5	5R1	2				5	Door revisions	Coordination	Approved	15-Mar-22	07-Apr-22	06-May-22	\$4,677.20	\$4,677.20		
6	6	3				4	Washroom Accessories Revisions	Coordination	Approved	28-Mar-22	22-Apr-22	25-Apr-22	\$863.50	\$863.50		
7	7	9					Removal existing foundations (Unit rate only - see RFE 16)		Cancelled	21-Apr-22	25-Apr-22					
8	8	16				6	Provide new water valve at property line	AHJ	Approved	05-May-22	06-May-22	06-May-22	\$8,607.50	\$8,607.50		
9	9	4				41	North wing door revisions	Coordination	Approved	28-Mar-22	16-Jan-23	19-Jan-23	\$3,756.50	\$3,756.50		
10	10	5				7	Elevator pit lighting revisions	AHJ	Approved	29-Mar-22	09-May-22	16-May-22	(\$1,361.00)	(\$1,361.00)		
11	11	6				8	Transformer modifications	Cost Saving	Approved	07-Apr-22	09-May-22	27-May-22	(\$6,000.00)	(\$6,000.00)		
12	12 R1					9	Millwork edging revisions & Drawer modifications (per email April 25, 2022)	Cost Saving	Approved	N/A	19-May-22	01-Jun-22	(\$11,906.00)	(\$11,906.00)		
13	13						CANCELLED: Drawer modifications (SEE RFE 12R1)		Cancelled	N/A	09-May-22					
14	14	17				12	Temporary Hydrant at North Wing	AHJ	Approved	12-Apr-22	16-May-22	01-Jun-22	\$5,585.25	\$5,585.25		
15	15R2	7R1				36	Phase 1 temporary door revisions and hardware coordination	Coordination	Approved	02-Dec-22	06-Dec-22	10-Jan-22	\$4,539.70	\$4,539.70		
16	16R2	9				15	Removal of existing foundations	Site Condition	Approved	21-Apr-22	20-May-22	27-Jun-22	\$70,326.38	\$70,326.38		
17	17	11				11	Hardware revisions to Door V101	Coordination	Approved	27-Apr-22	19-May-22	01-Jun-22	\$6,046.70	\$6,046.70		
18	18R2	18				14	Revise pipe material storm main tee at Olive St.	Site Condition	Approved	13-May-22	20-May-22	29-Jun-22	\$7,885.44	\$7,885.44		
19	19	12				10	Temporary lighting in courtyard parking	Health & Safety	Approved	27-Apr-22	25-May-22	01-Jun-22	\$15,888.40	\$15,888.40		
20	20R1	8				13	Add card reader control for rear doors on elevators 1024 & 1025	Design Improvement	Approved	25-Apr-22	30-May-22	10-Jun-22	\$1,512.50	\$1,512.50		
21	21R1					16	Temporary Door Hardware supplied by Owner's Security Provider	Schedule Change	Approved	22-Jun-22	08-Jul-22	22-Jul-22	(\$6,650.00)	(\$6,650.00)		
22	22	23					Investigate/repair storm line blockage near property line at Olive St.	Site Condition	Cancelled	23-Jun-22	06-Jul-22					
23	23R2			19R1		17 R	Corrections and revisions to parking lot line in temporary and east parking areas	Owner Requested	Approved	16-Aug-22	15-Sep-22	22-Sep-22	\$3,454.00	\$3,454.00		
24	24R4	22R1				27	Provide temporary power feed to east parking lot lighting	Coordination	Approved	19-Aug-22	24-Oct-22	27-Oct-22	(\$8,416.88)	(\$8,416.88)		
25	25R1	25R1				18	Revision to waterline connections to existing building - Revised	Site Condition	Approved	03-Aug-22	05-Aug-22	11-Aug-22	\$42,426.23	\$42,426.23		
26	26	20				19	Revision to electrical panel E-1-C	Coordination	Approved	02-Jun-22	09-Aug-22	11-Aug-22	\$6,702.30	\$6,702.30		
27	27R1	19R1				23	Revise acoustic ceiling tile materials	Cost Saving	Approved	15-Sep-22	28-Sep-22	05-Oct-22	(\$66,054.48)	(\$66,054.48)		
28	28			23		20	Pile Rock Points	Contractor Requested	Approved	03-Aug-22	12-Aug-22	12-Aug-22	\$98,826.40	\$98,826.40		
29	29R3	28				33	Revision to Phase 1 & 2 sanitary and storm connections at grade beams	Coordination	Approved	03-Aug-22	09-Nov-22	22-Nov-22	\$21,724.63	\$21,724.63		
30	30	26				21	Revision to under-slab plumbing and inverts	Coordination	Approved	26-Jul-22	18-Aug-22	22-Sep-22	\$15,196.50	\$15,196.50		
31	31	10				40	Revision to the fire and combination fire/smoke dampers	AHJ	Approved	26-Apr-22	15-Sep-22	26-Jan-23	\$134,858.85	\$134,858.85		
32	32R1	14					Door frame material revisions along corridor 1165	Design Improvement	Not Accepted	31-Aug-22	31-Aug-22					
33	33					24	Revised wood frame design for Jams	Cost Saving	Approved	09-Sep-22	28-Sep-22	05-Oct-22	(\$12,750.00)	(\$12,750.00)		
34	34R4	21R3				29	Provide new grounding loop for new building service	AHJ	Approved	22-Aug-22	28-Oct-22	08-Nov-22	\$77,892.15	\$77,892.15		
35	35R3	27R2				35	Delete deck mounted soap dispensers	Owner Requested	Approved	21-Nov-22	05-Dec-22	10-Jan-22	(\$4,081.00)	(\$4,081.00)		
36	36R4	15R				117	Door hardware revisions to door 1147a	Coordination	Pending	12-Oct-22	18-Apr-24	29-Apr-24	\$10,606.20	\$10,606.20		
37	37	13R				31	Janitor room door revisions	Coordination	Approved	19-Sep-22	19-Sep-22	10-Nov-22	\$4,785.00	\$4,785.00		
38	38	29				22	Existing Service Plug Requirement	AHJ	Approved	31-Aug-22	23-Sep-22	10-Oct-22	\$2,414.10	\$2,414.10		
41	41	24R1				32	Provide grilles on type 'O' fin radiation in trench in Auditorium 1005	Coordination	Approved	22-Sep-22	17-Oct-22	15-Nov-22	\$23,009.80	\$23,009.80		
		30					After hours paving of East Parking Lot	Owner Requested	Cancelled	16-Sep-22						
39	39	31					Additional curb at edge of existing parking area	Owner Requested	Cancelled	16-Sep-22	28-Sep-22					
40	40R1	32R1				25	Revision to existing sanitary line	Site Condition	Approved	21-Sep-22	29-Sep-22	06-Oct-22	\$61,577.36	\$61,577.36		
47	47R1	33				43	Structural revisions to Phase 1 framing, Phase 2 framing, pile caps and piles	Coordination	Approved	23-Sep-22	11-Jan-23	22-Jan-23	\$37,038.71	\$37,038.71		
42	42R1	34				26	Water storage tank layout and structural revisions	Coordination	Approved	26-Sep-22	14-Oct-22	27-Oct-22	\$3,597.83	\$3,597.83		
43	43	35R				61	Revision to North Wing elevator brackets for rail attachments	Coordination	Approved	07-Oct-22	20-Jun-23	27-Jun-23	\$11,964.96	\$11,964.96		
53	53	36R2				44	Revision to brace frame VB105	Coordination	Approved	09-Nov-22	13-Dec-22	26-Jan-23	\$9,497.44	\$9,497.44		
45	45	37				30	Revision to light fixtures P5 and P6	Coordination	Approved	11-Oct-22	31-Oct-22	08-Nov-22	\$2,369.33	\$2,369.33		
48	48	38				37	Structural beam revisions at Block B roof terraces balconies	Coordination	Approved	20-Oct-22	13-Dec-22	10-Jan-23	\$969.52	\$969.52		
49	49R2			36R1		60	Structural clarifications - structural steel and rebar shop drawings	Coordination	Approved	20-Jan-23	10-Mar-23	28-Jun-23	\$2,768.37	\$2,768.37		
46				7R1		28	Provide slab Mounting brackets for smoke shelter	Site Condition	Approved	17-Oct-22	25-Oct-22	01-Nov-22	\$1,050.68	\$1,050.68		
51	51R1	39				38	Add smoke detectors in corridors of RHA areas	Coordination	Approved	08-Nov-22	13-Dec-22	10-Jan-23	\$5,258.00	\$5,258.00		
44R1					22	34	Provide additional steel modifications outlined in SI#22	Coordination	Approved	27-Jul-22	16-Nov-22	22-Nov-22	\$3,300.11	\$3,300.11		
		40					Additional elevator controls	Coordination	Pending	07-Dec-22						
56	56	41				45	Revision to sliding door frame details	Coordination	Approved	21-Dec-22	08-Feb-23	28-Feb-23	\$8,783.50	\$8,783.50		
54	54	42				46	Provide fixed mirrors in Staff washrooms	Coordination	Approved	10-Jan-23	03-Feb-23	28-Feb-23	\$7,507.50	\$7,507.50		
54R1	54R1	42				48	Correct the cost of fixed mirrors from CO#46	Coordination	Approved	10-Jan-23	03-Mar-23	21-Mar-23	(\$2,035.00)	-\$2,035.00		
52	52			39		39	Provide relay bases on smoke detectors related to door hold opens for SI#39	AHJ	Approved	08-Nov-22	13-Dec-22	10-Jan-23	\$3,014.00	\$3,014.00		
55	55	43					Revise range hood colour	Owner Requested	Cancelled	18-Jan-23						
57	57	44				47	Revision to LH2 & LH2-1 lavatory fixtures	Coordination	Approved	18-Jan-23	17-Jan-23	21-Feb-23	\$5,193.10	\$5,193.10		
54	54R1			41		42	Remedial modifications to pile caps and grade beams - Phase 1	Site Condition	Approved	28-Nov-22	10-Jan-23	20-Jan-23	\$14,145.87	\$14,145.87		
58	58	45					Revisions to operable window vent type	Coordination	Cancelled	06-Feb-23						
60	60	46				52	Modifications to generator ESB breakers	Coordination	Approved	07-Feb-23	24-Mar-23	03-May-23	\$19,405.10	\$19,405.10		
95	95	47				79	Revise office door locations, electrical from PC47	Owner Requested	Approved	23-Mar-23	08-Sep-23	09-Sep-25	\$10,312.50	\$10,312.50		
72	72R3	47				73	Revise office door locations, typical millwork from PC47	Owner Requested	Approved	15-Aug-23	15-Aug-23	07-May-24	\$11,985.60	\$11,985.60		
59	59	48R				49	Revisions to electrical to accommodate Kitchen Equipment Phase 1	Coordination	Approved	14-Feb-23	17-Mar-23	22-Mar-23	\$501.60	\$501.60		
62	62R2	49				54	Typical Bedroom Mockup	Owner Requested	Approved	09-Mar-23	03-May-23	06-Jun-23	\$75,577.95	\$75,577.95		
		50					Revise rated floor assembly ULC Listed Design No.	Cost Saving	Cancelled	22-Mar-23						
		51				50	Revision to select light fixtures to alternate product	Design Improvement	Approved	22-Mar-23	20-Apr-23	26-Apr-23	\$0.00	\$0.00		
65	65	52				57	Delete select cubical curtains and provide track breaks in patient lift tracks	Coordination	Approved	29-Mar-23	12-May-23	01-Jun-23	(\$5,382.50)	(\$5,382.50)		
75	75R1	53				69	Electrical revisions for elevator connections	Coordination	Approved	30-Mar-23	29-Jun-23	03-Aug-23	\$18,212.70	\$18,212.70		

