



Redevelopment of Bethammi Nursing Home

Public Consultation Results

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November 20, 2009

Public Consultation Report – Redevelopment of Bethammi Nursing Home

November 15 – 17, 2009

Thunder Bay, Ontario

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Executive Summary

St. Josephs Care Group (SJCG) is in the process of considering options for the redevelopment of the Bethammi Nursing Home. The Board of Directors directed the Leadership Team to analyze options for Bethammi redevelopment and provide a recommendation. The following options were identified:

- **Option 1** – Delay the Redevelopment for a future date and continue with the current 110 beds
- **Option 2** – Retrofit the existing Bethammi Site for a total of 128 beds. One hundred and ten beds would come from Bethammi, 16 beds from CEISS and a request will be made to the MOHLTC for two new beds.
- **Option 3** – Rebuild Bethammi on a new site with a total of 128 beds. One hundred and ten beds would come from Bethammi, 16 beds from CEISS and a request will be made to the MOHLTC for two new beds.
- **Option 4** – Add the Bethammi beds to the Centre of Excellence for Integrated Senior Services (CEISS). The addition of Bethammi's beds (110), a request will be made to the MOHLTC for two additional beds, plus 336 beds from CEISS would make the total number of beds at CEISS to 448.

After careful consideration, SJCG identified Option 4 – to move the Bethammi beds to the Centre of Excellence of Integrated Seniors' Services Project (CEISS) – as the preferred option. The options, including the recommended option of SJCG Board of Directors, were reviewed with the Northwest Local Health Integrated Network (NW LHIN) to ensure that the proposed development responds to the North West LHIN's priorities. The LHIN provided feedback on the preferred option for SJCG to consider and requested that the organization complete a public consultation process.

SJCG engaged the firm of ICA Associates Inc. and The Desk Consulting Group Inc. to develop a consultation process and a report for submission to the NW LHIN. The facilitation process engaged 175 people including residents, family, volunteers, staff, health care stakeholders and the general public. Participants reviewed the four options, identified questions, concerns and offered their opinions on an option for the redevelopment of the site.

Consultation Results

Participants support **Option 4 – Add the Bethammi beds to the Centre of Excellence for Integrated Senior Services (CEISS)** – as the preferred option. They understand the consultation was focused on the Bethammi beds and their addition to CEISS. There was a clear understanding that the consultation was not about the overall CEISS project, only about the Bethammi beds. Participants were pleased to learn that the redevelopment plan only impacts the Bethammi beds. Other services will continue at St. Joseph’s Heritage (e.g., chapel, programs, food services, P. R. Cook Apartments, etc). Any additional risk issues (i.e., infection control, height of the building, etc.) were answered during the consultation and noted for further follow-up by SJCG.

The following three concerns were identified by participants:

Concern 1 – Location of the Home

The issue of moving Bethammi Nursing Home from the north side of the city to the south side was consistently raised throughout the consultation. Participants expressed concern that the loss of the beds on the north side of the city would reduce the choice of homes for consumers and cause potential hardships for family members (travel and access).

Concern 2 – ‘Size’ of the Home

Concern was raised about the physical size of the building and impact on the surrounding community. The height of the building was raised as a concern due to its proximity to the airport flight path. The size of the property was identified a potential challenge given parking may be a long way from the main buildings. Concern was raised about potential infection control issues. Finally, concern was expressed about how a 448-bed home could be made home-like.

Concern 3 – Quality of Care

Participants noted the quality of care at Bethammi is very good and would like to see this continue at the new location, given the size of the new building and potential change of staff.

Conclusion

Participants are generally supportive of a redevelopment of Bethammi Nursing Home. They have concerns about reduced choice of homes in the north end of the city, how to make CEISS have the same community feel as the current location, and ensuring the quality of care remains consistent or better as a result of the redevelopment. Participants want what is best for residents, recognize that dollars are limited, and they want to be involved in the change process. They appreciated the opportunity to be heard on the redevelopment plan, and they expressed their support for further consultation efforts by SJCG on the project.

The full report outlines the various questions, concerns and comments as raised during the consultation as well as the result of the consultation poll.

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INTRODUCTION

St. Joseph's Care Group (SJCG) is in the process of considering options for the redevelopment of Bethammi Nursing Home. Leadership Team identified four options for the consideration of the SJCG Board of Directors. After careful deliberation, the option to move Bethammi Nursing Home beds to the Centre of Excellence of Integrated Seniors' Services (CEISS) was identified as the best possible option for the redevelopment of Bethammi Nursing Home. The options, including the recommended option, were reviewed with the North West Local Health Integrated Network (NW LHIN) to ensure the proposal was in keeping with the ongoing system planning of the LHIN. The LHIN provided feedback on the preferred option for SJCG to consider and requested the organization to complete a public consultation process.

SJCG engaged the firm of ICA Associates Inc. and The Desk Consulting Group Inc. to develop a consultation process and a report for submission to the NW LHIN. The facilitation process engaged a cross-section of the community (residents, families, P. R. Cook Apt. tenants, staff, volunteers, health care stakeholders, general public) with an opportunity to review the four options, identify questions and concerns and provide their opinions on the viability of the options for consideration by SJCG. Upon completion of the facilitation process, a report would capture the questions and concerns raised by the participants along with the results of their input into the options. The facilitation process combined with a written report would be used to response to the NW LHIN's request to complete a public consultation process.

The purpose of this report is three-fold:

- It contains a record of the questions and concerns of the participants on the four options for the redevelopment of Bethammi Nursing Home;
- It contains the participants' opinion on each of the four options with their supporting comments;
- The report identifies a number of high level themes emerging from the consultation process for inclusion in ongoing planning for the redevelopment of the site.

The report is divided into five sections:

- **Section 1 – Consultation Design:** An overview on the role of the consultants, the consultation questions, consultation materials and sequence of consultation events;

- **Section 2 – Community Response:** A detailed collection of the questions, comments and evaluation of the options by the participants;
- **Section 3 – Emerging Themes:** A list of emerging themes from the consultation process that will assist with the redevelopment of Bethammi Nursing Home;
- **Section 4 – Summary:** A summation and closing thoughts on the public consultation;
- **Section 5 – Appendices:** A copy of the supporting materials, participant questions, comments and other materials associated with the consultation.

CONSULTATION DESIGN

THE FACILITATOR AND FACILITATION PROCESS

ICA Associates Inc. is the largest trainer of professional facilitators in Canada. The organization has a long history of working in the health sector, of public consultation and of facilitation in Northern Ontario. A principal of ICA Associates Inc, William Staples, was the manager of the project and the facilitator for the public engagement sessions.

The consultant recommended the following approach for the community engagement:

- **Transparency:** The discussions of the SJCG Board of Directors , including all the options discussed in the development of the proposal to MOHLTC would be disclosed in the community engagement sessions. This was to include the pros and cons of each option, as well as financial information developed during the proposal development.
- **Broad Engagement:** As many different groups as possible would be consulted in the community engagement sessions. This would include the residents of Bethammi, their families, the staff, the tenants of the P.R. Cook Apartments (also a part of St. Joseph's Heritage), health care stakeholders, and two open public meetings in Thunder Bay, one in the north end of the city and the other in the south end of the city.
- **Public Invitations:** Invitations to the sessions would be disseminated through the media several times to ensure that as many people as possible could be included in the community engagement.
- **Public/Private Commentary:** All participants would be invited to make their questions, concerns and comments known publicly during the community engagement sessions. All participants would also be given the opportunity to make their views know privately through participant worksheets that would be collected at the end of each session.
- **Exit Survey:** Participants learn from presentations and from each other during the community engagement sessions. Therefore, an exit survey would be conducted to capture their views at the end of each session. This would be separate from the worksheet that would capture comments during the sessions.
- **Media:** Media would be invited to attend the public sessions.

- **Other Input:** The SJCG website (<http://www.sjcg.net>) will provide a copy of the consultation materials and additional information (e.g., Questions and Answers) for the public to access. Comments are also welcome via e-mail (or in writing) to sjcg@tbh.net.

THE WRITER AND THE REPORT

The Desk Consulting Group Inc. specializes in the facilitation and development of planning events and reports for organizations in the health care and community sectors. Ethan J Mings is the president of the firm and served as the neutral third party observer for the consultation process. As the third party neutral, the consultant:

- Attended each of the consultation process meetings
- Recorded participant questions, concerns and comments as discussed during the consultation events
- Collected and documented all comments written by participants
- Created the report design
- Completed the report for St. Joseph's Care Group.

PUBLIC CONSULTATION QUESTION

The consultation served as an opportunity for participants to review four options for the Bethammi redevelopment project and provide their questions, concerns and opinions on the options.

The options, outlined below, were presented with supporting information in order to provide everyone with as much information as possible to provide their advice.

- **Option 1** – Delay the Redevelopment to a future date and continue with the current 110 beds
- **Option 2** – Retrofit the existing Bethammi Nursing Home for a total of 128 beds. One hundred and ten beds (110) would come from Bethammi, 16 beds from CEISS and two new beds would be requested from the MOHLTC.
- **Option 3** – Rebuild Bethammi on a new site with a total of 128 beds. One hundred and ten (110) beds would come from Bethammi, 16 beds from CEISS and two new beds would be requested from the MOHLTC.

- **Option 4** – Add the Bethammi beds to the Centre of Excellence for Integrated Senior Services (CEISS). The addition of Bethammi’s beds (110) plus two additional beds, requested from the MOHLTC, plus 336 beds from CEISS would bring the total number of beds at CEISS to 448.

An important factor in Options 2, 3 and 4 is the number of beds. The numbers are based on a multiple of 32 to ensure the options allow SJCG to comply with the new MOHLTC design standards requiring 32–bed resident home areas.

CONSULTATION MATERIALS

Materials were provided to each of the participants during the consultation event. The materials included:

- **Handout of the PowerPoint Presentation:** The handout outlined the agenda for the consultation, background information on the redevelopment, options for discussion during the consultation, analysis of the options, and diagrams of the CEISS site for Option 4.

Appendix 1 is a complete copy of the PowerPoint presentation shared with participants.

- **Public Consultation Worksheet:** The handout provided participants the opportunity to write out their questions, concerns and comments about the redevelopment. At the end of the session, participants were encouraged to leave their written comments for inclusion in the report.

Appendix 2 is a copy of the Public Consultation Worksheet.

- **Public Consultation Poll:** Participants were asked at the end of the consultation to provide their feedback on the four options and additional comments on the options as a result of the consultation event.

Appendix 3 is a copy of the Public Consultation Poll.

CONSULTATION PROMOTION

SJCG promoted the consultation events using a variety of methods. The general public was informed of the two sessions through a series of advertisements in *The Chronicle Journal*. The advertisements were noted by the media who also made inquiries into the consultation process. Media was present during the November 17th session at the DaVinci Centre and interviewed the President and Chief Executive Officer, Tracy Buckler. A radio interview was also held. Residents, families and volunteers were informed through personal invitation and written notice. Staff was invited to a session to learn about the options and provide their input. Health care professionals from other long-term care homes, physicians, NW CCAC, Hospice Northwest, etc., were sent personal invitations to a session.

Appendix 4 contains copies of the materials used by the organization to promote and communicate the event to a wide variety of people.

SEQUENCE OF EVENTS AND COMMUNITY PARTICIPATION

The consultation involved participants within the organization and in the community. The consultation started with residents, family members and volunteers at Bethammi and moved on to involve staff, tenants of the P. R. Cook Apartments, health care stakeholders and the general public. A total of one hundred and seventy five (175) individuals participated in the six consultation events.

Table 1 is a summary of the event dates, consultation locations, groups and number of participants.

Date	Location	Participants	Participants
November 15	St. Joseph's Heritage	Bethammi Residents, Family Members and Volunteers	63
November 15	St. Joseph's Heritage	Staff Members	12
November 16	St. Joseph's Heritage	Health Care Stakeholders	10
November 16	St. Joseph's Heritage	P. R. Cook Apartment Tenants	40
November 16	Italian Cultural Centre	General Public Consultation	36
November 17	DaVinci Centre	General Public Consultation	14
Total Number of Participants			175

TABLE 1- EVENTS AND PARTICIPANT NUMBERS

COMMUNITY RESPONSE

The following is a collection of the community's response to each of the options. The material is organized by

- Name of the Option
- Advantages and Disadvantages of the Option¹
- Questions raised during the consultation
- Concerns raised during the consultation
- Comments
- Public Consultation Poll Results

The questions, concerns and comments were prepared by the participants and raised during the session during the public dialogue sections of the meeting. The Consultation Poll Results were collected after the meeting and tabulated for inclusion in the report.

A copy of the Questions, Concerns and Comments organized by the consultation events can be found in **Appendix 5**.

A copy of the details on the Consultation Poll Results with all of the comments can be found in **Appendix 6**.

The final section contains a series of questions, concerns and comments that apply to one or more options or consist of general concerns related to planning, development or resident care.

The questions and concerns identified throughout this section were addressed in detail by members of the SJCG during the consultation process.

¹ The advantages and disadvantages of the options were presented to the participants during the session. See **Appendix 1** for a copy of the slide deck.

