

Grand Viewpoints



Grandview Lodge's Resident & Family Newsletter

May 2020

A BIG THANK YOU!

Infinite Love & Gratitude



From the bottom of our hearts, **THANK YOU!** During this difficult time we've received so many kind words of gratitude, praise and encouragement. The support of our resident's families and our friends in the community has kept us going. Whether it be good communication and ideas to keep us all connected or donations of PPE or food for our staff; it makes a difference in the daily operation of our home. Here at Grandview we're all family. Our priority is the well-being of our residents, staff and our community. We promise to continue doing everything we can to protect us all, especially our vulnerable residents. To our peers; our colleagues and the management team: Your exceptional dedication, perseverance and expertise is why we're all staying as safe as possible. We could not do this without every single team member giving it their all. You're truly demonstrating Grandview's mission of the three C's: Comfort, Compassion and Care. We're confident that we are strong enough to get through this together. There's light at the end of the tunnel. We look forward to the day when we're all reunited and have defeated this pandemic, until then, stay healthy and stay safe!

On behalf of the GVL Family

Administrative Message

Making our Health Care Wishes Known is important for all adults, no matter your age or state of health. The COVID-19 pandemic heightens the need and the urgency with which we should all consider our own wishes for our Health Care Plan.

With the COVID-19 virus the onset of symptoms through to critical illness (requiring sedation and being put on a ventilator) can happen in just a few hours. If this outbreak continues to develop, there may not be time to have discussions with your loved ones about your preferences for healthcare. Have these vital discussions now, prior to the possibility of contracting an illness. Your loved ones and decision makers need to know your wishes in order to assertively speak for you.

Residents who have a more complex health history may be at greater risk of a more serious response to the virus. This includes but is not limited to:

- Those over 50 years of age. The older you are, the more acute the response.
- Those who have multiple medical issues (comorbidities), especially:
 - Heart disease of any type (including high blood pressure)
 - Chronic Lung Disease
 - Diabetes
- Those who are immunocompromised for any reason, including taking medications and systemic therapies for any disease
- Pre-existing mental health issues such as depression or anxiety, which can worsen, especially with social isolation or the need to be a caregiver.

THE IMPORTANT FIRST STEP: Look deeply at your/your Resident's values and beliefs

If you/your Resident were to acquire and survive this infection, what will you want your life to look like as you recover? There is a probability that your lung function will be compromised for a long time and, possibly, permanently. It's important to think about this – and it would be wise to discuss this with your loved ones and future decision makers now so they are able to relay this to your healthcare team.

What do you value? Do you value your independence and quality of life above all else? Or, would you give anything for time with your family, even if that meant limitations in what you're able to do?

How do you feel about quality of life versus quantity? Some of us would pick quality of life over living a long time. But many loved ones would choose more time with us. With this kind of disparity in goals, it's important to talk to those who will be making decisions for you and let them know what you want your life – or your death – to look like. This may help your loved ones to say on your behalf, when you can't speak for yourself, "Mom would want everything done..." or, "Dad, would not want to live like this..."

Where would you want to spend your last hours or days of life? We all have a picture of how we will spend our last days – and for most of us, it's not in the ICU, on a ventilator without loved ones at our side (due to isolation precautions), but, for those who become seriously ill because of COVID-19, this is a high probability. Do you want spiritual ceremonies to be performed before/after your death? What are the cultural beliefs that are important to you?

SECOND STEP: Talk to your loved ones and those who will be speaking for you.

These conversations are not easy but if you want your future wishes for care to be known, you need to talk to your loved ones. Not only will this ensure that they know your preferences for care, but it can lead to more in-depth conversations with your loved ones about what's important to you. Being simple, direct, and specific

allows others to really hear what you're saying. Being honest with yourself is the best gift you can give to those who care for you most.

THIRD STEP: Identify your wishes or the wishes of your Resident

A few key terms in understanding your healthcare options:

CPR means Cardio-Pulmonary Resuscitation: "Cardio" means heart; "Pulmonary" means lungs; "Resuscitation" means to try and restart a person's heartbeat and breathing when they stop. CPR is the act of manual, aggressive, compressions on your chest. "No CPR" is the same as "Do Not Resuscitate." No CPR is defined as "No Chest Compressions."