							Revisions to interior expansion joints types	Coordination	Cancelled	30-Mar-23							
68	68	54				56	Existing Water Room pull station	Coordination	Approved	05-Apr-23	17-May-23	23-May-23	\$1,142.90	\$1,142.90			
67	67	56				55	Revision to brace frame VB205	Coordination	Approved	17-Apr-23	12-May-23	18-May-23	\$1,164.02	\$1,164.02			
82	82R2	57R				78	Revision to biometric readers	Owner Requested	Approved	18-Apr-23	01-Sep-23	25-Sep-23	-\$21,023.00	-\$21,023.00			
64	64				49	51	Tree Removal at End of Block B	Site Condition	Approved	03-Nov-22	20-Apr-23	26-Apr-23	\$2,117.50	\$2,117.50			
66	66R1	58				68	Clarification to area drains	Coordination	Approved	20-Apr-23	19-Jul-23	27-Jul-23	\$25,942.40	\$25,942.40			
77	77R1	59				85	Fiber optic connection to existing building	Coordination	Approved	02-May-23	25-Jul-23	12-Oct-23	\$10,118.90	\$10,118.90			
78	78	60				63	Additional pot light in Bedroom Type "D"	Coordination	Approved	02-May-23	26-Jun-23	04-Jul-23	\$2,865.50	\$2,865.50			
		61					Revision to clarify clay unit product	Discontinued Product	Pending	09-May-23							
71	71	62R				59R	Modifications to elevator framing for door supports and additional pit ladder	Coordination	Approved	23-May-23	05-Jun-23	27-Jun-23	\$66,131.08	\$66,131.08			2
		63					Patching of existing asphalt drive-ways	Owner Requested	Cancelled	23-May-23							
81	81	64				65	Flooring revisions	Coordination	Approved	25-May-23	07-Jul-23	20-Jul-23	\$7,090.72	\$7,090.72			
80	80R2	65				84	Owner requested revisions to Kitchen Equipment	Owner Requested	Approved	25-May-23	22-Sep-23	03-Oct-23	\$68,113.10	\$68,113.10			
73	73	66				62	Delete kitchen equipment soap and towel dispenser accessories	Owner Requested	Approved	29-May-23	20-Jun-23	27-Jun-23	(\$2,670.00)	(\$2,670.00)			
126	126R2	67R3				115	Tie-in to existing fire alarm and PA systems	Coordination	Approved	30-May-23	21-Mar-24	12-Apr-24	\$18,950.80	\$18,950.80			
87	87	68				70	Revision to louvres	Coordination	Approved	30-May-23	02-Aug-23	08-Aug-23	\$660.00	\$660.00			
68	68	69				58	Patient lift system power supply covers	Owner Requested	Approved	01-Jun-23	05-Jun-23	22-Jun-23	\$10,222.30	\$10,222.30			
83	83	70				67	Revision to stair guard assembly	Coordination	Approved	06-Jun-23	19-Jul-23	26-Jul-23	\$726.00	\$726.00			
84	84	71				66	Revision to Ceramic tile type CT2.1 in select rooms	Owner Requested	Approved	15-Jun-23	19-Jul-23	25-Jul-23	\$0.00	\$0.00			
74	74R1	72R				64	Temporary support angles for Block C structural frame	Coordination	Approved	13-Jun-23	28-Jun-23	04-Jul-23	\$10,563.30	\$10,563.30			
69	69R1					71	Removal of existing foundations at electrical duct bank trench	Site Condition	Approved	14-Jun-23	07-Jul-23	09-Aug-23	\$10,095.80	\$10,095.80			
76	76R3	61				72	Revision to clay unit masonry product	Coordination	Approved	09-May-24	26-Jun-24	04-Jul-24	\$55,860.00	\$55,860.00			
		73					Revise solid surface finish colour on millwork M30 & M31	Owner Requested	Cancelled	12-Jul-23							
		74					Additional structural support at 5th floor trench drain	Coordination	Pending	12-Jul-23							
90	90	75R				74	Revised detail at expansion joint at gridline 23 between S & T/T.2.	Coordination	Approved	12-Jul-23	14-Aug-23	24-Aug-23	\$8,513.40	\$8,513.40			
92	92					75	Revised rebar stirrups at elevator conduit duct bank	Coordination	Approved	18-Jul-23	23-Aug-23	30-Aug-23	\$1,036.20	\$1,036.20			
93	93				148	76	Revision to window sill support material detail	Contractor Requested	Approved	23-Aug-23	29-Aug-23	05-Sep-23	\$3,312.89	\$3,312.89			
102		76				86	Coring of Foundation for temporary generator connection	Coordination	Approved	25-Jul-23	03-Oct-23	11-Oct-23	\$3,850.00	\$3,850.00			
101	101R3	76R2				91	Connection for Portable Genset and Load Bank Testing	Owner Requested	Approved	06-Feb-24	22-Feb-24	12-Mar-24	\$116,723.25	\$116,723.25			
94	94	77				77	Revision to jockey pump electrical feed	Coordination	Approved	26-Jul-23	01-Sep-23	12-Sep-23	\$5,904.80	\$5,904.80			
98	98	78				82	Revised wall depth in Laundry Rooms to accommodate 4" drain pipe	Coordination	Approved	27-Jul-23	19-Sep-23	03-Oct-23	\$246.50	\$246.50			
108	108	79				111	Delete fire damper at return air duct in penthouse level	Coordination	Approved	31-Jul-23	24-Oct-23	21-Mar-24	(\$497.00)	(\$497.00)			
97	97R1	80R				81	Revise wall thickness to accommodate pipe size	Coordination	Approved	03-Aug-23	19-Sep-23	03-Oct-23	\$3,090.10	\$3,090.10			
96	96	81				83	Domestic booster pump power feed	Coordination	Approved	23-Aug-23	13-Sep-23	02-Oct-23	\$6,792.50	\$6,792.50			
		82					Revision to Drew St. entrance sanitary & storm pipes for interferences	Coordination	Pending	28-Aug-23							
105	105	83				88	Electric heaters for temporary heat in rooms at junction between Phase 1 and 2	Coordination	Approved	15-Sep-23	10-Sep-23	24-Oct-23	\$5,335.90	\$5,335.90			
		84					Investigation for tie-in to existing PA system	Coordination	Cancelled	15-Sep-23							
85	85				67	80	Ductwork revisions related to SI#67	Coordination	Approved	06-Jun-23	02-Aug-23	25-Sep-23	\$1,439.90	\$1,439.90			
103	103R1	85				89	Additional louvre colour	Coordination	Approved	02-Oct-23	30-Oct-23	10-Nov-23	\$3,300.00	\$3,300.00			
106	106	86				87	Chiller Support Frames	Coordination	Approved	02-Oct-23	17-Oct-23	18-Oct-23	\$42,145.73	\$42,145.73			
112	112R1	87				96	Revise light fixture type U & U1	Coordination	Approved	17-Oct-23	29-Nov-23	07-Jan-24	\$2,753.30	\$2,753.30			
114	114	88				94	Revise storm drain piping from the roof of Stair Shaft #5	Coordination	Approved	26-Oct-23	14-Nov-23	05-Dec-23	\$8,269.80	\$8,269.80			
120	120R4	89				114	Add digital menu board connections at each dining area	Owner Requested	Approved	31-Oct-23	01-Apr-24	12-Apr-24	\$15,745.40	\$15,745.40			
116	116	90				100	Additional roof anchors at chimney for Boiler #4	Coordination	Approved	01-Nov-23	20-Nov-23	10-Jan-24	\$35,019.60	\$35,019.60			
		91				97	Revision to flooring materials in corridors and resident vestibules	Owner Requested	Approved	08-Nov-23	22-Nov-23	07-Jan-24	\$0.00	\$0.00			
		92					Provide a permanent load bank for generator testing	Coordination	Pending	08-Nov-23							
132	132R2	93				127	Revision for door controls	Coordination	Approved	10-Nov-23	08-May-24	23-May-24	\$55,073.65	\$55,073.65			
117	117	94				93	Ground connection from pole to transformer	Coordination	Approved	14-Nov-23	24-Nov-23	27-Nov-23	\$3,122.90	\$3,122.90			
104	104R2					90	Additional track components for lift track in room 5091 - Submittal 135	Coordination	Approved	30-May-23	31-Oct-23	10-Nov-23	\$2,448.60	\$2,448.60			
111	111R1				91R2	92	Revision to ductwork related to ERV#1 and SI#91R2	Coordination	Approved	15-Sep-23	16-Nov-23	20-Nov-23	\$4,701.40	\$4,701.40			
		95R					Typical resident wardrobe storage hinges	Owner Requested	Cancelled	20-Nov-23							
121	121R2	96R				102	Typical resident room and washroom millwork revisions	Owner Requested	Approved	22-Nov-23	09-Jan-24	15-Jan-24	\$28,778.20	\$28,778.20			
123	123R2	97R				101	Revision to resident room drapes	Owner Requested	Approved	22-Nov-23	08-Jan-24	10-Jan-24	\$4,059.00	\$4,059.00			
		98					Additional lightning protection	Coordination	Cancelled	27-Nov-23							
125	125R2	99R				103	Toggle switch at flusher disinfectant in soiled utility rooms	Coordination	Approved	29-Nov-23	11-Jan-24	15-Jan-24	\$1,651.10	\$1,651.10			
135	135R1	100				105	Revise drainage for balcony/roof areas	Coordination	Approved	29-Nov-23	15-Feb-24	27-Feb-24	\$19,183.78	\$19,183.78			
110	110R1				80	95	Costs associated with piping clarification in SI#80	Coordination	Approved	15-Aug-23	30-Nov-23	14-Dec-23	\$22,236.50	\$22,236.50			
		101					Delete telephone cables between communications cabinets	Owner Requested	Cancelled	19-Dec-23							
						53	Phase 2 Piling	Site Condition	Approved	08-Jan-24	08-Jan-24	10-Jan-24	\$0.00	\$0.00			
129	129R1	102				104	Revision to Clean Utility Millwork M13	Owner Requested	Approved	22-Dec-23	24-Jan-24	30-Jan-24	(\$29,960.00)	(\$29,960.00)			
134	134R2	103				112	Delete resident room lower entertainment boxes	Owner Requested	Approved	02-Jan-24	15-Mar-24	03-Apr-24	(\$112,848.00)	(\$112,848.00)			
133	133	104				106	Revisions to Phase 2 Structural Steel	Coordination	Approved	04-Jan-24	02-Feb-24	27-Feb-24	\$13,369.24	\$13,369.24			
136	136	105				118	Wanderguard elevator control tie-in	Coordination	Pending	08-Jan-24	17-Apr-24	29-Apr-24	\$32,157.40	\$32,157.40			
						98	Asphalt deficiency warranty extension	Deficiency Reconciliation	Approved	06-Dec-23	14-Dec-23	11-Jan-24	(\$7,500.00)	(\$7,500.00)			
127	127					99	CSA IPAC training course	Contractor Requested	Approved	10-Nov-23	02-Jan-24	11-Jan-24	(\$550.00)	(\$550.00)			
139	139R	106				109	Revision to Block D tub rooms	Coordination	Approved	24-Jan-24	26-Feb-24	07-Mar-24	\$7,681.30	\$7,681.30			
148	148R1	107				122	Support posts for med sled system in stairwells	Owner Requested	Approved	31-Jan-24	01-May-24	07-May-24	\$53,607.07	\$53,607.07			
141	141	108				108	Revise outlet locations in Type C Bedrooms	Owner Requested	Approved	08-Feb-24	23-Feb-24	07-Mar-24	\$1,907.40	\$1,907.40			
140	140					107	Delete siding band detail at Penthouse	Cost Saving	Approved	21-Feb-24	27-Feb-24	27-Feb-24	(\$10,600.00)	(\$10,600.00)			
137	137					110	Slab edge firestop detail revision	Coordination	Approved	09-Feb-24	04-Mar-24	07-Mar-24	\$39,165.00	\$39,165.00			
145	145					113	Extent of slab edge at curtain wall block C - Phase 1	Coordination	Approved	22-Mar-24	22-Mar-24	04-Apr-24	\$3,637.92	\$3,637.92			
		109R					Clarification to temporary soffit and heating details	Cancelled	Pending	07-Mar-24							
146	146	110				116	Add door 5136 and associated hardware	Coordination	Approved	04-Mar-24	05-Apr-24	26-Apr-24	\$11,698.50	\$11,698.50			
147	147R1	111R				135	Revisions to communication cabinets racks and distribution	Coordination	Approved	14-Mar-24	02-Jul-24	29-Jul-24	\$22,195.00	\$22,195.00			