COMMUNITY INPUT ON OPTION 1

Option 1 – Delay the Redevelopment for a Future date and continue with the current 110 beds

Option Advantages

- Maintains Heritage site as a continuum-of-care complex similar to the future CEISS
- Maintains Heritage culture
- Residents not required to move

Option Disadvantages

- Staff recruitment/retention issues
- Inequity in accommodation between residents of Hogarth Riverview Manor, future CEISS development and Bethammi Nursing Home
- Outdated design, environment not attractive to potential residents
- As building structure ages, difficult to meet compliance standards
- Cannot provide ‘economies of scale’ possible in larger home
- Cannot provide innovative program development
- Significant financial impact in future – value of redevelopment funding will shrink if project is delayed, and construction costs will rise
- Impacts SJCG’s ability to finance project at later date

QUESTIONS RAISED

The following questions were raised during the consultation on the option.

Delay the Project

- What is the point of delaying?

CONCERNS RAISED

The following concerns were raised on the option

- No concerns were raised on this option during the consultation meeting.

PUBLIC CONSULTATION POLL RESULTS

Table 2 reflects the response of participants to the proposed option using the Public Consultation Poll. One hundred participants provided the following responses when asked to provide their opinion on Option 1 as a result of the consultation meeting.

Best Option	Ok Option	Bad Option	Worst Option
12	26	28	34

TABLE 2 – POLL RESULTS TO OPTION 1

Key comments from participants on Option 1 recorded in the poll include:

- I want to stay here. I don't see anything wrong with this building
- This building is better build any new building will not be built as good as the New Hospital
- Home will deteriorate and standards will not be met
- Perhaps the Ministry will be prepared to adjust their criteria
- Must take into consideration comments made by those from north side
- Only delaying the inevitable, although a delay may be necessary if too much controversy
- I'd like to keep the "a Home for all Seasons" concept
- Convenient Travel
- Will only cost more in future
- If facility is needed now, then time frame becomes more urgent, to resolve current problem of replacement, as soon as possible

COMMUNITY INPUT ON OPTION 2

Option 2 – Retrofit the existing Bethammi Site for a total of 128 beds. One hundred and ten beds would come from Bethammi, 16 beds from CEISS and two new beds.

Option Advantages

- Maintains St. Joseph's Heritage as continuum-of-care complex
- Provides improved environment for residents
- Incorporate 'energy-efficient' design strategies
- Maintains culture of home and staff working with the residents

Option Disadvantages

- Exposes residents and staff to ongoing stress and safety issues
- Unlikely that potential clients would choose to come to Bethammi during construction period (3 to 4 years) – financial implications
- Multiple moves for residents during phased construction
- Retrofit standards – inequity in accommodation between SJCG long-term care sites
- Less efficient use of space – more costly to operate
- Inequities in bedroom sizes not reflected in residents' payment rates
- 'Institutional' look – larger home areas (37 beds vs. 32 beds)
- Small home unable to generate economy of scale, innovation in program development and attract professional staff
- Retrofit more costly than new construction
- Project could not be completed by December 2012 as required

QUESTIONS RAISED

The following questions were raised during the consultation on the option.

- If you build on the third floor, how would you work around the noise?

CONCERNS RAISED

The following concerns were raised during the consultation on the option.

Project Timeline

- Option 2 and Option 3 has a timeline that cannot be met? What is the consequences if select the option?

PUBLIC CONSULTATION POLL RESULTS

Table 3 reflects the response of participants to the proposed option using the Public Consultation Poll. Ninety five participants provided the following responses when asked to provide their opinion on Option 2 as a result of the consultation meeting.

Best Option	Ok Option	Bad Option	Worst Option
16	30	32	17

TABLE 3 – POLL RESULTS TO OPTION 2

Key comments from participants on Option 2 recorded in the poll include:

- Only if all residents could be moved elsewhere during the construction phase
- Not good for patient
- Best option for residents to retrofit on same site. This has been their home for 1 – 3 years. They have already given up their own home. It is very traumatic for them. Any changes are very hard on residents
- Ok but very disruptive to residents during construction
- Noise for residents, stressful
- Too expensive, lots of noise
- Important to have a facility in North part of the City (Port Arthur Ward)
- Retrofitting always ends in being more expensive
- Too disruptive to residents, not achieving efficiencies
- Parking an issue
- Too much upset chaos for all concerned. Having worked through a retrofit
- Having worked through retrofit too much chaos
- Retrofits seem to be more costly than new construction

COMMUNITY INPUT ON OPTION 3

Option 3 – Rebuild Bethammi on a new site with a total of 128 beds. One hundred and ten beds would come from Bethammi, 16 beds from CEISS and two new beds.

Option Advantages

- Residents would only move once
- No ongoing stress/safety issues during construction period
- Implements new MOHLTC design standards – small resident home areas
- Optimizes staffing ratios
- Provides opportunities for improved energy performance and environmental sustainability
- Provides equitable accommodation with HRM and CEISS
- Maintains culture of home
- New construction less costly than retrofit

Option Disadvantages

- Requires residents to vacate familiar environment/neighborhood
- Disrupts Heritage site continuum of care
- Professional staff recruitment/retention issues continue
- Heritage Support Services staff will be divided between sites
- A stand-alone project does not provide continuum of care
- Availability of land and potentially high land and development costs
- Financial pressures and reduced cost effectiveness of operating continue
- Cannot meet December 2012 deadline

QUESTIONS RAISED

The following questions were raised during the consultation on the option.

Existing Facilities

- What will happen to the buildings?
- If we move to a new place, what would happen to this place? And the people
- If option 3 or 4, what would happen to the existing location?
- What will happen to the existing sites?

Quality of Care

- Would nursing care change?

Ongoing Input into the Options

- Is there opportunity for input into Option 2 and Option 3?
- With Options 3 & 4, will the organization have a new name?

Potential Locations for Consideration

- Potential sites – Other sites in North end of the city (old hospital)
- Have you considered other sites e.g., LPH Grounds

Location of Facility

- Concerns raised by families on where the location will be for the beds?
- What accommodation is being made for people who want a home in the North End of the city?

CONCERNS RAISED

The following concerns were raised during the consultation on the option.

Cost Analysis

- Do you have any costs for relocation?

North End Presence

- Our presence in the North End of the city
- Was demolition an option for site?
- It would be helpful to focus on rebuilding on this side of town – north side of town
- Option 3 – build in current area
- Current location – building on the parking lot?
- Why did you not purchase Pine Street School?

Design Considerations

- In the 32 section, dining room. Would the rooms be private, semi- private rooms?
- If we move out of this location, won't we still have retrofit, mess and money?
- What options did other organization talk about if they could build from scratch?

General Comments

- Important to stay in the North End
- All possible options in the North End of the city are investigate

PUBLIC CONSULTATION SURVEY POLL RESULTS

Table 4 reflects the response of participants to the proposed option using the Public Consultation Poll. One hundred and two participants provided the following responses when asked to provide their opinion on Option 3 as a result of the consultation meeting.

Best Option	Ok Option	Bad Option	Worst Option
39	44	15	4

TABLE 4 – POLL RESULTS FOR OPTION 3

Key comments from participants on Option 3 recorded in the poll include:

- On North side of city
- Will keep residents in their own neighbourhood and close to supportive family members
- Port Arthur area
- Totally un-necessary to buy land and have yet another SJCG site
- No continuum
- Should investigate the North Ward sites possible to accommodate North ward families
- Running yet another SJCG site will have added expenses. Plus won't meet the 2012 deadline
- In North Ward – Take 110 Bethammi beds and 0.5 beds from Dawson Court and build 110 +75 –80 beds
- Stay on North Side for compassionate reasons – Families , Clients
- For 6 Million more, you would have a state of the art facility that is in the Centre of Town
- Geographical option
- New construction would probably be quicker than retrofit, and would allow more flexibility to include all needs more easily.

COMMUNITY INPUT ON OPTION 4

Option 4 – Add the Bethammi beds to the Centre of Excellence for Integrated Senior Services (CEISS). The addition of Bethammi’s beds (110) plus two additional beds plus three hundred and thirty six beds from CEISS would make the total number of beds at CEISS to 448.

Option Advantages

- Supports ‘aging in place’ concept; a continuum of care
- Achieves staff efficiencies and economies of scale
- Provides accommodation equity for SJCG LTC residents
- Meets new design standards; promotes small resident home areas (32 beds)
- Will attract researchers, physicians, educators and staff
- Improves wait list issue
- Capital cost is lowest compared to other options
- Can be easily added to CEISS and completed by MOHLTC deadline of December 2012

Option Disadvantages

- Bethammi residents and staff will have to relocate to Hogarth Riverview Manor site
- Families and volunteers will have to travel to Hogarth Riverview Manor site
- Disrupts continuum of care at Heritage site
- Staff working in Heritage site support services divided between sites
- Perception of a large building – may not project ‘home-like’ environment
- Labour relations issues and managing culture of combining staff

QUESTIONS RAISED

The following questions were raised during the consultation on the option.

Identity and Reputation

- Is there opportunity for input into Option 2 and Option 3?
- Are we losing our name and reputation with a move under option #4?
- Is the culture different between the two locations
- What is the difference between KSGM and CEISS?
- With Options 3 & 4, will the organization have a new name?

Staff

- Will there be enough staff in the bigger facility – will the number of staff meet Ministry Health Standards?

PR Cook Apartments Impact

- Would existing facilities remain?

- Would the cafeteria remain for use of the tenants?
- What effect will this have on the PR Cook tenants?

Size and Feel of Residence

- It is a challenge to maintain a home-like feel/ environment
- Is the price going up for residents
- Option#4 – are different than other beds, would they be Bethammi Beds?

Location of Beds

- Making all long term care beds in one end of the city
- If we move to a new place, what would happen to this place? And the people
- Would individuals have the opportunity stay with SJCG group?
- What accommodation is being made for people who want a home in the North End of the city?
- Geography – north and south side of the city and where the facility is located

Investing in Front Line Care

- Efficiencies – does it go back into front line care?
- Would nursing care change?

Labour Relations Questions

- Seniority blending
- Would our bargaining unit remain the same?
- Would there be layoffs?
- Full time to part time – bumping
- Keeping the union
- Guaranteeing our jobs
- Is there different pods of clients, are they mixed, how will this work?
- Union mergers – is there going to be multiple union groups in the same facility
- What are the staff implications of moving people on the existing staffing levels at PR Cook – what is the impact on residents?
- Additional information on the benefits for staff recruitment of the new proposal?

Number of Beds

- Total number of beds we may end up with as a result of the project
- Competition for residents? May increase the difficulty for other facilities
- When do you expect the CEISS to be completed?
- Concerns raised by families on where the location will be for the beds?

- CEISS: what is the size of the new CEISS?
- Are the 366 beds owned by the city?
- 64 behaviour beds: What is happening to the LPH site/ beds in relation to CEISS?

Service Mix

- Geriatric services – how are they related in planning beds
- Benefit – development of specialized beds – brain injured, developmentally challenged
- Respite – Are we going to have enough staff to deal with Respite care?
- In any of the options, are respite beds being considered?

Facility Design

- Is there a restriction due to the flight path at airport?
- Will adding the additional beds delay the CEISS completion date?
- Would Hogarth and the new building have a door way between them?
- How many floors would CEISS be in the end if the beds are added?
- Question on design restrictions
- Building is too high
- Is this project to be at the former LPH facility?

CONCERNS RAISED

The following concerns were raised during the consultation on the option.

Governance and Accountability

- Option #4: Do you have enough control to do what you need to do as an organization (loss of governance control)

Quality of Care

- Place at Fort William should be a F list, Bethammi is good in comparison to other options we have seen
- Respite – Complexity of care, why did we take them on, do we have staff to support the level of service (have seen an example where respite is with the day program– just one model)

Design Factors

- What about ground stability
- New site is rather larger – is there sufficient parking? Is it possible to move parking closing to the building?
- Is there a Chapel in the new facility

- Option #4: Can you close of a section of the facility as required (e.g., Flu)?
- In the 32 section, dining room. Would the rooms be private, semi- private rooms?
- Amount of construction going on at the Centre of Excellence location?
- Does this option of building a new facility replicate any of the other facilities (e.g., Bay Crest)?
- If there was a flu, one pod could be closed off from others
- Did you have input into having more elevators for the building? (service elevators – 2 or more)
- Concerned about the size of the facility? What will the atmosphere be in the larger facility?

Travel to New Site

- Is it possible to have a shuttle service between PR Cook and the CEISS location to ease visitation?
- Fourth option – shuttle service to facilitate transportation for Seniors
- transportation to the site is important
- Concerned about location – people who live in the area want to visit people who “were” here

Continuum of Care

- If a person in PR Cook has a spouse in Bethammi, and Bethammi moves, will the spouse get priority at the new location?

Funding for Services

- If option #4 – if we are adding the beds, is funding in place?

GENERAL COMMENTS

- This will raise the profile of Long Term Care. It is very important to pay the staff as an equal partner with other facilities (e.g., Thunder Bay Regional). It is important to advocate for the staff.
- Everything under one roof – everything in one building
- Important to stay in the North End
- All possible options in the North End of the city are investigated
- Make sure the staff know their residents

PUBLIC CONSULTATION POLL RESULTS

Table 5 reflects the response of participants to the proposed option using the Public Consultation Poll. Ninety nine participants provided the following responses when asked to provide their opinion on Option 4 as a result of the consultation meeting.