Defibrillation is a series of electrical shocks on the chest to reset the heart's rhythm when someone has a lethal (life-ending) heart rhythm or cardiac arrest.

Dialysis is a machine that filters waste from your blood, which is a function normally performed by your kidneys. Often our kidneys take a "hit" and go into shock in an acute medical event, especially after a heart attack, cardiac arrest, or major surgery. Dialysis can take over while the kidneys rest and recover, and in some instances, may only be needed over a short-term. However, if you already have some kidney failure before a serious health event, your kidneys will take a further assault and may not recover. Ongoing dialysis risks versus benefits should be discussed with you and/or your Substitute Decision Makers.

Intensive Care and Critical Care Units (ICU and CCU): The names of the units are often used interchangeably. The units have more nurses and doctors per patient, and there is monitoring and life-support equipment and treatments including ventilators and dialysis.

Respiratory: Non-invasive respiratory support is providing breathing and oxygen support for acute respiratory failure using a mask or similar device without a tube being put down the throat or via a tracheostomy. This is usually provided by CPAP7 (Continuous Positive Airway Pressure) or BiPAP8 (Bilevel Positive Airway Pressure). Note: Current guidelines for COVID-19 are that CPAP and BiPAP are not recommended for use, as they increase the risk to healthcare staff by the aerosolized virus.

Ventilator is a machine that provides breathing support and oxygen through a tube down the throat via a tube in the mouth or a tracheostomy (surgical incision at the base of the throat). It might be used short-term during or after surgery, but it might also be used long-term for the rest of the person's life. Benefits versus risks should be discussed with the Resident or Substitute Decision Makers based on the Resident's values and beliefs.

Think about the level of care you would want to receive

We have broken Levels of Care into five options, from most intensive to least intensive. The focus at each level is on your values and beliefs – use this as a guide when talking to your loved ones and Substitute Decision Makers. You can find the breakdown below for each of the five Levels of Care.

1. **Highest level of care:** Includes all resuscitation, including CPR (chest compressions) and ventilator.
2. **Intensive care without CPR:** but including all other resuscitation, including a ventilator.
3. **Conservative medical treatment but no resuscitation:** No CPR (chest compressions), and no ventilator.
4. **Symptom Management:** Approaching End-of-Life, symptom management and a focus on symptom control in place (home or residential care facility).
5. **Symptom Management: End of Life -** Stop feeding and drinking, symptom management and a focus on symptom control, regardless of location.

While many residents have made their wishes known at the time of admission or through annual care conferences, Grandview Lodge staff will be reaching out to all Residents or where applicable, their Substitute Decision Makers (SMD), who have expressed a wish for full CPR to confirm that this remains the wish given the current environment and potential for COVID-19 entering our home.

Any Resident or SDM of a Resident who is diagnosed with COVID-19 will be contacted by their physician and will be asked to provide the Expressed Wishes for care going forward. An **immediate decision will be required** and the purpose of the information provided above is to assist Residents/SDMs to have an answer prepared so that measures can be implemented as soon as possible. If you've already given thought to this as it relates to many debilitating illnesses, infections and health issues, you can share your wishes or those of your Resident with Kim Livingstone, ADON or Jelte Schaafsma, DON and they will ensure this information is noted in your medical record.

*Please note that if there is a surge of COVID-19 cases that require critical care, the clinical triage protocol may change and limit the treatment choices available, which could impact health care providers' ability to follow your wishes.

Dying With Dignity Canada

www.dyingwithdignity.ca

I regret that this is the conversation we are forced to consider and hope that we will not have to move forward on this process. I assure you the health and well-being of our Residents at GVL is always our top priority.

Stay Well and Stay Safe.

Jennifer Jacob, Administrator

In our last newsletter we announced the resignation of Dr. Hu and introduced our new physician, Dr. Kamouna. **We'd now like to thank Dr. Kazemi for his compassionate care for our residents over the last 31 years and wish him all the best as he moves onto his next chapter in life.**

Dr. Kazemi started at Grandview as one of three physicians and over the years became the primary physician for all residents and was also the Medical Director for many years. He's a great source of knowledge and loves to educate others. His dedication was shown by his willingness to go above and beyond to be available for our residents. In 2014, Accreditation Canada acknowledged Dr. Kazemi with the following statement in their report, "Grandview benefits from Dr. Kazemi and his extensive knowledge which assists the organization to minimize risk". Dr. Kazemi is a valued member of our team and he will be missed.