150	150	112				123	Radiant heater piping enclosures	Coordination	Approved	14-Mar-24	22-Apr-24	22-May-24	\$9,624.86	\$9,624.86	
151	151	113				119	Revisions to Resident Washrooms to Accommodate Plumbing Drain	Coordination	Approved	22-Apr-24	22-Apr-24	29-Apr-24	\$5,564.06	\$5,564.06	
152	152R1	114				126	Revisions to water room door hardware	Coordination	Approved	20-Mar-24	07-May-24	23-May-24	\$8,929.80	\$8,929.80	
156	156	116R				121	Revision to handrails and base bumpers	Coordination	Approved	02-May-24	01-May-24	07-May-24	\$14,213.38	\$14,213.38	
153	153					129	Revision to cabinet locks	Owner Requested	Approved	24-Apr-24	24-Apr-24	24-May-24	\$1,540.57	\$1,540.57	
154	154				193		Delete Sprinkler Control Valve	Cost Saving	Approved	01-May-24	24-Apr-24	07-May-24	(\$500.00)	(\$500.00)	
158	158	117				124	Add temporary heat trace system to pipes at underside of servery 2078 & 2086	Coordination	Approved	08-Apr-24	08-May-24	15-May-24	\$21,541.30	\$21,541.30	
157	157	118				128	Phase 1 - Roof level sun control outrigger support	Coordination	Approved	11-Apr-24	06-May-24	24-May-24	\$29,342.14	\$29,342.14	
160	160	119R				132	Kill switch for Ground Floor Servery 1067	Coordination	Approved	13-May-24	30-May-24	06-Jun-24	\$2,971.10	\$2,971.10	
159	159					125	Revise millwork pulls	Cost Saving	Approved	10-May-24	10-May-24	23-May-24	(\$4,132.80)	(\$4,132.80)	
163	163	120				133	Additional exit signs at double egress doors	Coordination	Approved	29-May-24	11-Jun-24	23-Jul-24	\$22,341.00	\$22,341.00	
162	162	121R				134	Add end enclosures to sneeze guards	AHJ	Approved	03-Jun-24	12-Jun-24	23-Jul-24	\$10,373.00	\$10,373.00	
		122					Brick support at level 2 balcony/roof	Coordination	Pending						
						130	Delay Claim Settlement	Delay Claim	Approved	04-Jun-24	04-Jun-24	06-Jun-24	\$317,200.00	\$317,200.00	
148	149					131	Additional cubicle curtains Phase 2	Coordination	Approved	17-Apr-24	17-Apr-24	29-May-24	\$10,670.00	\$10,670.00	
		123					Replace damaged trees by winter salt at highway	Site Condition	Cancelled	08-Jul-24	19-Jul-24		\$34,672.55		
168	168R	124				138	Circuiting and clarifications for pumps P6, P7, P20 & P21	Coordination	Approved	18-Jul-24	09-Aug-24	29-Aug-24	\$1,821.00	\$1,821.60	
167	167					136	Revision to hardware on doors 1018a, 1030b, 1165	Coordination	Approved	22-Jul-24	22-Jul-24	29-Jul-24	\$1,056.00	\$1,056.00	
169	169R	125				137	Revision to soffit detail at 1064 & 1075	Coordination	Approved	22-Jul-24	07-Aug-24	14-Aug-24	\$5,908.76	\$5,908.76	
		126					Add hot water recirculation line to washers	Design Improvement	Cancelled	22-Jul-24		11-Sep-24	\$0.00		
		127				140	Generator shore power circuit	Coordination	Approved	07-Aug-24	03-Sep-24	19-Sep-24	\$6,043.40	\$6,043.40	
		128				141	Revision to 5th floor Dining Windows & exhaust duct	Coordination	Approved	13-Aug-24	09-Sep-24	19-Sep-24	\$20,700.61	\$20,700.61	
		129				142	Rework roof drain above 5th floor balcony	Coordination	Approved	19-Aug-24	11-Sep-24	19-Sep-24	\$4,275.35	\$4,275.35	
		130				143	Revised - Insulation tie-in at temporary wall to curtainwall	Coordination	Approved	19-Sep-24	24-Sep-24	03-Oct-24	\$5,417.50	\$5,417.50	
171	171				135	139	Credit for revisions to PRV valves from SI#135	Cost Saving	Approved	18-Jul-24	15-Aug-24	29-Aug-24	(\$4,964.00)	(\$4,964.00)	
		131					Gas detection in generator room #6011	Regulatory Change	Pending	18-Sep-24					
		132				144	Water room drywall revision	Coordination	Approved	19-Sep-24	29-Sep-24	04-Oct-24	\$1,045.44	\$1,045.44	
					138		Composity Slab Crack remediation	Coordination	Approved	14-Sep-24					
					142		Ductwork revisions at Chapel 1027	Coordination	Approved	12-Sep-24					
					141		Revised - Location of Electrical Panel in Janitor Rooms	Coordination	Approved	01-Oct-24					
					133		Revision to balcony ceiling panels at tapered beams	Owner Requested	pending	24-Sep-24					
					144		Revised - Temporary link connection details	coordination	Approved	23-Sep-24					