Best Option	Ok Option	Bad Option	Worst Option
52	25	13	9

TABLE 5 – POLL RESULTS FOR OPTION 4

Key comments from participants on Option 4 recorded in the poll include:

- Don't want to move to Fort William
- Best move financially both for capital costs and economies of scale for ongoing operating cases. Concern re how to maintain home like atmosphere and support the type of relationships that have been developed here
- A place this large would not be "homey"
- Will service be as good as here
- Very interested in what will happen to the Bethammi building
- Too big – you're going to lose the contact between patients and staff
- Money will determine. Have concern about the hospital look – really do prefer the smaller unit but know governments do not feel that way
- Absolutely the best option for clients and staff and community
- For resident centred care education, research, staffing, economies of scale
- My only concern is about mega- size and institutional potential
- Probably best in service and price
- Not happy about Bethammi leaving north side of T. Bay
- Too big, residents comfort/ care may be lost as per the resident
- Not sure that concept of "economies of scale" fits the environment for potential residents
- Although great options CEISS is huge
- Everything on South side
- With the travel distance considered
- Most economical. These are hard times to fund raise. So other options just aren't feasible.
- If the money is available. This would be great
- Providing that height restrictions on approaching air flight path as well as ground stability (due to high underground water tables) can both be safety met. This seems best to consider

GENERAL QUESTIONS, CONCERNS AND COMMENTS

The following is listing of the questions, concerns and comments raised during the consultation process by participants that are related to two or more options or they are general in nature.

QUESTIONS

The following questions were noted during the consultation

Process for a Decision

- Where is the final decision on this building going to take place?
- Why is the wait list a concern?
- Health & safety concerns as a B Site?
- Strategic Priorities: what does “our people” mean, what does “collaboration” mean?
- How did the strategic priorities apply to this work?
- What makes it a B list?

Media Information

- The news media has more information and the decision appears to be have been made.

Site Visits

- Have you gone and seen some of the large sites?
- What are other similar sized facilities have done something of the same size?
- Did the tours look at similar size facilities?

Supporting Local Economy

- Are their local contractors working on the construction?

Criteria for Evaluation the Options

- Are the priorities in any specific order?
- How did collaboration play into the work completed up this point?

Disclosure of Information

- Will you be sharing the numbers – budget?
- What assurances do we know the money savings will go back into service?
- What assurance do you have that you will get the operating dollars to run it properly?
- Is there enough beds?
- Is there a money factor for each option

Future for Existing Facility

- What will happen to the existing Bethammi building?
- What happens to old house (Manor House)?
- Who will be the landlord?

Continuum of Care

- If husband need long term care, should I put my name on the Bethammi list?
- Can you transfer from PR Cook to Bethammi?

Planning Questions

- How do you address the co-payment option in the design?
- For our population do we have a good number of beds?
- Does any of this impact on PR Cook Apartments?
- Is December 2012 set in stone?

CROSS OPTION CONCERNS

The following concerns were raised during the consultation.

Quality of Services

- Would you put two family members in the same room?
- If you have three people in a current room and you move to a semi-private and private, how will the price change?
- We have never been separated as a staff.
- Where will I be in 2012? Will I have a choice?
- Bethammi is not privately run

Consultation Methodology Questions

- Is the poll designed to keep people happy? How will the results be used?
- It appears to be slanted to the fourth option?
- Can we vote on this?
- We need to see the impact of the options on staff before one can provide an opinion
- Wanted to see a lot more information on the options than seen today
- Not convinced that all of the options were investigated
- Why do we hear things last, from the community.
- Other ways to submit ideas (front desk, messages, phone)?

Site Visits

- Can we go and see Riverview Manor

Observations on Change

- Change can be accepted if we can see it coming

Impact on Current Facilities

- Will the swimming pool stay?
- Will they enlarge the cafeteria? – main floor

Impact on Funding and Fundraising

- How will this move impact on the donor base?
- Fundraising process for the shortfall dollars for the building option?
- Everything costs too much
- What if the Ministry does not approve any of the four options?

Staff Impact

- Is this going to impact staff – staff layoffs?
- Staffing issues

Costing for the Transition

- Do you have any costs for relocation?
- Three options – how will the money be found for the options?

General Questions

- Clarification on the “(behavioural) response beds”

COMMENTS

The following comments were raised during the consultation.

- Service is well done and wish you best of luck
- We are talking about people
- Sad to see it go
- Started in 1984, very positive and unique. Times have changed and the change will take place.
- This is a lot of information. Going to send in comments, encourage others to the same
- Any option that takes longer places an additional burden on existing facilities.

EMERGING THEMES

The consultation process provided participants the opportunity to identify their questions, concerns and advice on the four options. Reflecting on the data provided by the participants, this section of the report reviews the Consultation Poll results and emerging concerns raised by participants.

SUMMARY OF THE CONSULTATION POLL RESULTS

The Consultation Poll provided participants with an opportunity to reflect on the information provided during the consultation session and provide feedback. **Figure 1** provides a graphic summary of the results captured in **Table 6** summary table² of the consultation results for the four options.

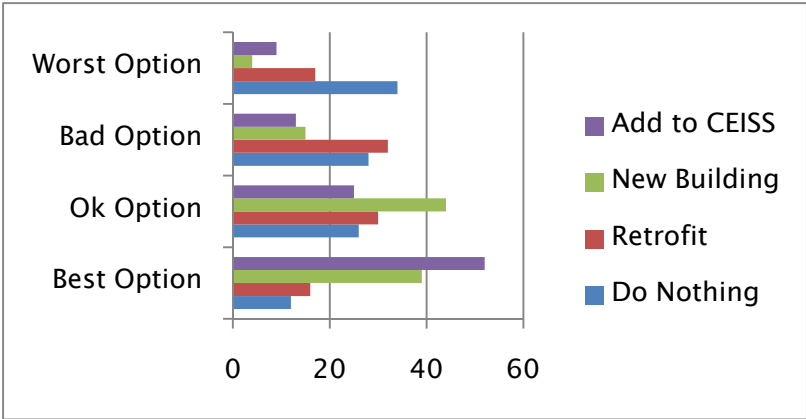


FIGURE 1– SUMMARY TABLE OF CONSULTATION POLL RESULTS

	Redevelopment Options			
	Do Nothing	Retrofit	New Building	Add to CEISS
Best Option	12	16	39	52
Ok Option	26	30	44	25
Bad Option	28	32	15	13
Worst Option	34	17	4	9

TABLE 6– SUMMARY OF THE FOUR OPTIONS FROM THE CONSULTATION POLL

² Participants had the opportunity to complete the Poll deck.
² Participants had the opportunity to complete the Poll at the end of the consultation. Some people elected not to complete the poll or did not leave it behind to be tabulated. Hence the total number of responses is less than 175.

Participants considered the addition of the Bethammi beds to the CEISS project a good option for the redevelopment project. The next best alternative was the building of a new location with the proposed number of beds. A retrofit of the existing facility was a third option while the do nothing option was considered a last option.

MOVING BEYOND THE NUMBERS

While Option 4 – Add beds to the CEISS project – received support by participants, there were three emerging concerns. The following is a summary of the concerns and responses provided by SJCG throughout the consultations:

CONCERN #1 – LOCATION OF THE FACILITY

The move of the home from the north side of the city to the south side was raised throughout the consultation. Participants expressed concern that the loss of the beds on the north side of the city would reduce the choice of homes for consumers and cause potential hardships for family members (travel and access).

Response – SJCG acknowledges that the move to the CEISS would move the current beds out of the north side of the city. However, the move would not impact on remaining services (e.g., P. R. Cook Apartments) at St. Joseph’s Heritage and would open the door to thinking through the potential opportunities for the use of the existing site. The issue of enabling families to connect to the residents in the new location was discussed, with ideas including a bus ‘shuttle’.

CONCERN #2 – “SIZE” OF THE FACILITY

The size of the CEISS was raised by participants. Concern was raised about the physical size of the building and its impact on the surrounding community. The height of the building is of concern (to one participant) due to its proximity to the airport flight path. The size of the property was identified a potential challenge given parking may be a long way from the main buildings. Concern was raised about potential infection control issues in a large building. Finally, concern was expressed about how a 448-bed home would be made ‘home-like’ for the residents.

Response– An important aspect in the design of the new CEISS is the ability to provide residents with 32-bed resident home areas, consistent with new MOHLTC design standards. The transition from the current 55-bed units will enable the organization to

meet the standards and provide the residents with a home-like experience consistent with, or better than, the current Bethammi experience. The height of the building will be reviewed by the architect from Kuch Stephenson Gibson Malo to ensure it meets the required standards. The building has the capacity to close off each 32-bed resident home area to ensure infection control issues (e.g., flu concerns) are addressed in a timely manner. Finally, it is anticipated that residents will be provided with a home-like experience given the focus of the 32-bed design concept and the expertise of staff within the CEISS facility.

CONCERN #3 - QUALITY OF CARE

Participants noted the quality of care at Bethammi is very good and would like to see this continue at the new location, given the size of the new building and potential change of staff.

Response - The quality of care will be a priority for SJCG. It was noted during the staff consultation that a transition from the current home to a new home will require a conversation to address human resources issues. The process for transition of staff will be incorporated into a plan, and the staff will be involved throughout the transition process. Concern for staff and the quality of care are key factors for success within the planning process.

MOVING BEYOND THE CONCERNS

Participants are supportive of a redevelopment of Bethammi Nursing Home. They have concerns about reduced choice of homes in the north end of the city, how to make CEISS have the same community feel as the current location, and ensuring the quality of care remains consistent or better as a result of the redevelopment. Participants want what is best for residents, recognize that dollars are limited, and want to be involved in the change process. They appreciated the opportunity to be heard on the subject, and they expressed their support for further consultation efforts by the SJCG on the redevelopment.

SUMMARY

SJCG engaged in a community consultation process in support of their redevelopment project for Bethammi Nursing Home. The consultation process engaged residents, families, volunteers, staff, tenants of the P. R. Cook Apts., health care stakeholders and the general public. People were invited through a variety of mediums including public advertisements, email invitation, word of mouth and personal phone calls. A total of 175 people attend the six sessions held over a three-day period from November 15 to 17, 2009.

Participants learned about the four options for the redevelopment of Bethammi Nursing Home. The rationale for the options were outlined, the work of the Board of Directors in evaluating the options was shared, and the preferred option to move the beds from St. Joseph's Heritage to the new CEISS site was acknowledged. Participants had an opportunity to ask questions about options, raise their concerns and then provide their opinions on the best option.

This report reviewed the material generated during the consultation.

Participants support – **Option #4 – Add Bethammi Beds to the CEISS** – as the preferred option for consideration in the redevelopment of Bethammi Nursing Home. They understand that the consultation was focused on the Bethammi beds and their addition to CEISS. There was a clear understanding that the consultation was not about the overall CEISS project, only about the additional beds. Participants were pleased to learn the redevelopment plan only impacts the Bethammi beds. Other services will continue at the St. Joseph's Heritage location (e.g., chapel, Manor House Adult Day Program, food services, P. R. Cook Apts., etc.). Lease tenants will remain. Any additional risk issues (i.e., infection control, height of the building, etc.) were answered during the consultation and noted for further follow-up work by SJCG.

SJCG will continue to provide the community with additional feedback on the project by posting the consultation PowerPoint on their website and welcoming ongoing questions from residents, families, staff and the public on the project.

In closing, SJCG would like to extend their thanks to everyone who participated in the consultation process.

APPENDICES

The following is a collection of the handouts as well as the input collected during the consultation.

APPENDIX 1 – POWER POINT PRESENTATION

Slide 1





Community Engagement Sessions

1. **Bethammi Residents/Families/Volunteers** - Nov. 15, 2009
2. **Staff** - Nov. 15, 2009
3. **Healthcare Stakeholders** - Nov. 16, 2009
4. **P. R. Cook Apartments Tenants** - Nov. 16, 2009
5. **Thunder Bay** (Italian Cultural Centre) - Nov.16, 2009, 6:00 - 9:00 p.m.
6. **Thunder Bay** (DaVinci Centre) - Nov. 17, 2009, 9:00 p.m. - 12:00 noon
7. Presentation and Questions & Answers will be posted on SJCG's website: www.sjcg.net
8. Send comments by e-mail: SJCG@tbh.net



The slide features a light yellow background with a purple border. In the top right corner is the logo for St. Joseph's Care Group, which consists of two stylized hands in purple and yellow. Below the logo is the text 'ST. JOSEPH'S CARE GROUP'. The main title 'Today's Agenda' is written in a large, purple, serif font. A horizontal line is drawn below the title. The agenda items are listed in a purple, italicized font. In the bottom left corner, there is a logo for 'Care Compassion' with the word 'Compassion' in a smaller font below it. The background of the slide is decorated with several overlapping, semi-transparent images of modern buildings.