Please welcome our second new Attending Physician, Omar Ezzat

He was born in Northern Iraq in a small town named Kirkuk. He completed his medical education at the University of Baghdad in 2002. In 2009 he made the move to Canada while preparing for his Canadian certification, he lived in Ottawa and devoted his time working alongside refugees as the Clinical Coordinator at the Catholic Medical Centre for Immigrants.

In 2011, he began his medical practice in Newfoundland Labrador as a family physician; there, he fell in love with a small, old mining town called Buchans. He said “the kindness of the people and the beautiful outdoors captured (his) heart”. His practice included family medicine, emergency medicine, long term care and palliative care.

It was in Buchans where he developed a genuine passion for rural medicine and the geriatric population. He said he has “committed the last eight years to what (he) believes is the most vulnerable and under serviced population.”

“I am ready for my new endeavor and I am looking forward to getting to know you all!”

Both new physicians will be starting at Grandview May 1st. Residents and Substitute Decision Makers will receive information regarding new physician enrollment in the near future. Dr. Kamouna will be the physician for Hillview and Marshview. Dr. Ezzat will be the physician for Bridgeview and Creekview. **Welcome! We’re happy to have you both.**

From Your Friendly Nursing Department

Grandview Lodge has implemented many changes since the onset of the COVID-19 Pandemic

These changes that affect the nursing department have been made to ensure the safety of our residents and staff. Most of the direction came from the Ministry of Health (MOH), but often, we were ahead of the game by following best practice advice from our professional organization and Public Health.

Some of the changes that were implemented include: closing the Home to visitors, social distancing between residents, staff wearing masks at all times, limiting work locations for staff, and active COVID-19 screening of residents, staff, and essential visitors.

The Ministry of Health has directed Long Term Care homes to perform “active screening of all staff, essential visitors and anyone else entering the Home”. The screening is performed twice a day, by one of our staff members at the main staff entrance. Anyone showing symptoms of COVID-19 (fever, cough or other symptoms, this includes temperature checks) will not be allowed to enter the Home and should go home immediately to self-isolate.

Grandview is closed to visitors, except for essential visitors. The MOH classifies essential visitors as: “a person performing essential support services (e.g. food delivery, phlebotomy testing, maintenance, family or volunteers providing care services and other health care services required to maintain good health) or a person visiting a very ill or palliative resident.” Essential visitors are also screened on entry and will not be admitted if they show any symptoms of COVID-19. Essential visitors will wear a mask when in the Home and may be asked to wear the appropriate PPE (gown, gloves, mask) when in contact with our residents.

Some of the essential visitors that are currently allowed at Grandview are: Life Labs who comes in weekly to do blood work; mobile x-ray service when needed; one physician comes in weekly to see residents; and our equipment service contactor comes in when required.

As a result of the pandemic, some of our equipment is serviced outside or in the front lobby, such as our wheelchair vendor, motion and our oxygen supplier, Medigas. All deliveries, such as medications from our pharmacy or medical supplies are dropped off outside the loading dock.

Many visitations and services have been discontinued, such as our hairdresser, massage therapist, our physiotherapist, foot care nurse, dental hygienists, pharmacist and medical specialists and our volunteers, entertainers, students, etc. At times, we are able to refer to services for our residents by phone or email communication.

All these changes reflect strong efforts by our team to ensure the safety of everyone throughout this Pandemic. We are all very grateful for your support and well wishes!

Reference: *COVID-19 Directive #3 for Long-Term Care Homes under the Long Term Care Homes Act, 2007*

Jelte Schaafsma, Director of Nursing

What’s Cookin’ in Dietary?!

Just in time for May, our Spring and Summer menus will be launched once they are reviewed and approved by our Dietitian. Resident’s Council had the opportunity to provide their input to the menus and we’re grateful for their suggestions and ideas.