Action	Sub Actions	Responsible	Due Date
Occupancy Checklist	Continue to review Ministry LTC occupancy checklists - final submission required 3 months prior to occupancy; Construction portion 85%, and Interior checklists 75% complete	Anita	3 months prior to occupancy
Furniture Contract	PO ready to be issued with mid December delivery based on latest project schedule	Anita	Aug 12 - complete
Art Fundraising	ideas have been noted and small WG; including Creative Industries, unable to connect with WKP Gallery to assemble	Anita	ongoing
Wood at mill for purpose	Sept; Anita to set up	Anita	ongoing
P1 Move			
HCR - Movers	Scheduled for week of April 28 2025; Resident in rooms May 4 2025; in-person walk through and meeting tentative for January 2025	Anita	01-Jan
Resident Communication	Will be communicating in the fall as we come closer to move in dates and patient placement	Billy/Angie/Jillian	late Fall 2024
IT			
Cameras	approved and to review internal processes and access & initial training	Dave/Anita	ongoing
ID Access Card	To breakdown internal processes for profiles, roles, access; program the system and print the cards for implementation		
Phone System	working with vendor for resident cable and phone packages		
Network Design	completed		
Digital Menus/Boards	S/W to be finalized by CH management and TVs to be purchased for install		
Nurse Call	Working with vendor and Percon to finalize the alerts, call bells, colours for certain calls - finalized by Nov 4		
Bed Allocation - Indigenous and Speciality			
Bed Application - Licencing	Continue to have discussions with OH and Ministry on next steps	NFN/Angie	ongoing
NFN Collaboration Document	Additional funding still under review with Angie and NFN Lead; Chief has reached out to Ministry once again	Anita/Angie/NFN	ongoing
	flow of care -Review current NFN demand & cultural designation		TBD
	Governance structure - board member and committee		TBD
	Policy inclusion - part of collaboration document		TBD
	Programming & ceremony - further discussion needed		TBD
	Quality of Care Committee	Anita/Angie/NFN	TBD
Wayfinding			
Wayfinding	NFN Translations, remaining 8 have been finalized	Anita/Dave	22-Jul
Art Work - RHA and P1	Artwork underway and will provide updates as artist submits	Anita/Dave	ongoing
Support Services			
Building Ready	Discussions of the process for building ready (kitchens, med rooms, medications, storage, linens, food, laundry flow, elevator usage and timing, housekeeping and cleaning)	Anita	ongoing
Storage Area list	Walkthrough with clinical managment on 2nd floor to finalize layout and storage needs prior to ordering shelving. Received options for smaller storage and will bring one set for 2nd floor for set up when area is ready. Will bring mgmt staff through for further discussion before order is made.	Dave/Anita	November
Emergency Response			
Fire plan	Final drawings in progress; need to plan quarterly check-ins with fire department; updated codes and policies in draft form Drawings have been supplied to the fire department training plan created - draft; will be creating demo anchor system in only building to assist in the timing needed for training	Anita/Julie/Ron	ongoing & on track
P2 Parking	Need to begin discussions and planning for start of P2 parking (winter 2026); options to be discussed with SLT	Dave/Anita	Winter 2026
Staff Training Plan			
Detailed Breakdown	Comprising of various methods: in-person, video, replicated in old building, in new building to ensure move readiness Managers have met and compiled needs and timing required for the different elements of training and action plan is created; to be reviewed and train the trainers to be named	Anita	Fall 2024