Today's Agenda

Welcome - *Tracy Buckler, President and Chief Executive Officer, St. Joseph's Care Group*

Agenda - *Bill Staples, CPF, CTF, Facilitator*

Presentation: Local Trends in Long-Term Care - *Tracy Buckler*

Question & Answer Session - *Bill Staples*

Presentation: Detailed Options - *Paulina Chow, Vice President Long-Term Care Services, St. Joseph's Care Group*

Group Discussion: Questions & Concerns - *Bill Staples*

Comments from Participants

Closing Comments - *Bill Staples*

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Background



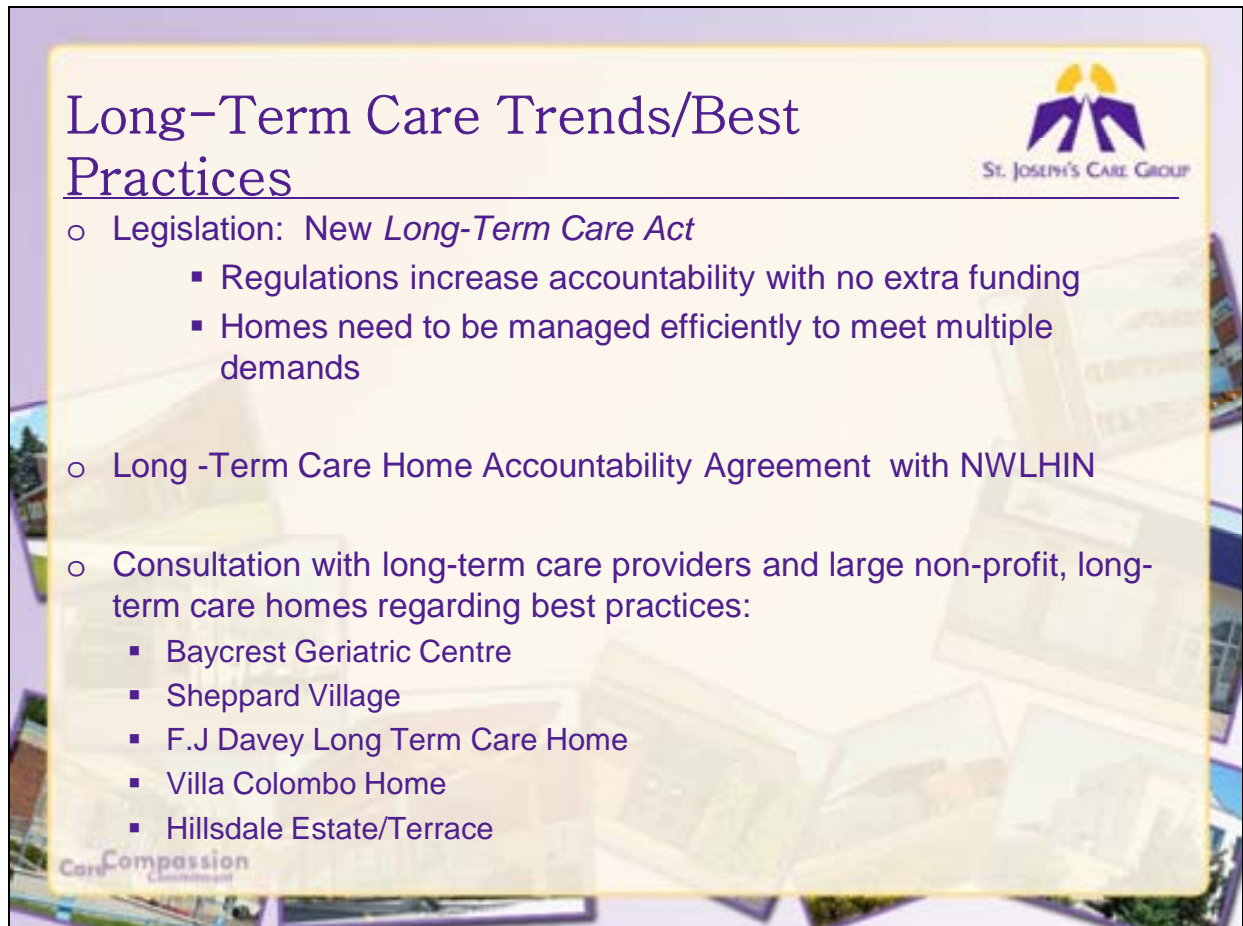
- St. Joseph's Heritage (Bethammi Nursing Home) built in 1979
- No longer meets Ministry of Health and Long Term Care design standards – now listed as a 'B' home
- In 2006, Kuch Stephenson Gibson Malo, conducted an evaluation concluding that Bethammi could only be redeveloped by:
 - building an additional floor on the Bethammi section to retrofit standards, or,
 - rebuilding with new design standards at a new location.
- KSGM recommendation: *To ensure safety, prevent prolonged disruption to daily resident activities and services, ensure cost effectiveness of the reinvestment, it was recommended that Bethammi Nursing Home be built on another site.*

Background



- SJCG Board decided to defer Bethammi redevelopment until policy was developed by MOHLTC (Capital Renewal Plan - April 2009)
- SJCG analyzed options for Bethammi and submitted a preliminary proposal to the MOHLTC to “get in the queue” (Summer 2009)
- North West LHIN will review SJCG’s Public Engagement Report before making a recommendation for support to the MOHLTC
- MOHLTC to announce successful proponents by Fall 2009 (could be December)

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Long-Term Care Trends/Best Practices

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- Legislation: New *Long-Term Care Act*
 - Regulations increase accountability with no extra funding
 - Homes need to be managed efficiently to meet multiple demands
- Long -Term Care Home Accountability Agreement with NWLHIN
- Consultation with long-term care providers and large non-profit, long-term care homes regarding best practices:
 - Baycrest Geriatric Centre
 - Sheppard Village
 - F.J Davey Long Term Care Home
 - Villa Colombo Home
 - Hillsdale Estate/Terrace

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Current Operational Challenges

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- Small home/institutional layout:
 - Impacts efficiency to provide resident care/services
 - Conveys institutional look/feel
 - Creates compliance concerns
 - Ongoing financial challenges
- Professional staff recruitment/retention concerns:
 - Competition for professional staff in other healthcare sectors
 - Aging building not attractive to new graduates or younger professionals
- Building systems gradually failing and need upgrading/major repair
- Experiencing reduction of waiting list
- Redevelopment on existing site is major challenge

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Options for Consideration

	Option	Number of Beds
1.	Delay Redevelopment to Future Date	110 beds
2.	Retrofit on Same Site	110 + 16 (<i>CEISS beds</i>) + 2 new beds = 128 beds
3.	Rebuild on New Site	110 + 16 (<i>CEISS beds</i>) + 2 new beds = 128 beds
4.	Add Bethammi Beds to CEISS	110 + 336 (<i>CEISS</i>) + 2 new beds = 448 beds



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Criteria for Option Deliberation

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Option Must:

- Fit with SJCG Strategic Priorities:
 - Resident-Centred Care
 - Our People
 - Collaboration
 - Communication & Advocacy
 - Education & Research
- Provide equity in accommodation within SJCG
- Consider economic impact:
 - Operational efficiency and effectiveness
 - Capital cost development
- Consider history and implications for the St. Joseph's Heritage Site

Care with Compassion





The slide features a light yellow background with a purple border. In the top right corner is the logo for St. Joseph's Care Group, which consists of two stylized hands in purple and blue holding a yellow sun. Below the logo is the text "St. JOSEPH'S CARE GROUP". The main title "Analysis of Options" is written in a purple serif font. Below the title is a horizontal line. The first section is "1. Delay Redevelopment to Future Date", followed by a sub-section "o Advantages" which contains three bullet points. The background of the slide is decorated with several semi-transparent architectural renderings of modern buildings. In the bottom left corner, there is a logo for "Care Compassion" with the word "Commitment" underneath it.

Analysis of Options

1. Delay Redevelopment to Future Date

- o Advantages
 - Maintains Heritage site as a continuum-of-care complex similar to the future CEISS
 - Maintains Heritage culture
 - Residents not required to move

The slide features a light yellow background with a faint architectural rendering of a building. In the top right corner, there is a logo for St. Joseph's Care Group, consisting of two stylized hands in blue and yellow. The title 'Analysis of Options' is written in a large, dark purple font. Below the title, a horizontal line separates it from the main content. The main content is a numbered list starting with '1. Delay Redevelopment to Future Date', followed by a sub-section 'o Disadvantages' and a bulleted list of seven items. The 'Care-Compassion' logo is visible in the bottom left corner of the slide area.

Analysis of Options

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1. Delay Redevelopment to Future Date

- o Disadvantages
 - Staff recruitment/retention issues
 - Inequity in accommodation between residents of Hogarth Riverview Manor, future CEISS development and Bethammi Nursing Home
 - Outdated design, environment not attractive to potential residents
 - As building structure ages, difficult to meet compliance standards
 - Cannot provide 'economies of scale' possible in larger home
 - Cannot provide innovative program development
 - Significant financial impact in future – value of redevelopment funding will shrink if project is delayed, and construction costs will rise
 - Impacts SJCG's ability to finance project at later date

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Analysis of Options

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2. Retrofit on Same Site

- Advantages
 - Maintains St. Joseph's Heritage as continuum-of-care complex
 - Provides improved environment for residents
 - Incorporate 'energy-efficient' design strategies
 - Maintains culture of home and staff working with the residents

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Analysis of Options

2. Retrofit on Same Site

- o Disadvantages
 - Exposes residents and staff to ongoing stress and safety issues
 - Unlikely that potential clients would choose to come to Bethammi during construction period (3 to 4 years) - financial implications
 - Multiple moves for residents during phased construction
 - Retrofit standards - inequity in accommodation between SJCG long-term care sites
 - Less efficient use of space - more costly to operate
 - Inequities in bedroom sizes not reflected in residents' payment rates
 - 'Institutional' look – larger home areas (37 beds vs. 32 beds)
 - Small home unable to generate economy of scale, innovation in program development and attract professional staff
 - Retrofit more costly than new construction
 - Project could not be completed by December 2012 as required

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Analysis of Options

3. Build on New Site (stand alone)

- Advantages
 - Residents would only move once
 - No ongoing stress/safety issues during construction period
 - Implements new MOHLTC design standards - small resident home areas
 - Optimizes staffing ratios
 - Provides opportunities for improved energy performance and environmental sustainability
 - Provides equitable accommodation with HRM and CEISS
 - Maintains culture of home
 - New construction less costly than retrofit

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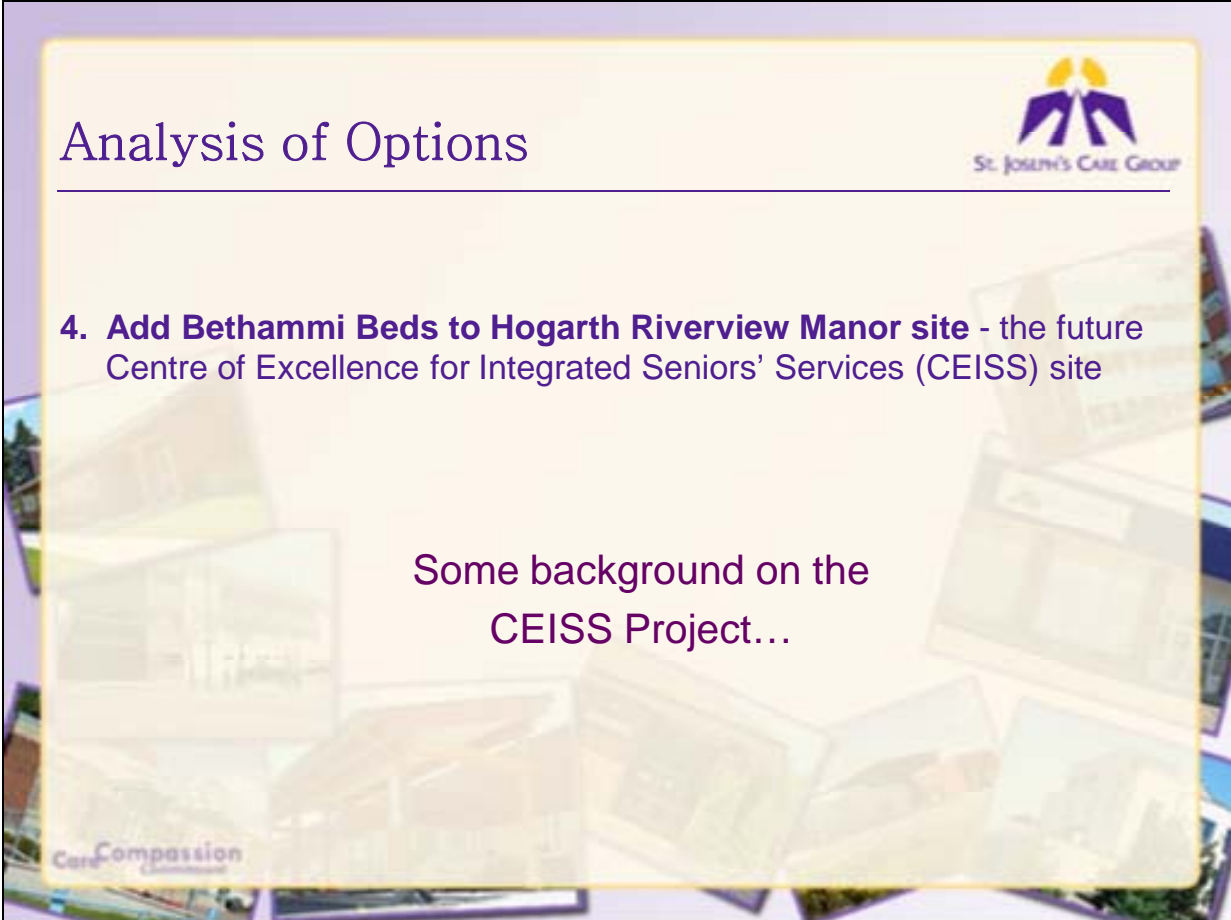
Analysis of Options

3. Build on New Site (stand alone)

- Disadvantages
 - Requires residents to vacate familiar environment/neighborhood
 - Disrupts Heritage site continuum of care
 - Professional staff recruitment/retention issues continue
 - Heritage Support Services staff will be divided between sites
 - A stand-alone project does not provide continuum of care
 - Availability of land and potentially high land and development costs
 - Financial pressures and reduced cost effectiveness of operating continue
 - Cannot meet December 2012 deadline

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Analysis of Options

4. Add Bethammi Beds to Hogarth Riverview Manor site - the future Centre of Excellence for Integrated Seniors' Services (CEISS) site

Some background on the CEISS Project...