The current COVID-19 pandemic has certainly changed how we’re providing meals to our residents. We’ve used all of our available space to create additional dining areas to support physical distancing. Staff continue to work together to ensure all residents receive their meal as ordered and enhanced measures are in place to ensure we maintain excellent food quality. Every department has been impacted by the changes to meal service, and we want to take this opportunity to thank them for their

efforts. For residents in complete isolation, the dietary and nursing teams have developed an efficient 'room service' delivery method that still provides our residents with choice, supervisor and feeding assistance as required. All hands have been on deck for this process, and the team continues to ensure the nutritional well-being of our residents.



On Sunday May 10th, we'll be celebrating Mother's Day!

We're thankful to Resident's Council for helping design this menu. Typically we invite family and friends to come celebrate with their loved one however we regretfully remain unable to have visitors for meal times.

The **Tuck Shop** will remain closed for the duration of the pandemic. With tremendous support from the recreation team, we've been able to provide some Tuck Shop goodies to our residents. We certainly look forward to the day when the doors will re-open, the coffee is brewing, and residents and family are enjoying the company of the wonderful volunteers who make our Tuck Shop possible.



May Myth Buster

Did you know that honey is simply a natural sweetener and your body can't tell the difference between honey and white sugar (which is also a natural sweetener). It's merely a personal preference. Sugar does not make a person hyper-active - who knew??

Thanks to all our residents and their families for their support!

Maria Vanderhorst, Dietary Supervisor

Programs and Supports

Easter this year was certainly different for us all. Check out some well wishes from our residents for the Easter holiday.



The **Recreation team** continues to offer programs to all our residents, mostly on a one to one basis. If we have a small group program it's with five or less residents who are all practicing physical distancing for the duration of the program. The team is starting to make individual activity baskets that include items specific to each resident's interest. Any one of our team members can use these baskets to engage a resident in an activity. They're not shared between residents in order to decrease the potential for cross-contamination. They may include individual pencil crayons, colouring books, music, crosswords, pictures/books, etc. Even our nail polish is for individual use only with the resident's name labeled on the bottle. We want to ensure that the safety and emotional well-being of our residents is our number one priority. We know that what we're currently going through may increase the risk for depression and loneliness setting in for our residents; however, we're committed to being positive and challenging ourselves to provide many opportunities for our residents to be engaged. Our Recreation team continues to set up window visits, phone calls, Facetime and Skype visits with family and friends. If you haven't already done so please contact your home area's recreation team member to set something up.

I just wanted to say thank you to all of our volunteers at Grandview Lodge. I know this year is incredibly different for us all and I'm sad that our volunteer appreciation luncheon was cancelled in April, but I do hope we can reschedule when this is all behind us. The residents' and staff miss everyone terribly and can't wait until we can have our volunteers back with us again. Please stay safe and healthy everyone and thanks again for all that you do for Grandview Lodge!



We've recently had many community members volunteer their time to make masks for us to use during COVID-19. Thank you for all of your time and effort in keeping us safe!



Stay safe and healthy everyone!

Amy Appel, Programs Supervisor

Maintenance Knows Best!

As this pandemic continues to challenge how we all work and live, we thank you for your unwavering support and positivity. The Environmental Services teams at Grandview Lodge have been following direction from the Ministry of Health since this pandemic began. Extra staffing and cleaning practices have been put into place to help ensure the continued health and safety of our residents, and for the staff providing the high level of care in our Home. We continue to focus on disinfecting all surfaces and high touch points throughout the Home and continue to use cleaning and disinfecting products that are approved by Health Canada for the fight against COVID-19. Our dedicated teams in Environmental Services will continue to rise to the challenges of COVID-19 and continue to work tirelessly to bring care, comfort and services to all of our residents. Your support means the world to our residents and to all of us here at Grandview Lodge.

Kellen Mowat, Facility Operations Supervisor

The Welcome Wagon



Welcome to our new residents!

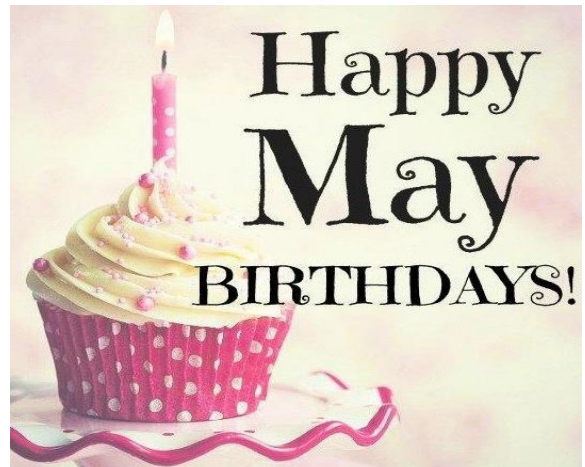
- **Laura Hoover**

Has 3 siblings and 3 children who will all visit often. She enjoyed long walks and country drives; now she likes to listen to country music, magazines and western movies.