Board of Management Meeting
October 24, 2024

❖ CLINICAL SERVICES - Bev VonHassell, Kathy MacDonald

Critical Incidents Summary Report:

- ❖ A total of 9 critical incidents to the MOLTC from September 17- October 16, 2024.
- ❖ Resident to Resident Action: 3 were classified physical abuse and 1 was emotional abuse
- ❖ Staff to Resident Action: 1 classified as neglect
- ❖ Disease Outbreak – 1 Respiratory
- ❖ Improper treatment or care of a resident that resulted in harm or risk of harm: 1 incident
- ❖ Missing Resident <3 hours – 1 incident
- ❖ Misuse/Misappropriation of resident's money- 1 incident (unable to confirm)


Inspections

July 15-19, 2024 – Complaint and Critical Incident Inspection

- ❖ Non-Compliance Remedied
- ❖ Written Notification
 - Plan of Care
 - Reporting certain matters
 - Responsive behaviours

September 16-20, 2024 – awaiting inspection report

Q3 Critical Incident Geographical Report

 MINISTRY OF LONG-TERM CARE Geographical Status Report for LTC Homes						
Quarter : 01 Jul 2024 - 30 Sep 2024						
Home Name : CASSELLHOLME		[Beds : 240]				
CI Type	# of CIs	Average CI per 100 beds for the period				
		Home	LHIN	District	Province	
Abuse of a resident by anyone or neglect of a resident by the licensee or staff that resulted in harm or a risk of harm to the resident [LTCHA s. 24. (1) 2.] / [FLTCA s. 28. (1) 2.]	29	12.0833	2.8785	3.6346	2.9716	
Controlled Substance missing/unaccounted [LTCHA O. Reg 79/10 s. 107. (3) 3.] / [FLTCA O. Reg 248/22 s. 115. (3) 3.]	1	0.4167	0.2985	0.2456	0.1532	
Disease Outbreak [LTCHA O. Reg 79/10 s. 107. (1) 5.] / [FLTCA O. Reg 248/22 s. 115. (1) 5.]	2	0.8333	1.1301	1.0806	1.0509	
Improper/Incompetent treatment or care of a resident that results in harm or risk to a resident [LTCHA s. 24. (1) 1.] / [FLTCA s. 28. (1) 1.]	2	0.8333	0.6610	0.8964	0.6546	
Incident that causes an injury to a resident for which the resident is taken to hospital and which results in a significant change in the resident's health status [LTCHA O. Reg 79/10 s. 107. (3) 4.] / [FLTCA O. Reg 248/22 s. 115. (3) 4.]	6	2.5000	1.5565	1.8787	1.4484	
Misuse/Misappropriation of residents money [LTCHA s. 24. (1) 4.] / [FLTCA s. 28. (1) 4.]	1	0.4167	0.1279	0.1105	0.0823	
Total across CI Type	41	17.0833				

Complaints

In the third quarter of 2024 there was 8 complaints

- 4 written
- 4 verbal/ telephone calls.

A breakdown of the complaints:

- 3 staff conduct
- 1 processes
- 1 Procedure
- 4 other

- 6 Clinical
- 1 NFS
- 1 Laundry
- 1 Other

Clinical Pathways

ADVANCING EVIDENCE-BASED CARE IN ONTARIO LONG-TERM CARE (LTC) HOMES

The Project
Expanding and standardizing evidence-based practices in LTC has been a key goal in Ontario for many years. Evidence-based assessments were initiated in LTC homes in 2003 with the implementation of MDS 2.0. More recently, The Fixing Long-Term Care Act (2021) has tasked LTC homes with implementing evidence-based tools for resident assessment and care. The government's commitment to the use of evidence-based tools is further supported by the recently announced extension of funding for clinical support tools. To advance this goal, the Registered Nurses' Association of Ontario (RNAO) in partnership with PointClickCare, have launched a province-wide initiative to implement digitized versions of RNAO's evidence-based BPG Clinical Pathways in PointClickCare's Nursing Advantage Canada platform.

The Partners

<p style="text-align: center;">RNAO</p> <ul style="list-style-type: none"> ▪ Professional association representing registered nurses, nurse practitioners and nursing students. ▪ Global leader in the development of Best Practice Guidelines (BPG) for nurses. This Program has been funded by provincial government since 1999. BPG Clinical Pathways are derived from the BPGs and contextualized to the LTC sector to support evidence-based assessments and resident-centred care planning. 	<p style="text-align: center;">PointClickCare</p> <ul style="list-style-type: none"> ▪ Global leader in electronic health records (EHR) for senior care. EHR used by over 90% of LTC Homes in Ontario ▪ Team of subject matter experts in the areas of clinical practice, digitizing data, application and analysis of standard data
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Methodology

- RNAO's BPG Clinical Pathways were designed in collaboration with LTC clinical leaders comprised of registered nurses, registered practical nurses, and nurse practitioners to ensure alignment with the Fixing Long-Term Care Act and Regulation, the Inspection Protocols and RAI-MDS assessments.
- The BPG Clinical Pathways were pilot tested during a small-scale implementation involving 16 LTC homes.

Steering Committee
Includes representatives from RNAO, PointClickCare, AdvantAge Ontario, InterRAI, Universal Care, Perley Health, Region of Peel

Provincial Roll-Out Strategy
Three-year journey available to Ontario LTC Homes to implement a comprehensive suite of evidence-based BPG Clinical Pathways that address all the required programs under the Fixing Long-Term Care Act. These tools will replace home/organization developed or consensus-based tools currently in use. Through this initiative homes will:


- Implement standardized assessments and interventions presented to staff in a user-friendly manner.
- Provide education for the interdisciplinary team on evidence-based practices consistent with the BPGs.
- Improve and support quality, efficiencies, critical thinking, and sound judgment.

Support inter-disciplinary evidence-based care planning that fosters resident/family engagement in the process.


The Benefits

- Enhanced staff knowledge and application of evidence-based, resident-focused care.
- Widespread use of standardized, comprehensive and evidence-based assessment and care planning processes in Ontario's LTC homes.
- Readily accessible data to evaluate key performance measures aligned with the LTC home's quality improvement program and regulatory requirements.

Project Contacts
RNAO: Rita Wilson (rwilson@rnao.ca) PointClickCare: Deborah Johnston (Deborah.Johnston@pointclickcare.com)



Education on this Initiative is available by contacting one of the Project Contacts above



❖ **STAFFING** - Tiffany Chapman, HR Coordinator

Staffing & Students

- ❖ Active/In Progress PSW Living Classroom group
- ❖ Active/In Progress Practical Nurse (Canadore) and PSW (CTS) students
- ❖ PSW Vacancies – 2 temp. full-time, 7 temp part-time, 1 perm. part-time – ALL LINES POSTED
- ❖ RPN Vacancies – 3 temp. full-time, 2 perm. full-time, 1 temp. part-time, 1 perm. part time
- ❖ No RN Vacancies (no RN Agency staff)
- ❖ Hired in September – 13 total (1 NP, 5 FSW, 3 RPN, 4 PSW)
- ❖ Terminated/Resigned/Retire in September – 15 total (1 N/U admin, 4 FSW, 1 RPN, 9 PSW)
- ❖ We have on-boarded a 2nd Nurse Practitioner – Brittany Topham. Brittany has worked as a Registered Nurse for the last seven years. She has a variety of experience with acute care, triage and education that is a great addition to our team.
- ❖ We have also hired a Clinical Educator – Mel Cross, who will be working part time focusing on enhancing clinical skills in the nursing department.

❖ **QUALITY ASSURANCE** - Camille Bigras, Director of Support Services & Quality Assurance

We have been diligently working to ensure progress towards the goals outlined in our 2024/2025 Quality Assurance Plan. Below are a few updates on our achievements so far:

Emergency Room Visits

- ❖ In 2023, 164 residents were sent to the Emergency Room, with an admission rate of 32%.
- ❖ In 2024, we have reduced this to 50 residents, although the admission rate has increased to 60%.

This improvement is largely attributed to the expansion of our in-house medical team, which has allowed us to broaden the scope of services provided onsite. Many residents now receive treatments such as IV therapies and ECGs directly in their rooms, reducing the need for hospital transfers.