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An Opportunity Arises


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- 300 municipal long-term care beds returned to the province in January of 2009, creating an opportunity for innovation
- A Centre of Excellence, building upon relevant regional studies, best practice literature and community engagement, was proposed, presenting a real opportunity for the community and region



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COMMUNITY

The Vision: A Centre of Excellence for Integrated Seniors' Services

- 336 Long-Term Care Beds
 - Includes 64 regional beds for residents with responsive behaviours
- 132 Supportive Housing Units
 - Self-contained apartments
 - Support service packages purchased and available 24/7
- 150 additional Community Support Clients

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Centre of Excellence: A Shared Vision



Many possibilities were envisioned by all consulted:

- An integrated system of services
- Opportunities to address longstanding Alternate Level of Care (ALC) issues
- Opportunities for education, research and best practice
- Opportunities to build services around seniors' needs
- Economic spin-offs to the community
- Opportunities to address behavioural issues in long-term care

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Centre of Excellence: Economic Benefits for Thunder Bay



- Project cost: \$81.9 million - provides meaningful planning, development & construction activity over a 3-year period
- Maintains long-term care beds in Thunder Bay to meet current and future needs of aging population
- Improves quality of life for seniors and their families/caregivers
- Provide cost savings to maintain our seniors in most appropriate setting

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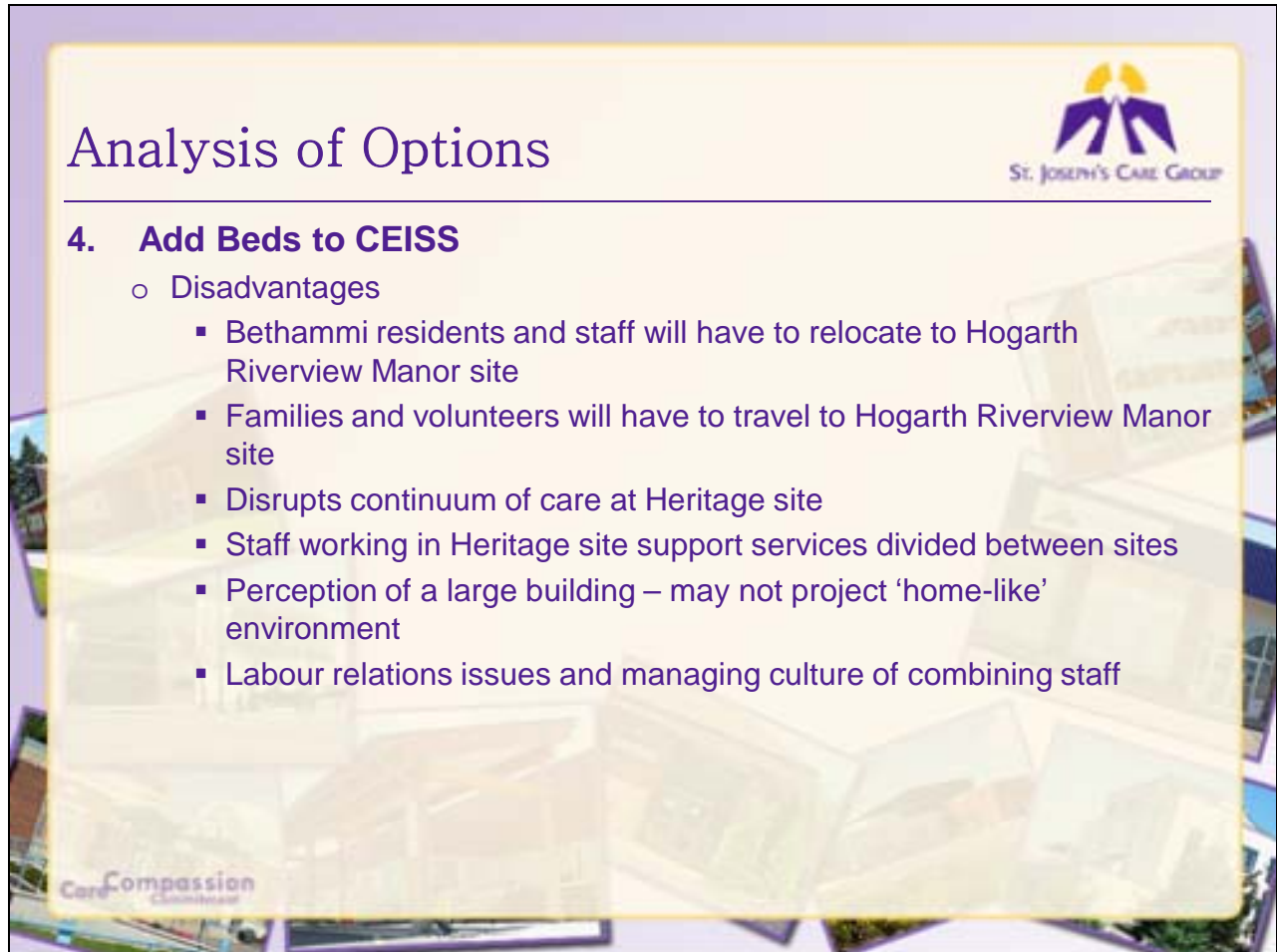
Analysis of Options

4. Add Bethammi Beds to CEISS

- Advantages
 - Supports 'aging in place' concept; a continuum of care
 - Achieves staff efficiencies and economies of scale
 - Provides accommodation equity for SJCG LTC residents
 - Meets new design standards; promotes small resident home areas (32 beds)
 - Will attract researchers, physicians, educators and staff
 - Improves wait list issue
 - Capital cost is lowest compared to other options
 - Can be easily added to CEISS and completed by MOHLTC deadline of December 2012

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Analysis of Options

4. Add Beds to CEISS

- Disadvantages
 - Bethammi residents and staff will have to relocate to Hogarth Riverview Manor site
 - Families and volunteers will have to travel to Hogarth Riverview Manor site
 - Disrupts continuum of care at Heritage site
 - Staff working in Heritage site support services divided between sites
 - Perception of a large building – may not project ‘home-like’ environment
 - Labour relations issues and managing culture of combining staff

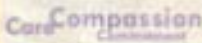


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Construction Cost Comparisons

Assumptions:
 KSGM report with pro-rated estimation
 CEISS Project cost per gross square feet (gsf @ \$275.19)

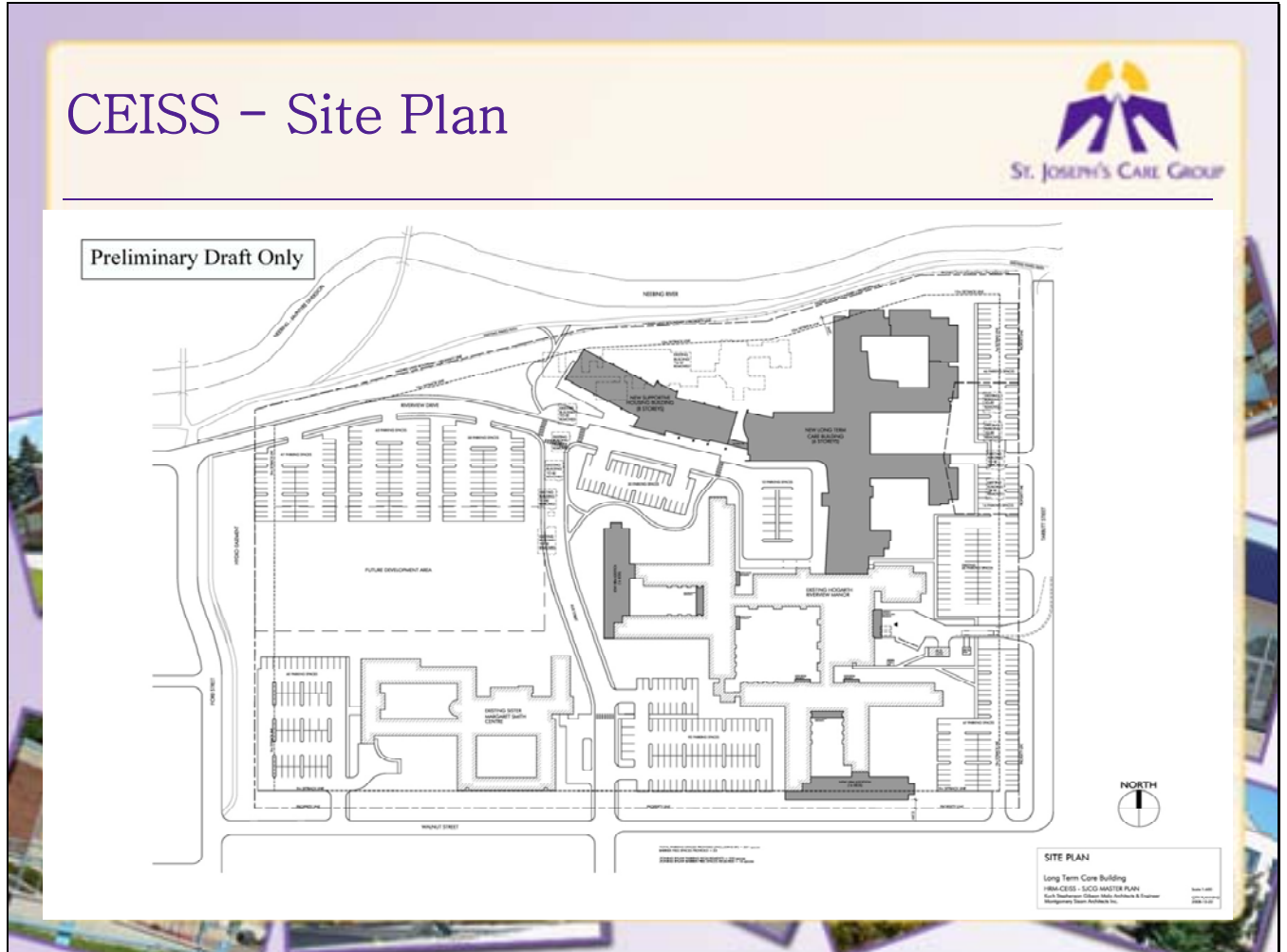
OPTION	Estimated SQ FT	Project Cost	MOHLTC Capital Renewal Fund	Requires SJCG Contribution
1. Delay Redevelopment to Future Date	N/A	N/A	N/A	N/A
2. Retrofit on Same Site	93,592M	\$26.7M	\$8.6M	\$18.1M
3. Build on a New Site	85,760M	\$24.9M	\$8.6M	\$16.3M
4. Add Beds to CEISS Project	85,760M	\$18.0M	\$8.6M	\$9.4M



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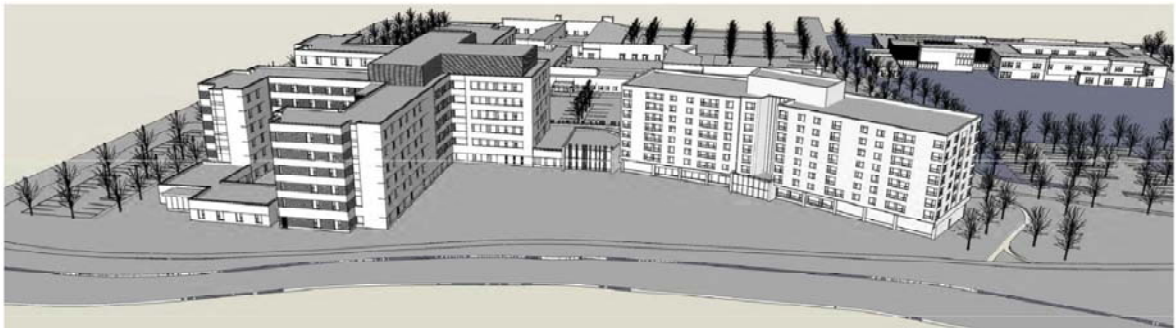
Criteria:	OPTION 1 Delay	OPTION 2 Retrofit	OPTION 3 New Site	OPTION 4 + CEISS
Alignment with SJCG values/strategic directions:				
Meets MOHLTC new design standards			•	•
Limits resident disruption and exposure to safety	•		•	•
Supports 'Aging in Place' Strategy, continuum of care concept	•	•		•
Optimal size of resident home areas (32 beds), create home-like environment			•	•
Opportunity to attract research initiative and becoming a Senior Geriatric Learning Centre for healthcare professionals in NW LHIN				•
Provides opportunities for innovation and enhanced care delivery				•
Equity in accommodation within SJCG long-term care homes programs:				
Provides accommodation equity across SJCG LTC beds			•	•
Financial viability in terms of capital development and operations:				
Completion possible by December 2012 deadline				•
Economies of scale – construction & operating				•
Provides flexibility in staff scheduling and deployment within the home				•
Potential to improve staff recruitment/retention opportunities			•	•
History and cultural implications to the Heritage Site:				
Maintains Heritage culture	•	•	•	



CEISS – Architect’s Rendering



Preliminary Draft Only



North View

PRIMA-CISS - SACU MASTER PLAN
Final Redesign - 3D Model, Schedule & Program
Montgomery Design Architects Inc. 2017/07/27
SACU/17/07

Options for Redevelopment of
Bethammi Nursing Home

Send comments by e-mail: SJCG@tbh.net

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Preserving the Viability of St. Joseph's Heritage

St. JOSEPH'S CARE GROUP

Potential options for vacated Bethammi space:

- Relocate Manor House Adult Day Program
- Convert space to medium and/or high support housing
- Develop residential hospice
- Relocate Diabetes Health Thunder Bay
- Expand Chronic Pain Management Program and coordinate Regional Pain Network
- Leased space available for other healthcare agencies

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APPENDIX 2 –PUBLIC CONSULTATION WORKSHEET

Proposed Redevelopment of Bethammi Nursing Home under Phase 1 of the Long Term Care Capital Renewal Strategy

Public Consultation Worksheet

<p>Which specific points require clarification? What questions would you like to ask?</p>
<p>What concerns do you have about the redevelopment?</p>
<p>What comments would you like to make?</p>

Where can we reach you if we need to clarify your comment or concern? (Optional)

Name and contact information:

APPENDIX 3 – PUBLIC CONSULTATION POLL

Proposed Redevelopment of Bethammi Nursing Home under Phase 1 of the Long Term Care Capital Renewal Strategy

Public Consultation Poll

Approximately how many times per year do you visit the following sites?