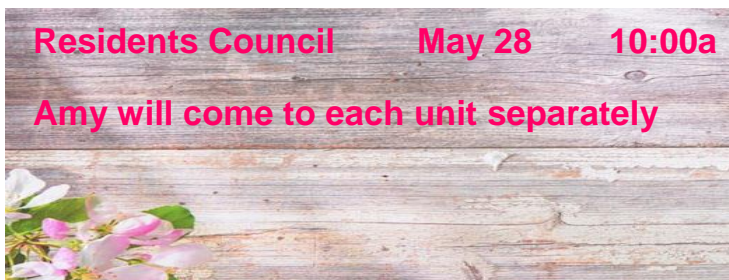
We're happy you joined the GVL family!

Happy Birthday to our May residents!

- Joan Beale
- Margaret Davidge
- Wava Hoover
- Martha Jones
- Norma Jane McConachie
- Sonja Pietersen
- Rachel Poulin
- Betty Sepp



Look forward to this!



Farewell

With heavy hearts we said good bye to:

- Orvill Helka
- Mary Anna Phelps

You are missed.



What's happenin' in Bridgeview...

During our COVID-19 precautions and limitations, recreational activities were a bit different. We've been doing a lot of one-to-one visits, Facetime calls, music therapy Zoom calls and window visits.



Nicole Leeney, Therapeutic Recreationist

Just for Fun!



© Brian Crane.

Spring Time Word Scrambles

April showers bring...

YEWSAFORML _____

Early morning sounds coming from the trees

DRPGRIBSNICIH _____

Someone that is great at growing plants and flowers has a

TNGEBRUEHM _____

What all the flowers are doing

BMGONOIL _____

A great activity to do on a windy day

LKGOYIETAF _____

What bees do to flowers

TILPLNOEA _____

What you do on Arbor Day

EPALATNETR _____

A seasonal school dance or event

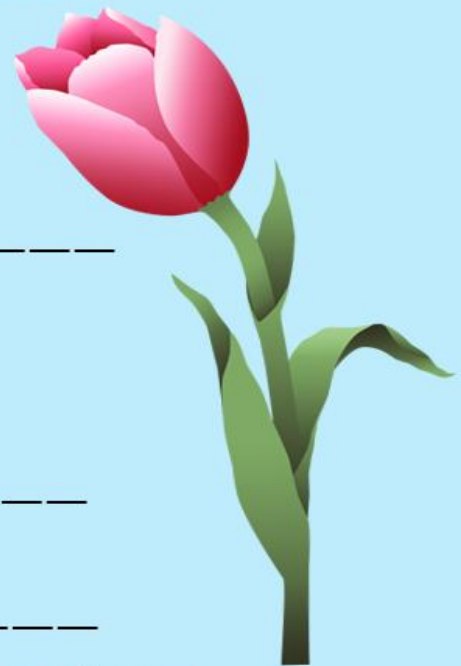
INNFLISPRG _____

Two insects often seen flying near and crawling on flowers

TFSLEUBEITR _____

UBALYDSG _____

Keep Your
Brain
Sharp!



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Can you Solve this?

$$3 \text{ red roses} + 3 \text{ red roses} + 3 \text{ red roses} = 60$$

$$1 \text{ red rose} + 2 \text{ blue daisies} + 2 \text{ blue daisies} = 30$$

$$1 \text{ blue daisy} - 1 \text{ yellow daisy} = 3$$

$$1 \text{ red rose} + 1 \text{ yellow daisy} + 1 \text{ blue daisy} = ?$$



Too cute to not make you smile!



Resident Feature

Doris Aucoin, Bridgeview

She was born September 8th 1936 in Glace Bay, Nova Scotia, making her a welcome Cape Bretoner to Grandview Lodge. When she was 10 years old her family moved to New Waterford. She was the oldest of six children; three girls and three boys. Unfortunately she lost her mother far too soon, when Doris was only 17 years old; she then took the role of caring for her siblings.