Reduction in Falls

- ❖ In 2023, there were 1,006 falls involving 182 residents, with an injury rate of 8% and hospital visits at less than 1%.
- ❖ So far in 2024, we have observed 668 falls among 163 residents, with the injury rate reduced to 3%, and hospital visits remaining below 1%.

Our dedicated efforts with the nursing staff include thorough assessments and careful medication reviews by doctors and Nurse Practitioners, with a focus on reducing fall risks. Additionally, our Falls Program Committee continues to identify and implement strategies to further reduce falls and related injuries.

❖ **INFECTION, PREVENTION & CONTROL (IPAC)** - Ellen Whittaker, Infection Prevention & Control Manager

Hand Hygiene Observations:

Hand hygiene observations are ongoing by the team members, using the Speedy Audit app/program. This app will also now be used to do auditing of donning and doffing of PPE. Training of clinical staff to use this added feature will begin in the coming weeks.

Outbreaks:

On October 10th 2024 a respiratory outbreak was declared on Willow St when 3 residents presented with symptoms. Testing has shown that the causative agent for some residents is Covid-19 while others have tested negative. On October 15th the outbreak was declared facility-wide when there was a new case on Apple St. The outbreak is ongoing. IPAC measures are in place.

Immunization

The annual resident and staff flu shot clinics are scheduled for October 22nd and 24th 2024. Resident Covid-19 immunization will be planned when the flu shots are completed. This year the new pneumococcal vaccine, Prevnar 20, will be offered to all residents. The RSV vaccine was administered the week of September 16th to resident who qualified and consented.

Education

The IPAC frontline training is ongoing. The education is continuing on policies related to the RPN role and will now begin to include donning and doffing of PPE for additional precautions. Staff working the evening and night shifts will be included.

IPAC Construction Audits

Audits continue to be done at least weekly, with a focus on the debris control and removal, dust control and cleaning at the site, as required in CSA Z317.13-17.

Due to the progression with drywall and ceilings, the focus has been auditing the cleaning of structures that are above ceiling. The auditing continues to ensure that insulation remains clean before the walls are closed and ensuring the air handlers are functioning and filters are preplaced when dirty.

❖ CLINICAL PRACTICAL COACH - Kellie Ross, RPN, Clinical Practice Coach

- ❖ Working on the new hire RPN checklists.
- ❖ Developing the new RPN Mentor Manual for our RPN mentors. The mentor manual is to ensure the training provided by our mentors is more formalized and consistent.
- ❖ Made some changes to the General Orientation Day for the new RPNs to ensure they are able to speak with each required staff and have their checklists completed faster to assist in getting the new staff on the schedule faster.
- ❖ Suggesting that we change the process of when the mentor day is provided to the new RPNs. We are looking at having the mentor day occur in the middle of the RPN training on the units. The hope is that the RPN will apply the skills and information taught during the mentor day to the remainder of their training shifts and be better prepared to work on the units independently once cleared.
- ❖ Updated the policy regarding the protocol for incident reports and making adjustments to the wound policy and procedure. Will continue to review policies as needed.
- ❖ Incident Reports – assessed incident reports/head injury routines and communicated reports to the clinical team that required follow up/completion. Developed a new inter-professional process to assess and complete incident reports in a timely manner. Continue to run the reports and review incident reports for compliance and quality. We have seen a significant improvement with staff completing the head injury routine now that the assessment is being reviewed by the RN,

RPN, Team Lead and Unit Managers daily. Individual follow up/education with staff was completed. A walk through was completed for the RN/RPN Team Lead and Unit Manager groups on what reports to run, what areas are required to be completed and to ensure clinical judgement is being exercised when completing the incident reports.

- ❖ Started to collaborate with Unit Support to develop a process surrounding appointments and the nurses roles and responsibilities when a resident returns from an appointment with follow up paperwork.
- ❖ Developed a new 24 hour Unit Report for staff that now has prompts on crucial areas that need to be documented during a shift. The intent is to improve communication between shifts.
- ❖ Completed a thorough review of all the RPN staff attendance from January 1- October 2024. Identified RPNs with attendance concerns and provided counselling. Composed a list of RPNs who require closer attendance monitoring for the Nurse Managers. We have 3 RPN staff who have not missed any shifts this year and we are in the process of assessing the other department staff attendance to recognize their commitment and dedication to the home.

❖ **COMMUNITY SUPPORT SERVICES - Cheryl Hamilton, Manager**

- ❖ Lots of changes! New Manager of CSS, Cheryl Hamilton started June 1, 2024.
- ❖ 2 New RAI-CHA Assistants were hired in May/June, 2024 to replace Cheryl Hamilton and Breanne Ouellette.
- ❖ Hired 2 new Homemakers (1 permanent and 1 temporary) in the past 2 months to replace staff who have left or are on a leave.
- ❖ Hired 2 new PSWs in addition to our current roster of PSWs. We had hired 3 other PSWs back in the early spring, but they were replacing staff who left I believe (that was before I started as Manager).
- ❖ Added 3 additional Assisted Living clients to our roster and have 4 more that are currently being assessed and will be starting within 2 weeks for a total of 7 additional Assisted Living clients. We are working towards aligning our Assisted Living budget with increasing the amount of AL clients we are servicing.
- ❖ We had to hold the hiring process for our PSW's as we had not been receiving referrals for our Assisted Living program for several months and had no clients to give to additional PSWs. This hold in referrals was due to massive changes at OH@H from whom we receive our Assisted Living referrals from. After several discussions with OHT and OH@H, this has been resolved and we have plenty of referrals moving forward to support the new additional staff. I will be looking at hiring 1-2 more PSWs in the near future.
- ❖ We have faced challenges with recruitment in that many of the applicants interviewed were not appropriate or declined the position or did not show for interviews or even call back to schedule an interview. Plus, we do not receive a high volume of applicants. I plan to schedule "in-services" and meet with aspiring PSW students and area colleges to try and promote employment with Cassellholme CSS with the hope of recruiting more in the future.
- ❖ Currently in the active stages of applying for one-time funding for our Snow Removal Program, which will come from a surplus in the SMILE Program through OHT in the amount of \$50 000.00. We will be able to service approximately 28 clients for this year only as it is one-time funding. We would normally service 8 clients.

Current Number of Clients Active in Each Program:

- ❖ Assisted Living: 38 clients with 5 new clients being added within 2 weeks
- ❖ Supportive Housing: 3 clients
- ❖ Housekeeping: 207 clients
- ❖ Respite: 29 clients
- ❖ Transportation: 62 clients
- ❖ Diner's Club: 33 clients
- ❖ Adult Day Program: 24 clients
- ❖ Meals on Wheels: 32 clients - Contract signed between Mattawa Hospital and Cassellholme CSS

❖ **FIRE PANEL UPDATE - Dan Cote, Maintenance Manager**

We are currently in the process of replacing the old fire panel. Troy Life and Rochford Electrical are in the building working on this.

Staff have been informed that they should call 911 if a fire situation happens. We have extra security to do fire rounds and watches. The fire department has been informed that we are in the process of replacing the fire panel and all alarms will be off. They will be contacted when we are back in service.

The fire panel should be up and running by Friday October 18/24. Testing will be completed on the system in the following week.



Quarterly Financial Report

Q3 Long Term Care & Q2 Community Support Services - Unaudited

October 24th, 2024

Executive Summary

Redevelopment Project

A summary of total redevelopment project costs to September 30th, 2024 is included within, showing **total project spending of \$54.4M to date.**

Inflation continues to play a factor in the Home's finances. Statistics Canada's CPI figure for 2023 was 3.90% year over year, and was at 1.6% as of September 2024. The Bank of Canada's policy interest rate dropped to 4.25% as of September 4th, 2024. This rate impacts the Home's capital redevelopment project through borrowing costs during construction. Infrastructure Ontario's construction interest rate was quoted at 4.61% on October 9th.

Long Term Care Operations

Included in the report are the Home's budget-to-actual results for the year-to-date ending September 30th, 2024. **Revenues for the period are over budget 6%**, primarily due to One Time OA funding, bank interest and additional NPC funding for PSW wage enhancements.