Bethammi Nursing Home Site: _____

Hogarth Riverview Manor Site: _____

Please prioritize the options. Circle your opinion in the following table:

		Please Circle	Comment
1.	Delay Redevelopment to Future Date	Best option OK option Bad option Worst option	
2.	Retrofit on Same Site	Best option OK option Bad option Worst option	
3.	Rebuild on a New Site	Best option OK option Bad option Worst option	
4.	Add the Beds to Center of Excellence for Integrated Senior's Services	Best option OK option Bad option Worst option	

Can you think of another option?

Name and contact information: (Optional)

APPENDIX 4 – CONSULTATION PROMOTION MATERIALS

The following is a copy of the various types of communication tools used by St. Joseph's Care Group to promote the consultation event:

1. Invitations to Bethammi Residents, Families and Volunteers
2. Email message from President & CEO and invitations/posters to Staff of St. Joseph's Heritage
3. Invitations to Healthcare Stakeholders
4. Posters for Tenants of the P. R. Cook Apartments
5. Advertisement in The Chronicle Journal on November 12, 14 and 16, 2009
6. Media invitation for public sessions



Bethammi Residents, Families & Volunteers
are invited to attend a
Community Engagement Session

Sunday, November 15th
1 - 3 p.m. in the Georgian Room
St. Joseph's Heritage
63 Carrie Street

These sessions are being held to discuss options for
the redevelopment of Bethammi Nursing Home,
including the opportunity for possible relocation to the
Hogarth Riverview Manor site.

Everyone is welcome.

Tracy Buckler ,
President & Chief Executive Officer
St. Joseph's Care Group

Paulina Chow,
Vice President, Long -Term Care Services
St. Joseph's Care Group

The following is a copy of the e-mail sent to all staff.

From Tracy Buckler, President & CEO:

In our ongoing efforts to keep you informed, I want to let you know that we will be holding a number of internal and external consultation sessions this November to discuss options for the redevelopment of Bethammi Nursing Home.

Given the fact that Bethammi is 30 years old, it is imperative that we plan appropriately now to ensure the future well-being of our residents.

Residents, families, staff, volunteers, our Board of Directors, health care partners and the community-at-large will be given an opportunity to engage in this dialogue.

Bill Staples of ICA Associates and Jerry Ethan Mings of The Desk Consulting Group will facilitate all sessions. The consultant's report will be presented to the North West LHIN on November 20, 2009.

We recognize the significance of any potential changes to the residents, their families and staff of Bethammi Nursing Home, therefore we will be holding separate sessions specifically for these groups.

Any SJCG staff is welcome to attend the public engagement sessions or the health care professionals session. Public ads will be in the newspaper.

We are interested to hear all views and opinions regarding this important topic.



St. JOSEPH'S CARE GROUP

All Heritage Staff
are invited to attend a
Community Engagement Session

Sunday, November 15th
3:30 - 5 p.m. in the Georgian Room

These sessions are being held to discuss options for the redevelopment of Bethammi Nursing Home, including the opportunity for possible relocation to the Hogarth Riverview Manor site.

Everyone is welcome.

Tracy Buckler ,
President & Chief Executive Officer
St. Joseph's Care Group

Paulina Chow,
Vice President, Long -Term Care Services
St. Joseph's Care Group



Healthcare Professionals, Educators, Researchers & Agencies
are invited to attend a
Community Engagement Session

Monday, November 16th

9 a.m. – 12 noon in the Georgian Room
St. Joseph's Heritage
63 Carrie Street

These sessions are being held to discuss options for
the redevelopment of Bethammi Nursing Home,
including the opportunity for possible relocation to the
Hogarth Riverview Manor site.

Everyone is welcome.

Tracy Buckler
President & Chief Executive Officer
St. Joseph's Care Group

Paulina Chow
Vice President, Long-Term Care Services
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Everyone is welcome.

Tracy Buckler
President & Chief Executive Officer
St. Joseph's Care Group

Paulina Chow
Vice President, Long-Term Care Services
St. Joseph's Care Group



**Community Engagement Sessions
Redevelopment of Bethammi Nursing Home**

TENANTS, P. R. COOK APTS.

Monday, November 16th

1:30 – 3:00 p.m.

PUBLIC

Monday, November 16th

6 p.m. - 9 p.m. at the Italian Cultural Centre

132 Algoma Street South

OR

Tuesday, November 17th

9 a.m. - 12 noon at the DaVinci Centre

340 Waterloo Street South

These sessions are being held to discuss options for the redevelopment of Bethammi Nursing Home, including the opportunity for possible relocation to the Hogarth Riverview Manor site.

Everyone is welcome.

Tracy Buckler,
President & Chief Executive Officer
St. Joseph's Care Group

Paulina Chow,
Vice President, Long -Term Care Services
St. Joseph's Care Group



ST. JOSEPH'S CARE GROUP

***The public is invited
to attend a Community
Engagement Session***

Monday, November 16th
6 p.m. - 9 p.m. at the
Italian Cultural Centre
132 Algoma Street South

OR

Tuesday, November 17th
9 a.m. - 12 noon at
the DaVinci Centre
340 Waterloo Street South

These sessions are being held to discuss options for the redevelopment of Bethammi Nursing Home, including the opportunity for possible relocation to the Hogarth Riverview Manor site.

Everyone is welcome.

Tracy Buckler,
President & Chief Executive Officer
St. Joseph's Care Group

Paulina Chow,
Vice President, Long-Term Care Services
St. Joseph's Care Group

MEDIA *Invitation*

***The media is invited to attend a
Community Engagement Session***

**MONDAY, NOVEMBER 16, 2009
6 p.m. - 9 p.m.
at the Italian Cultural Centre
132 Algoma Street South**

OR

**TUESDAY, NOVEMBER 17, 2009
9 a.m. - 12 noon
at the DaVinci Centre
340 Waterloo Street South**

**These sessions are being held to discuss options for the redevelopment of
Bethammi Nursing Home, including the opportunity for possible relocation to
the Hogarth Riverview Manor site.**

Tracy Buckler, President & Chief Executive Officer, St. Joseph's Care Group,
will be available for interviews following the sessions.

For more information, contact:

Sharron Owen, Manager
Communications
St. Joseph's Care Group
(807) 768-4440



*St. Joseph's Hospital • St. Joseph's Heritage • Lakehead Psychiatric Hospital • Hogarth Riverview Manor • Balmoral Centre
St. Joseph's Health Centre • Behavioural Sciences Centre • Diabetes Health Thunder Bay • Sister Margaret Smith Centre*

*St. Joseph's Care Group is accredited with Accreditation Canada and provides services in complex care, rehabilitation, mental health
and addictions, long-term care and supportive housing. Community programs are provided at Frank Murphy Community Centre.*

*St. Joseph's Care Group has approximately 1700 employees and over 400 volunteers. With an annual operating budget of \$125M,
SJCG is the fifth largest employer in Thunder Bay. To learn more about SJCG, visit the web site at www.sjcg.net*

APPENDIX 5– PUBLIC CONSULTATION: QUESTIONS, COMMENTS AND CONCERNS

The following is a listing of the questions, comments and concerns provided by participants during the consultation dialogue sessions. The points were projected onto a screen in the room, and staff provided answers.

The information is organized by the six sessions.

CONSULTATION A – RESIDENTS, FAMILY AND VOLUNTEERS

Questions:

- Have you gone to see some of larger long-term care sites?
- Are the priorities in any specific order?
- If you build on the third floor, how would you work around the noise?
- Will there be enough staff in the bigger facility – will the number of staff meet MOHLTC standards?
- What accommodation is being made for people who want a home in the north end of the city?
- If we move to a new place, what would happen to this place and the people?
- Option 3 –
- Is there opportunity for input into Option 2 and Option 3?
- Would individuals have the opportunity to stay with SJCG?
- With Options 3 & 4, will the organization have a new name?
- What will happen to the buildings?

Concerns

- Everything costs too much
- Clarification on the “response beds”
- Would you put two family members in the same room?
- New site is rather larger – is there sufficient parking? Is it possible to move parking close to the building?
- If Option #4 – if we are adding the beds, is funding in place?
- Amount of construction going on at the Centre of Excellence location?

- In the 32(-bed resident home area) section dining room. Would the rooms be private, semi-private rooms?
- If you have three people in a current room and you move to a semi- private and private, how will the price change?
- Option 2 and Option 3 have timelines that cannot be met? What are the consequences if you select these options?
- Does this option of building a new facility replicate any of the other facilities (e.g., Baycrest)?
- Option 4: Do you have enough control to do what you need to do as an organization (loss of governance control)
- Option 4: Can you close of a section of the facility as required (e.g., flu)?
- Current location – building on the parking lot?
- Why did you not purchase Pine Street School?
- Can we go and see Hogarth Riverview Manor
- Was demolition an option for site?
- Other ways to submit ideas (front desk, messages, phone)?

STAFF SESSION

Questions:

- What will happen to the existing site?
- The news media has more information and the decision appears to be have been made.
- Where is the final decision on this building going to take place?
- Are there going to be local contractors working on the construction?
- Are we losing our name and reputation with a move under Option 4?
- What assurance do you have that you will get the operating dollars to run it properly?
- Will you be sharing the numbers – budget?
- What assurances do we have that the money savings will go back into service?
- What are the staff implications of moving people on the existing staffing levels at P. R. Cook Apts. – what is the impact on residents?
- Union mergers – Are there going to be multiple union groups in the same facility
- Seniority blending
- Would our bargaining unit remain the same?
- Would there be layoffs?
- Full time to part time – bumping
- Keeping the union
- Guaranteeing our jobs
- Potential sites – other sites in north end of the city (old hospital, LPH grounds)
- Respite – Are we going to have enough staff to deal with respite care?

- Are there different pods of clients, are they mixed, how will this work?
- Is the culture different between the two locations?

Concerns

- It appears to be slanted to the fourth option.
- It would be helpful to focus on rebuilding on this side of town – north side of town
- How will this move impact on the donor base?
- Respite – complexity of care, why did we take them on, do we have staff to support the level of service (have seen an example where respite is with a day program– just one model).
- We need to see the impact of the options on staff before one can provide an opinion
- We have never been separated as a staff
- Change can be accepted if we can see it coming.
- Wanted to see a lot more information on the options than seen today.
- We do we hear things last, from the community.
- Is the poll designed to keep people happy? How will the results be used?

MONDAY MORNING – HEALTH CARE PROFESSIONALS

Concerns

- Concerns raised by families on where the location will be.
- How many floors would CEISS be in the end if the beds are added?
- Does any of this impact on P. R. Cook Apts.?
- Additional information on the benefits for staff recruitment of the new proposal?
- How do you address the co-payment options in the design?
- Can you transfer from P. R. Cook Apts. to Bethammi?
- Competition for residents? May increase the difficulty for other facilities.
- It is a challenge to maintain a home-like feel/environment
- Benefit – development of specialized beds: brain-injured, developmentally-challenged

Comments

- This will raise the profile of long-term care. It is very important to pay the staff as an equal partner with other facilities (e.g., Thunder Bay Regional). It is important to advocate for the staff.
- Any option that takes longer places an additional burden on existing facilities.

Wrap Up

- Residential Hospice – ensure it is home-like (potential option for current Bethammi space).
- Long-term care is a hotbed for research. CEISS will help promote more partnership.

MONDAY AFTERNOON SESSION – TENANTS OF P. R. COOK APTS.