Doris married a military man from the Reserve Mines, Arthur Aucoin April 25th 1957 in Ottawa where he was stationed. Together they raised four children, two boys and two girls: Shane, Kirk, Bonnie and Deana. Throughout the years that Art was in the army the family travelled across Canada, living in Ottawa, Halifax, Gagetown, Petawawa, Chilliwack, Valcartier and back to Petawawa, where Art completed his 25 year military service.

They moved back to Cape Breton, with their youngest daughter once Art retired and then two years later settled down in Stoney Creek. Doris joined the work force as a Visiting Homemaker, similar to a PSW. She fulfilled this role in Stoney Creek for 11 years. Doris and Art bought and renovated a bungalow on the shores of Lake Erie just off Kroeler Rd in 1994 and called this their home.

Doris is an avid reader and has been her whole life; mysteries are her favourite genre. She was very crafty throughout the years, sewing, knitting, crocheting and making ceramics.

Doris loved to travel. While the children were young they travelled to many parts of Canada and the United States with various recreational vehicles, even making a trip to Alaska. Her travelling didn't stop there though; she did a bus tour to England, Scotland, Ireland and Wales, went on three Caribbean cruises, traveled to Panama and went on a Mediterranean cruise when she was 75.

Sadly, Doris lost her husband Art in December of 2018. She's still blessed with her four children spread across the county: Shane in Calgary, Kirk and Deana in Cape Breton and Bonnie in Mississauga. Three of her siblings also live nearby in the Hamilton area. Doris is grateful for her growing family; she has five grandchildren and three great grandchildren.



Doris moved to Grandview January of this year. She's got a great, bright smile that we've come to know and love. Doris, of all the fond places you've called home over the years, we hope Grandview is now one of them. From west to east and everywhere in between, know that you now have family here in Dunnville too.

Staff Contact List

Jennifer Jacob	Administrator	Ext. 2224
Jelte Schaafsma	Director of Nursing	Ext. 2234
Kim Livingstone	Assistant Director of Nursing	289-776-5185
Kellen Mowat	Facility Operations Supervisor	Ext. 2241
Pauline Grant	Dietary Supervisor	Ext. 2228
Maria Vanderhorst	Part Time Dietary Supervisor	Ext. 2237
Melanie Kippen	Dietitian	Ext. 2240
Amy Appel	Programs Supervisor, Volunteer Coordinator	Ext. 2233

Nurse's Stations:

Hillview	Ext. 2923
Bridgeview	Ext. 2922
Creekview	Ext. 2924
Marshview	Ext. 2925

Recreationists:

Megan Herkimer, MV	Ext. 2301
Nicole Leeney, HV	Ext. 2303
Gayle McDougall, BV	Ext. 2302
Bev Little, CV	Ext. 2300

Did you know the following services are available at Grandview Lodge?!

Bobbi Jo Biggley	Hairdresser	Ext. 2239
Khurram Khan	Physiotherapist	Ext. 2232
Doug Maloney	Massage Therapist	289-684-9746
Vicki Lance	Dental Hygienist	905-741-4735
Conor McDonough	Dentist	Ext. 2221 (book with Lori)
Dr. Hu	Physician	Ext. 2221 (book with Lori)
Dr. Kazemi	Physician	Ext. 2221 (book with Lori)
For off-site medical appointments we have a van (fees apply)		Ext. 2221 (book with Lori)

Physician appointments held at Grandview Lodge and can include the Director of Nursing.

You can find our Resident & Family Information Booklet at the bottom of our Admissions page on the Haldimand County website – Grandview Lodge!

To book the private dining room and/or overnight suite:

Lori Beale	Residents Clerk	Ext. 2221
Pamela Bonnett	Accounts Clerk	Ext. 2222
Karli Pottruff	Administrative Assistant	Ext. 2223

Grandview Lodge, An Accredited Home – Exemplary Standing

With comfort, compassion and care, the Grandview Lodge community supports a meaningful life for residents.

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Our newsletters in colour can be found on the Grandview page of our website. If you'd like to join the monthly email subscription list please email kpotruff@haldimandcounty.on.ca

This list is also a way for us to relay importance notices to you by email immediately.