Expenditures for the period are under budget 3%. A revised 2024 operating budget was approved by the board in May, factoring in recent union negotiation impacts, 2024 provincial budget announcements, and more.

Community Support Services Operations

A summary of the 2024/25 Community Support Services budget to actual results for the period of April 1st, 2024 to September 30th, 2024 is presented within, showing **both expenditure envelopes in a surplus position**. Staffing shortages in Supportive Housing are contributing to the outsized surplus in that envelope. Recruitment efforts continue, and any unused CSS funding is returned to Ontario Health.

Thank You

I would like to thank the Board for your time and consideration on these important fiscal matters.

Sincerely,

William Brooks, CPA

Chief Financial Officer

Key Performance Indicators

Hours of Care

Hours of Care	Target - April 1st 2024	Jan - Mar 2023	Apr - Jun 2023	Jul - Sep 2023	Oct - Dec 2023	Jan - Mar 2024	Apr - June 2024
Direct Care (PSW, RPN, RN)	4.00	3.15	3.34	3.38	3.08	3.50	3.72
Allied Health Professionals	0.60	0.68	0.73	0.62	1.06	1.08	1.10
Total	4.60	3.83	4.07	4.00	4.14	4.58	4.82

1 - **Note:** the definition of AHP was updated to include food service workers for Oct – Dec 2023 reporting period, among various other changes. Prior period figures were not restated.

Resident Occupancy

Current Month - September 2024: 98.72%

Current Year to Date - January to September 2024: 97.84%

Prior Year - January to December 2023: 96.8%

Case Mix Index

A CMI value greater than 1.0 represents greater complexity of care vs. the average resident in Ontario, and therefore more nursing funding to meet those needs.

-
- **Funded CMI – 2024/25: 1.0812 (Actual), (1.0641 Budget)**

- *Funded CMI – 2023/24: 1.0965 (Actual)*

- *Funded CMI – 2022/23: 1.0526 (Actual)*
-

Inflationary Benchmarks

Measure	2020	2021	2022	2023	2024 YTD	Average
CPI Increase	0.72%	3.40%	6.80%	3.90%	1.60%	3.28%
CUPE COLA	1.25%	1.50%	2.00%	3.50%	3.50%	2.35%
Provincial LOC	1.50%	1.50%	1.75%	2.40%	6.60%	2.75%
Municipal Levy	4.00%	2.99%	-2.94%	0.00%	0.00%	0.81%

Comparative Balance Sheet

Below is a balance sheet comparing the Home's Assets, Liabilities, and Net Assets at last year end to this year to date.

Statement of Financial Position					
Cassellholme	September 30, 2024		December 31, 2023		Increase (Decrease)
Assets					
Current					
Cash & Cash Equivalents	\$	9,483,173	\$	5,813,934	\$ 3,669,239
Accounts Receivable		1,297,300		1,027,490	269,810
Prepaid Expenses		47,825		92,707	(44,882)
Total Current Assets		10,828,298		6,934,131	3,894,167
Non Current Assets					
Restricted Cash & Cash Equivalents		4,000,000		4,000,000	-
Capital Assets		53,996,307		37,027,667	16,968,640
Total Long Term Assets		57,996,307		41,027,667	16,968,640
Total Assets	\$	68,824,605	\$	47,961,798	\$ 20,862,807
Liabilities and Net Assets					
Current					
Redevelopment Financing Liability	\$	45,033,451	\$	29,752,741	\$ 15,280,710
Accounts Payable and Accrued Liabilities		9,787,351		7,461,549	2,325,803
Employee Future Benefits		381,029		381,029	-
Deferred Revenue		399,814		635,835	(236,021)
Total Liabilities		55,601,645		38,231,154	17,370,491
Net Assets					
Internally Restricted		4,000,000		4,000,000	-
Invested in Capital Assets		8,654,657		6,966,728	1,687,929
Unrestricted		568,304		(1,236,084)	1,804,387
Total Net Assets		13,222,960		9,730,644	3,492,316
Total Liabilities and Net Assets	\$	68,824,605	\$	47,961,798	\$ 20,862,807

Key Changes

1. Cash - Increased due to receipt of a large charitable donation, one-time OA funding, and a surplus of revenues received over expenses paid.
2. Redevelopment - Capital Assets & Financing Liability continue to increase as construction costs are incurred and the loan balance increases. Invested in Capital Assets represents the equity difference between the capital asset and liability balances. It increased as capital costs went up faster than progress draws were received from IO.
3. Deferred Revenue - decreased as unspent CSS revenue that was deferred at December 2023 became repayable in April 2024.

LTC Operating Budget

Year-to-date Operating Revenue Budget to Actual Summary

*See below for a summary of operating revenue received vs. budget to September 30th, 2024. Note an over budget position YTD of **\$1,295,182 (6%)** before operating levies.*

Envelope/GL	Budget 2024	YTD Budget to 30/09/24	YTD Actual to 30/09/24	Over (Under)	Over (Under) %
Nursing & Personal Care	18,089,222	13,460,699	13,848,975	388,276	3%
Program Support Services	1,217,218	911,233	911,065	(169)	0%
Nutritional Support	1,126,023	839,757	839,678	(79)	0%
Other Accommodation	6,640,943	4,959,824	5,859,064	899,240	18%
Minor Capital	347,730	260,883	268,796	7,913	3%
Total Non-Levy Operating Revenues	27,421,136	20,432,396	21,727,578	1,295,182	6%
Total Municipal Levy	3,343,402	2,507,552	2,507,552	0	0%
Total Operating Revenues Incl. Levies	30,764,539	22,939,948	24,235,130	1,295,182	6%

YTD revenue is over budget primarily due to:

- *One Time OA Revenue - \$610,200*
- *Higher than planned interest revenue under the OA envelope*
- *Additional revenue in the NPC envelope due to higher than budgeted CMI results and PSW permanent wage enhancement funding.*

Year-to-date Operating Expenditure Budget to Actual Summary

*See below for a summary of operating expenditures vs. budget to September 30th, 2024. Note an under budget position YTD of **\$653,138 (-3%)**.*

			YTD Budget to	YTD Actual to		
Envelope	Department	Budget 2024	30/09/24	30/09/24	Over (Under)	Over (Under) %
NPC - Nursing and Personal Care						
	Nursing Direct Care	16,518,203	12,333,432	12,068,057	(265,375)	-2%
	Nursing Administration	2,591,168	1,943,376	1,977,410	34,034	2%
	Pandemic	124,000	93,000	7,909	(85,091)	-91%
NPC Total		19,233,371	14,369,808	14,053,376	(316,432)	-2%
PSS	Program and Support Services	1,313,381	984,309	932,580	(51,729)	-5%
NS (RF)	Nutritional Support (Raw Food)	1,126,023	851,459	883,654	32,196	4%
OA - Other Accommodation						
	Dietary	2,360,252	1,767,541	1,745,901	(21,640)	-1%
	Housekeeping	1,309,629	980,716	1,074,352	93,637	10%
	Laundry	610,179	456,910	443,381	(13,530)	-3%
	Maintenance	985,384	738,546	620,255	(118,291)	-16%
	Facility	953,894	782,387	679,433	(102,954)	-13%
	Administration & General Store	1,951,280	1,469,085	1,324,517	(144,568)	-10%
OA Total		8,170,617	6,195,185	5,887,840	(307,345)	-5%
Minor Capital	Minor Capital Expenditures	347,730	260,798	251,298	(9,499)	-4%
Total Operating Expenditures		30,191,123	22,661,558	22,008,749	(652,809)	-3%

Nursing & Personal Care (NPC)

Under budget \$316,467 (-2%). This NPC surplus relates to planned direct staffing increases not yet realized at period end, offset by additional funded equipment in administration. Funding for these equipment expenditures is provided through the Local Priorities Fund and was included in budget revision 1.

Program and Support Services (PSS)

Under budget \$51,729 (-5%). Any surplus funds in PSS will be applied to any deficit funding in NPC or Nutritional Support at year end.

Nutritional Support (Formerly Raw Food)

Over budget \$32,196 (4%), due to inflationary increases to costs of raw food. This overage can be covered by surplus funds in PSS at year end.