Questions:

- If Option 3 or 4, what would happen to the existing location?
- Would existing facilities remain?
- Would the cafeteria remain for use of the tenants?
- What is the difference between KSMG and CEISS?
- Would Hogarth and the new building have a doorway between them?
- If husband need long-term care, should I put my name on the Bethammi list?
- What effect will this have on the P. R. Cook tenants?

Concerns:

- Will the swimming pool stay?
- Will they enlarge the cafeteria – main floor?
- Concerned about location – people who live in the area want to visit people who “were” here
- Where will I be in 2012? Will I have a choice?
- Can we vote on this?
- Is this going to impact staff – layoffs?
- Is it possible to have a shuttle service between St. Joseph’s Heritage and the CEISS location to ease visitation?
- If a person in P. R. Cook has a spouse in Bethammi, and Bethammi moves, will the spouse get priority at the new location?
- If we move out of this location, won’t we still have retrofit, mess and money?

MONDAY EVENING PUBLIC CONSULTATION

Questions:

- What is the point of delaying?
- What makes it (Bethammi) a B list home?
- Is there a money factor for each option?

- Have you considered other sites e.g., LPH grounds
- What happens to old house (Manor House)?
- Option 4 – are different than other beds, would they be Bethammi Beds?
- Making all long– term care beds in one end of the city.
- Is the price going up for residents?
- Are the 366 beds owned by the City?
- In any of the options, are respite beds being considered?
- Question on design restrictions.
- Why is the wait list a concern?
- Health safety concerns as a B Site?
- Is there enough beds?
- Is December 2012 set in stone?
- Who will be the landlord?
- Did the tours look at similar size facilities?
- Would nursing care change?

Concerns:

- Concerned about the size of the facility – what will the atmosphere be in the larger facility?
- Staffing issues
- Our presence in the north end of the city
- Fourth option – shuttle service to facilitate transportation for seniors
- If there was a flu, one pod could be closed off from others
- What if the Ministry does not approve any of the four options?
- Three options – how will the money be found for the options?
- Do you have any costs for relocation?
- Is there a chapel in the new facility?
- Not convinced that all of the options were investigated
- Place in Fort William (interim beds) should be a F list, Bethammi is good in comparison to other options we have seen
- Transportation to the site is important
- Bethammi is not privately run
- Option 3 – build in current area

Comments:

- All possible options in the north end of the city are investigated

- We are talking about people
- Important to stay in the north end
- Sad to see it go
- Everything under one roof – everything in one building
- Started in 1984, very positive and unique. Times have changed and the change will take place.
- This is a lot of information. Going to send in comments, encourage others to the same
- Make sure the staff know their residents

TUESDAY MORNING CONSULTATION

Questions:

- CEISS: what is the size of the new CEISS?
- Strategic Priorities: what does “our people” mean, what does collaboration mean?
- How did collaboration play into the work completed up this point?
- How did the strategic priorities apply to this work?
- What will happen to the existing Bethammi building?
- When do you expect the CEISS to be completed?
- Will adding the additional beds delay the CEISS completion date?
- What other similar-sized facilities have done something of the same size?
- Efficiencies – does it go back into front-line care?
- Total number of beds we may end up with as a result of the project
- For our population do we have a good number of beds?
- 64 behaviour beds: What is happening to the LPH site/beds in relation to CEISS?
- Geriatric services – how are they related in planning beds?
- Geography – north and south side of the city and where the facility is located
- Is this project to be at the former LPH facility?
- Is there a restriction due to the flight path at airport?
- Building is too high

Concerns:

- What about ground stability
- What options did other organizations talk about if they could build from scratch?
- Did you have input into having more elevators for the building? (service elevators – 2 or more)

- Fundraising process for the shortfall dollars for the building option?

Comments:

- Service is well done and wish you best of luck
- All possible options in the north end of the city are investigated
- We are talking about people
- Important to stay in the north end
- Sad to see it go
- Everything under one roof – everything in one building
- Started in 1984, very positive and unique. Times have changed and the change will take place.
- This is a lot of information. Going to send in comments, encourage others to the same
- Make sure the staff know their residents
- This will raise the profile of long-term care. It is very important to pay the staff as an equal partner with other facilities (e.g., Thunder Bay Regional). It is important to advocate for the staff.
- Any option that takes longer places an additional burden on existing facilities.

APPENDIX 6 – PUBLIC CONSULTATION WORKSHEET RESULTS

The following is listing of the comments provided by the consultation participants written on their consultation worksheets.

EMERGING QUESTIONS

- Resident-centred care priority in light of criteria of deliberation
- Option 4 – size – very challenging to retain home-like environment and address staffing/resident concerns with such a large facility
- If Bethammi here closes – what will happen to this building? Will new beds for the in line for subsidy?
- Your proposal to the Capital Renewal Plan – did it involve a monetary figure or is that determined at a later date? Who decides what amount of money you will get? Was it all 4 options that were presented?
- If you build on top of the 3rd floor, how would you work around the patients?
- # of floors with 2 extra? 6 floors
- Future of P. R. Cook Apts. – status quo
- What will you do with the Bethammi site?
- Are there any dates set for action to proceed if decision 3 or 4 considered as most favourable and ability to fund?
- Support system to apartments – Bethammi cannot fill the pavilion
- Will our community be fundraising for this project? Is 2012 deadline set in stone? If you decide on an option that will take too long to retrofit or build, would the ministry extend the deadline? Sometime haste makes waste.
- Beds. Is it enough?
- D listed homes plus interim long-term care on James Street South.
- Is there any potential for SJCG in the former psych hospital (LPH) grounds?
- Design standards?
- Apt /Bethammi (couples)
- 336 beds?
- What’s wrong with institutional layout?
- Waiting list going down?
- Hospital bed block?
- 3 people to some rooms (Bethammi)
- Alzheimer res. acc.
- Have you investigated all possible sites in north end? (inclination to Option 3)
- Were there any H & S (health & safety) concerns with Bethammi as it stands now?

CONCERNS

- Taking apart existing resident-centred care is my main concern. Does existing service like therapy and programs for patients place.
- Although Option 4 make the most sense financially both in terms of a new construction and economies of scale in terms of operations, really concerned about how to preserve personal touches and relationships that develop in smaller sites
- Would like to know opportunities for input on design if Option 2 or 4 chosen. Would be very important to have opportunity to recreate the vision at a new site
- A monopoly created – soon seniors will have no choice. Such a large Hogarth – where would the cozy home setting be? Bigger is not always better.
- I have experienced a nursing home move which lead to the death of some seniors? Time line 2 – 3 – 4 years, if you can't meet them what is the consequence?
- Staffing – will this guaranteed bigger facility that meets or exceeds MOH standards? How long is the timeline for action/redevelopment? Port Arthur site? Is there already 3 Homes in Fort William and a fourth one to be build beside Hogarth?
- A new building to replace Grandview and Dawson – enough funds to add to Hogarth? Enough funds to do all of this?
- Too large for BRO (?), Parking at CEISS, Cost to residents
- Size – With 32-bed pods, complex huge. What about spouses who have relocated to P. R. Cook or new housing to be with loved ones? How will they be accommodated?
- Congestion – one location
- Why feedback? Very important
- Do you put 2 family members in one room?
- Concerns
- If redevelop above HRM – will there not be noise disruption?
- What if any are the disadvantages of a large complex (i.e., 448 beds) on six stories? Disruptions to HRM resident during construction.
- If it delays the new build on the CEISS site, it will significantly affect the closure of Dawson and Grandview Lodge. This is due to the increase costs for day to day operation such as staffing, aging building. Most of all residence-centred care/
- Increase competition for recruiting professional staff. Increase competition re wait/ residents.
- Thunder Bay has north/south thinking, would decrease north side LTCH options. Challenge to ensure a home-like living environment in a large building – opportunity to create a community for residents.
- Changing the location. People living in this area might have difficulty going further away to visit their loved ones

- Will there be shuttle services for visiting facilities on the other side of town?
- I have a no concerns for myself at breaking moment of these discussions but have concerns for other residents and their families. Proximity of cafeteria, swimming, store and hairdressers are very important.
- What happens to assisted living?
- More information on how this affects P.R. Apts. Could we have a more positive outlook?
- Will this nursing home be institutional. Support system our care system.
- People left out of programs when they don't speak English.
- Finished facility will be very large! 410 beds. 5 of 110 Bethammi beds are respite beds. Will they move, too?
- The potential size of the facility. Will it lose the home-like feeling and become more institutional and impersonal? Is this new concept becoming too big?
- Is the building going to be so large that some residents may be lost and lonely? Distance for family members from Current River and Port Arthur side to travel to the new building?
- We would be left with only two nursing homes in the north ward. Caregivers would prefer to keep their loved one close to home. It will pose a problem. It takes one hour by bus from the north side to Lillie street. Seniors find this too long a drive. To visit they will spend two hours on the bus two ways.
- The lack of LTC beds in Thunder Bay north area. Many present care givers are old and will not be able to continue to care for partner in new location and Hogarth Riverview Manor.
- Will standard of care be better or worse in this larger facility?
- If all present facilities staff are united, what training before the move will be made? Usually standards fall, e.g. Hogarth/STJ Hospital/ SJ Heritage years ago.
- How will people attending Day Program attend when in respite. Use Handi Transit? May move to Bethammi.
- Did you have the cost for relocation? Who pays? Construction Move-in date? Cost overruns.
- Payback of capital – affect fundraising.
- Funding.
- Food preparation for P. R. Cook. Will it be cost efficient to keep the kitchen open?
- Is the building going to be so large that some residents may be lost and lonely?
- Distance for family members from Current River, Port Arthur side, to travel to the new building??
- The potential size of facility – will it lose its ‘homelike’ feeling and become more institutional and impersonal? Is the new concept becoming too big?
- Finished facility will be very large! 410 beds.
- 5 of 110 Bethammi are respite beds – will move with them?

- P. R. Cook Apts./Bethammi
- Partners can visit
- Would like exterior design that looks less like a stack of boxes
- Ground stability in areas where the water table lies 5 ft. under the surface, due to proximity to the Neebing River, is a concern that could become costly. The History of Fort William is that of a post ice-age giant river bed that originally encompassed Fort William, of which remains now the Kam, Neebing and McIntyre Rivers and connecting water tables as low as 5 ft. below the surface in some places. If the city did ground test a few years ago and the previous council restricted the replacement Grandview Lodge site to 3 stories for cost – strengths support feasibilities, then that lesson should not be ignored, nor taken lightly.

COMMENTS

- My recommendation is to add to the 3rd floor and retrofit existing floors. I am always been support of SJCG and always impressed by the fundraising and financial prudence with building and operations. Herman VanDuyn
- Would SJCG options for LTC be on this side of town? Impact for supported living for people living in P. R. Cook Apts. who need more support? Would individual residents have a choice about staying with SJCG or transferring to another facility closer to family?
- The decision has been made already. All will go to Hogarth -- why all the discussion? SJCG wants to appear democratic but in reality they are the only authority.
- I worked in Pioneer Ridge brand new had to repair outer walls within a couple of years.
- Construction 3 – 4 years retrofit – 32 beds per floor new building – 2 years
- Option #4 most cost effective and savings could be used to hire / recruit more staff.
- Accessibility for north side families to visit. More flu epidemic problem in large facility.
- Is CEISS growing so large that administration is getting too far from the people we care for?
- Maybe looking for new site in Port Arthur
- LTC is a hotbed for research and learning. Bethammi with CEISS sounds like an opportunity to bring more quality care to this sector for the population.
- Pay RN staff competitive wages with ONA
- Staffing – social worker important
- Unfortunately no matter how we try not to disrupt the residents of Bethammi, it will be inevitable. I think if the change and experience can be of a positive nature, all will be well.
- Apply the same standards to palliative care unit at hospital
- With the development of this project at the CEISS, it will assist the LTC system in T.B become one equal partner in the continuum and thus improve the image of the LTC

system also we must continue to advocate with the Health care sector for an equality of wages much like the Regional Health Authorities do in the other provinces.

- This would be an opportunity to plan for /design an area specifically to house younger individuals with long-term needs. Currently these people live in various homes throughout city and do not assimilate well with the other elderly residents. I think overall it's a great opportunity to increase/ raise profile of LTC sector
- Should I still put my name on the Bethammi Nursling Home (CCAC)
- In regards to staffing. Why is it that you hire far more part time staff instead of full time? Have nurses and nursing students in my family who say it is very hard to get full time work. Some of them work in a Nursing home PT and St. Elizabeth or VON PT to get a full pay cheque. I feel this is unfair to them and the residents.
- #4 – relocate to CEISS – group people by language and culture. Hire caregivers who speak language. Watch movies in languages. #4 is fantastic
- Option 4 is the obvious best.
- In these economic times, it seems responsible to go with the least expensive, option 4. Also the property is there for developing (Hogarth) so no need to look for another site.
- What about a value engineering study?
- Having 448 bed nursing home could look like we are warehousing people. Smaller homes are better. Why not make 2 home and divide the 448 beds between them.
- Feel it is important to have the new “tenants” in the “space” left when Bethammi moves – to provide support also for tenants in P. R. Cook for example another health care services.
- Don't forget residents are real people. Level of care must be good.
- Training of staff important before opening.
- Recruiting new staff = most new grads would prefer acute over long term care because of inequity of wages not because of building. Professional staff workload heavy in LTC.
- Concern is location and thought the suggestion of a shuttle service should be considered. The staff works extremely hard to give excellent care. I truly feel they should be compensated as staff on complex continuing care.
- I would like to address salary re “staff RPNS RNs, etc.” it should be at par with St. Joe's chronic care staff. Also in order to attract new staff. This is an important factor.
- Good start. Need more detail, more time. Need to know.
- What about a value engineering study?
- In these economic times, it seems reasonable to go with the least expensive option (Option 4). Also, the property is there for developing (Hogarth) so no need to look for another site
- Option 4 is the obvious best
- If I were not able to remain in my home, I would rather be in 3-bed room than be alone

- The neighbourhood is expecting a 3- story facility to be built in the proposed area. To sneak a 7 story proposal into the mix without proper notification to and consultation with the neighbourhood and public could be detrimental and delaying to your project time line. There will be height safety concerns of 7 stories versus the air flight path, mid-landing approach, plus the risk for accidents to both passengers and residents below. What considerations will be made for the increased hydro, water, sewage disposal demands on the area and the existing neighbours? Perhaps a twin 3 story connecting facilities would be more viable compromise.

APPENDIX 7 – PUBLIC CONSULTATION POLL RESULTS

OPTION 1 – DELAY

Best Option	Ok Option	Bad Option	Worst Option
12	26	28	34

Comments:

- I want to stay here. I don't see anything wrong with this building
- Will cause move
- This building is better built. Any new building will not be built as good – the New Hospital
- Should do it when it's possible
- This building is built way better than any builds build at this time (i.e. Mess of the Hospital Construction)
- Need to move to a new improved facility
- A decision needs to be made
- Home will deteriorate and standards will not be met
- Need more beds for long term care
- Perhaps the Ministry will be prepared to adjust their criteria
- Must take into consideration comments made by those from north side
- Only delaying the inevitable, although a delay may be necessary if too much controversy
- Get more information re other phases
- In future costs will increase
- I'd like to keep the "a Home for all Seasons" concept
- Convenient Travel
- Noise and dust (dirt) is very disturbing to residents. If any construction is done with residents close by, the residents are very unhappy
- Costs will increase
- Will only cost more in future
- Provincial finances are in bad shape
- If facility is needed now, then time frame becomes more urgent, to resolve current problem of replacement, as soon as possible.

OPTION 2 – RETROFIT

Best Option	Ok Option	Bad Option	Worst Option
16	30	32	17

Comments:

- Not necessary to change anything
- Only if all residence could be moved elsewhere during the construction phase
- cost high
- Not good for patient
- Expense to look at
- Best option for residents to retrofit on same site. This has been their home for 1 – 3 years. They have already given up their own home. It is very traumatic for them. Any changes are very hard on residents
- Do nothing and operate As A "B" facility
- Ok but very disruptive to residents during construction
- Due to the continuum of care at SJH – cost is too high
- Noise for residents, stressful
- Too expensive, lots of noise
- but concern re cost
- but costly
- Important to have a facility in North part of the City (Port Arthur Ward)
- I don't feel 30 yrs is such a long time
- Retrofitting always ends in being more expensive
- too disruptive to residents, not achieving efficiencies
- Parking an issue
- St Joseph's hospitals is beautiful and it was retrofitted
- If you can retro fit other buildings i.e. PACI why not Bethammi – PACI is a hundred years old
- Possible, but
- Too much upset chaos for all concerned.
- Having worked through retrofit too much chaos
- To disruptive to residents and staff
- Retrofits seem to be more costly than new construction

OPTION 3

Best Option	Ok Option	Bad Option	Worst Option
39	44	15	4

Comments

- On north side of city
- Thunder Bay needs a site in north end that is not privately operated
- This appears to be the most suitable for residents and confusion of moving residents more than once elderly often can't handle confusion
- Will keep residents in their own neighbourhood and close to supportive family members
- Port Arthur area
- Totally unnecessary to buy land and have yet another SJCG site
- No continuum
- Everything being equal, but it's not maintaining a north component would be beneficial
- Rebuild on north side
- if financially feasible
- concern re getting to a new location for people living in this area
- Have to find a new site
- Should investigate the north ward sites possible to accommodate north ward families
- Running yet another SJCG site will have added expenses. Plus won't meet the 2012 deadline
- Location – stay in P.A.
- North end of Thunder Bay
- PA site is a must
- In north ward – Take 110 Bethammi beds and 75 beds from Dawson Crt and build 110 +75 –80 beds
- In north side of City
- For families and residents and staff on north side of City
- Stay on north Side for compassionate reasons – families, clients
- For \$6 Million more, you would have a state of the art facility that is in the Centre of Town
- Geographical option
- For those on the north side of town
- In the north ward
- too costly
- New construction would probably be quicker than retrofit, and would allow more flexibility to include all needs more easily.

OPTION 4

Best Option	Ok Option	Bad Option	Worst Option
51	25	13	9

Comments:

- Don't want to move to Fort William
- Best move financially both for capital costs and economies of scale for ongoing operating cases. Concern re how to maintain home like atmosphere and support the type of relationships that have been developed here.
- A place this large would not been "homey".
- Will service be as good as here?
- Very interested in what will happen to the Bethammi building.
- Too big – you're going to lose the contact between patients and staff.
- Disadvantages are the most minor, least disruptive, most cost effective and meets deadline of Dec 2012.
- Money will determine. Have concern about the hospital look – really do prefer the smaller unit but know governments do not feel that way
- Absolutely the best option for clients and staff and community
- For resident centred care education, research, staffing, economies of scale
- My only concern is about mega-size and institutional potential
- Probably best in service and price
- Not happy about Bethammi leaving north side of T. Bay
- Will this affect staff – will I lose my job?
- Will this affect staff layoffs and seniority?
- I fell this would create too large a facility with the problems inherent in a larger facility – loss of personal knowledge of clients by staff, loss of continuity of care, just size is too big, etc.
- Property there already
- Too big, residents comfort/care may be lost as per the resident
- Not sure that concept of "economies of scale" fits the environment for potential residents
- Economies of scale, improved staffing new facility with more program options
- Although great options CEISS is huge
- Super facility not always the best to build new
- Last resort
- Puts all Care Group's beds on one side of city, difficult for travel for those without transportation

- What would Sister Leila Greco think?
- Either one could be an option. Option 4 is financially superior, but feel it still gives the impression of an institution because of the size.
- Everything on south side.
- With the travel distance considered.
- Business – Practical can't build/ buy/ run a lot of shuttle buses if need be for cost differences.
- Business wise
- Too big in one location. Does not serve clients in the north ward.
- Most economical. These are hard times to fund raise. So other options just aren't feasible.
- If the money is available. This would be great.
- Providing that height restrictions on an approaching air flight path as well as ground stability (due to high underground water tables) can both be safety met. This seems best to consider.

OTHER COMMENTS

- Taking part of Centre for Excellence and combine with Bethammi beds to construct 225 beds in each end of town – 2 smaller Centres of Excellence
- Visit spouse twice daily
- Cost efficiency must be taken into consideration. Hogarth is a great design
- Member of Family Council
- I don't want to move
- Build where LPH is once it closes.
- I believe inclusion with CEISS is by far the best option
- Enlarge our closets in apartments
- There are so many options to deal with and various concerns (legitimate) it is hard to come to a complete decision to further all concerns. People and their concerns are of utmost importance.
- Could a current building be used? Investigate other pieces of land that could be used for a new facility.
- Building 2 buildings – 1 Bethammi beds + half from Dawson Crt 75 and 2 half from Dawson court and Grandview lodge beds 75 + 150
- Need to examine the bed count considering aging population who will need assistance. Are we under building?
- Need to recognize that Bethammi is part of the excellence.
- If you cannot get permission for a 7–story facility on your proposed site, either due to airport height flight restrictions for building on a current landing right of way or due to

ground instability, then why not consider building twin 3 – 4 story facility (That have connecting corridors) across the north side of the proposed property? What about build on the former LPH Property. If you proposed plan doesn't become achievable?

APPENDIX 8 –POST CONSULTATION COMMENTS

The following is a collection of comments received through written submission via the SJCG email, fax or phone call before or by 3p.m., Wednesday, November 18, 2009:

Mr. VanDuyn (may be familiar to you as being a former stroke client) called to extend his praise regarding your presentations at the public engagement session yesterday.

Having reviewed the documentation he received, he would like to change a response he provided on the questionnaire. He will either attend another session to drop off or will send it in my mail.

I attended the session related the redevelopment of Bethammi Nursing Home from 1–3:00 on Sunday November 15/09. Two concerns echoed through the room.

The first concern relates to the possibility of a huge complex 448 beds. Some feared that the number of beds, from 128 to 448, might depersonalize the current warm and at home feeling that Bethammi provides.

The second concern related to a complex that is located on the South side of the city. While adding additional bed to the CEISS project will cost the least at \$18.0M (option #4). Building on a new site at a cost of \$24.0 M (option 3) might be a consideration if a site, on the North side of Thunder Bay, is available.

Here's my question: Has there been or will there be an investigation into any of the following sites: 1. Oliver Road School or 2. Hillcrest High School? I realize that such an investigation will demand a great deal of work as both sites currently have large buildings that would have to be demolished. In addition I have no idea of the purchase price.

However, of the two sites Oliver Road appears to have a great deal of property at might be "shovel ready" with the demolition of the building to take place at a later date.

Thank you for considering my comments and suggestions.

Sincerely,
Sister Alice Greer, C.S.J., EdD
Lakehead University Chaplain UC2024
Phone: 807-343-8002

I am glad to hear Bethammi is finally designated to be rebuilt. It would be a good thing if PR Cook was also included in that project. So I am certainly supportive of the re-build.

I do not support the rebuilding of Bethammi at the Riverview site for a few practical reasons:

There should be a distribution of beds across the City so people can be placed in facilities close to their family and original home. It is difficult for family, particularly the elderly to visit when extensive travel is involved.

If Bethammi were moved there would be no not for profit beds in the North end of the City. Choice would be limited only to a for profit provider. In fact there will be a significant reduction in the number of beds in the North end.

The moving of Dawson Court to the South side of the City has already affected the distribution of beds and availability of choices in the North Ward.

I can understand there is a notion that a large place like CEISS is cheaper to build and operate, we will find out once it is completed as it will be one of the largest nursing homes in the province. In a facility that size there will be issues with things like parking for the elderly and disabled. When I visit Thunder Bay Regional I am disturbed by how far frail elderly people have to walk to get to the building and then to the required service inside. That is likely what you will create at the CEISS.

Not that long ago and still existing in some communities (partly in Thunder Bay) the province built and managed large Psychiatric Hospitals that now **are not** considered to be the best way to care for the mentally ill. The alternatives in mental health have been to create smaller facilities which are integrated into the community.

I think there is some government pressure or desire by SJCG to create a large building to house the frail elderly. I don't think that size adds to quality so would encourage you to have a long critical look at that direction and the addition of the Bethammi beds to that building.

I don't want SJCG to go down in history as the organization that built another large asylum albeit for a different population.

Carl White

I met after the Resident, Family & Volunteer session yesterday. She had a question she did not ask at the meeting. Will the Heritage Chapel be closed if Bethammi moves?

I told her I had not heard anything about this. With the apartments, we still need a Chapel.

She asked me to pass on her question.

Thanks.

Bethammi Nursing Home is an aging building. Most would agree that it requires many upgrades to meet current Ministry standards and provide a more inviting and comfortable atmosphere for residents.

While I fully understand the need to re-develop Bethammi, I feel the most important consideration that must be addressed is that of maintaining Bethammi's reputation as a facility that provides quality, compassionate long term care in a home-like environment.

I feel the only feasible way to maintain this standard is to retrofit or re-build on a new site. Given the comparisons of retrofitting vs. building, building would appear to be the most reasonable, cost-effective option.

As a former Bethammi employee, one of my responsibilities was to give tours of the nursing home. Through the years, many prospective residents and families shared much information about why they were considering Bethammi for long term care. One of the main reasons was because it was one of the few nursing homes on the north end of the city. Families living in the north end and in the rural areas of the north end of the city want to be close to their loved ones. Many spouses no longer drive and rely on other family members, friends, neighbours, buses or taxis to get them to the nursing home to visit. It would truly be a shame if these loved ones had to limit their visits strictly due to transportation issues.

Many families expressed that the care given at Bethammi was exceptional to other homes. If Roseview Manor and Pioneer Ridge end up being the only 2 nursing homes left on the north-end of town, families will be forced to choose between what they consider quality care vs. convenience. They should not have to make this choice.

Of course, money is always a consideration. It may cost less to add additional beds to the proposed Centre of Excellence, but what is the cost to the residents of Thunder Bay? “Resident home areas” is not the same concept as having fewer residents in one building. Warehousing the elderly in mega-sized institutions makes it virtually impossible to promote the home-like environment that Bethammi has prided itself on for years.

St. Joseph’s Care Group prides itself on its core values of “care, compassion & commitment.” Please remain committed to the people of Thunder Bay and provide quality nursing home care in the area of the city where it is needed most and in the smaller home-like environment where residents can be surrounded by the familiar staff and quality, compassionate care that is uniquely Bethammi.

Kathy Barrie <barriek@tbh.net>