Other Accommodation (OA)

Support Services (Dietary, Housekeeping, & Laundry) are over budget a combined \$58,173 (2%) This primarily due to housekeeping supplies and purchased services. Discussions with department heads are in progress to address these variances.

Maintenance expenditures are under budget \$118,291 (-16%). This variance relates to under budget wages and benefits for unfilled maintenance worker positions.

Facility costs are under budget \$102,954 (-13%). This is primarily due to lower than anticipated insurance costs for 2024.

Administration is under budget \$144,568 (-10%). This is primarily due to unstaffed positions that were planned for mid 2024, including an HR specialist and IT coordinator.

Year-to-date Actual Summary by Funding Envelope

Below is a summary of revenue and expenditures by envelope, showing the surplus (deficit) before and after any municipal levies received, as well as operating reserve allocations. Any surplus funds at year end over and above necessary reserve allocations will be put towards the Home's anticipated construction interest costs for the ongoing redevelopment project.

Envelope	NPC	PSS	NS (RF)	OA	Minor Capital	Total
Operating Revenue	13,848,975	911,065	839,678	5,859,064	268,796	21,727,578
Operating Expenses	14,053,341	932,580	883,654	5,887,546	251,298	22,008,420
Envelope Surplus (Deficit)	(204,366)	(21,515)	(43,976)	(28,482)	17,498	(280,842)
Plus: Municipal Levy Received						2,507,552
Total Surplus (Deficit)						2,226,710
Less: Operating Reserve						430,062
Net Surplus (Deficit)						1,796,648

Capital Budget

Redevelopment Budget to Actual Summary

See below for a summary of spending on the Cassellholme Redevelopment project from commencement to September 30th, 2024:

	Board Approved Budget	Total Spent to date	Budget Remaining	% Spent
A - Land	0	0	0	0%
B - Hard Costs	101,587,646	41,272,537	60,315,109	41%
C - Architects and Engineers	5,293,090	4,486,949	806,141	85%
D - Other Design Consultants Costs	786,929	562,212	224,717	71%
E - Fees & Permits	31,235	31,235	0	100%
F - Project Management & Other Prof. Services	1,798,833	1,490,794	308,039	83%
G - Financing & Construction Interest	3,796,497	2,918,558	877,939	77%
H - Taxes	1,914,397	1,412,152	502,245	74%
I - Contingency	4,721,632	1,417,739	3,303,893	30%
J - FF&E	2,965,586	800,193	2,165,393	27%
Grand Total	122,895,845	54,392,370	68,503,475	44%

Change orders approved to the end of the period amounted to \$2,262,671, representing the usage of 47.92% of total contingency for the project, which is **slightly above** the percent of project completed (days elapsed) of 47.41% assuming an end date of July 31st, 2027.

See the latest construction report from Project Manager Dave Smits for a detailed listing of change orders to date and further details on construction progress.

Forecast of Capital Payments & Levies

The following is the most recent indicative rate update from Infrastructure Ontario, as of October 9th, 2024:

Construction Interest: 4.61%

Term Loan (30 Year Amortizing): 4.69%

The rate that applies to Cassellholme currently is the floating Construction rate, currently sitting at 4.61% (0.67% in June 2021). See below for an estimate of construction interest given today's rate for the remainder of the project:

Average Rate: 4.43%	2022	2023	2024	2025	2026	2027
Annual Construction Interest	231,430	1,329,628	2,343,835	2,983,811	4,017,905	2,396,738
Avg. Monthly	19,286	110,802	195,320	248,651	334,825	399,456
Cumulative	231,430	1,561,058	3,904,892	6,888,703	10,906,608	13,303,346

Assuming a balance to finance of \$113.6M after upfront Provincial grants, owner equity, cash payments for construction interest over the \$2.7M budget and a 30-year term loan, the following levy apportionment would be reached in years 2025 to 2058:

Municipality	2025	2026	2027	2028	Term Loan (Year 1 - 25)	Term Loan (Year 26 - 30)
North Bay	2,067,227	2,076,671	3,659,774	3,804,769	3,844,271	5,596,559
East Ferris	201,033	201,952	355,905	370,005	373,847	544,253
South Algonquin	86,287	86,681	152,760	158,813	160,461	233,603
Bonfield	83,973	84,356	148,664	154,554	156,158	227,338
Papineau/Cameron	44,862	45,067	79,422	82,569	83,426	121,453
Chisholm	42,467	42,661	75,183	78,162	78,973	114,971
Calvin	38,787	38,965	68,668	71,389	72,130	105,008
Mattawa	35,163	35,323	62,251	64,717	65,389	95,195
Mattawan	8,642	8,682	15,300	15,906	16,071	23,397
Total	2,608,441	2,620,357	4,617,927	4,800,882	4,850,727	7,061,775

Interest rate changes, total actual project costs, and changes to provincial funding will ultimately determine the final capital levy to be issued annually.

Community Support Services

Year-to-date Operating Budget to Actual Summary

See below for a summary of Cassellholme Community Support Services' Budget to Actual results for the period broken down by the division's two funding envelopes, Supportive Housing & Community Support Services.

Envelope: Supportive Housing (SH)

Envelope	Program	Budget 2024/25	YTD Budget 2024/25	YTD Actual to 30/09/24	Over (Under)	Over (Under) %
<u>Supportive Housing - Revenue</u>						
	Province of Ontario - Grants	1,720,018	862,365	915,494	53,129	6.16%
	Service Recipient Revenue & Other	-	-	-	0	0.00%
		1,720,018	862,365	915,494	53,129	6.16%
<u>Supportive Housing - Expenses</u>						
	Assisted Living	1,364,280	684,009	483,857	(200,152)	-29.26%
64.76%	Administration	355,738	178,356	175,764	(2,593)	-1.45%
		1,720,018	862,365	659,621	(202,744)	-23.51%
Supportive Housing	Surplus (Deficit)	-	0	255,873		

SH revenues are over budget by \$53,129 (6%). This is due to higher than budgeted provincial funding increases.

SH expenditures are under budget by \$202,744 (-24%). This due to lower Assisted Living service hours than planned. Ongoing hiring efforts continue for CSS PSWs.

Envelope: Community Support Services (CSS)

Envelope	Program	Budget	YTD Budget	YTD Actual	Over	Over (Under)
		2024/25	2024/25	to 30/09/24	(Under)	%
<u>Community Support Services - Revenue</u>						
	Province of Ontario - Grants	935,810	469,187	589,907	120,720	25.73%
	Service Recipient Revenue & Other	159,767	80,102	67,731	(12,371)	-15.44%
		1,095,577	549,289	657,638	108,349	19.73%
<u>Community Support Services - Expenses</u>						
	Diners Club	8,580	4,302	3,751	(551)	-12.80%
	Meals on Wheels	22,760	11,411	10,139	(1,272)	-11.15%
	Home Maintenance and Repair	31,200	15,643	6,655	(8,987)	-57.45%
	Home Help	431,261	216,221	214,164	(2,058)	-0.95%
	Caregiver Respite	109,535	54,918	37,506	(17,411)	-31.70%
	Transportation	86,977	43,607	39,038	(4,570)	-10.48%
	400 Club	211,718	106,149	112,261	6,113	5.76%
35.24%	Administration	193,546	97,038	95,628	(1,411)	-1.45%
		1,095,577	549,289	519,142	(30,147)	-5.49%
CSS	Surplus (Deficit)	-	0	138,497		

CSS revenues are over budget \$108,349 (20%). This is due primarily to provincial funding increases not yet received for cost of living adjustments in 2024/25.

CSS expenditures are under budget \$30,147 (-5%). This is primarily due to snow removal costs not yet incurred for the 2024/25 Home Maintenance season. Over budget wages in 400 Club relate to prior period retroactive wage payments not accrued at March 31, 2024 and are offset by under budget wages in Caregiver Respite.

Administration costs (allocated to SH and CSS based on % of revenue)

Administration Costs are under budget \$4,003 (-1.45%). This is considered effectively on budget.

Suggested Board Motions for Discussion

- 1. That the board approve the year-to-date operating budget-to-actual results for the period ending September 30th, 2024.*

2. *That the board approve the capital budget-to-actual results for the project ending September 30th, 2024, and forecasted capital levy estimates.*
 3. *That the board approve the 2024/25 Community Support Services Q2 year-to-date budget to actual results.*
-