

CARF Accreditation Report for Fairmount Home - Frontenac County

Three-Year Accreditation



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About CARF

CARF is an independent, non-profit accreditor of health and human services, enhancing the lives of persons served worldwide.

The accreditation process applies CARF's internationally recognized standards during a site survey conducted by peer surveyors. Accreditation, however, is an ongoing process that distinguishes a provider's service delivery and signals to the public that the provider is committed to continuous performance improvement, responsive to feedback, and accountable to the community and its other stakeholders.

CARF accreditation promotes providers' demonstration of value and Quality Across the Lifespan® of millions of persons served through application of rigorous organizational and program standards organized around the ASPIRE to Excellence® continuous quality improvement framework. CARF accreditation has been the recognized benchmark of quality health and human services for more than 50 years.

For more information or to contact CARF, please visit www.carf.org/contact-us.

Organization

Fairmount Home - Frontenac County
2069 Battersea Road
Glenburnie ON K0H 1S0
CANADA

Organizational Leadership

Emily Shoniker, Director of Resident Care (DOC)
Kelly J. Pender, Chief Administrative Officer

Survey Number

162525

Survey Date(s)

April 27, 2023–April 28, 2023

Surveyor(s)

Bill A. Krever, Administrative
Vesna M Adams, Program

Program(s)/Service(s) Surveyed

Person-Centred Long-Term Care Community

Previous Survey

November 14, 2019–November 15, 2019
Three-Year Accreditation

Accreditation Decision

Three-Year Accreditation
Expiration: November 30, 2025

Executive Summary

This report contains the findings of CARF's site survey of Fairmount Home - Frontenac County conducted April 27, 2023–April 28, 2023. This report includes the following information:

- Documentation of the accreditation decision and the basis for the decision as determined by CARF's consideration of the survey findings.
- Identification of the specific program(s)/service(s) and location(s) to which this accreditation decision applies.
- Identification of the CARF surveyor(s) who conducted the survey and an overview of the CARF survey process and how conformance to the standards was determined.
- Feedback on the organization's strengths and recognition of any areas where the organization demonstrated exemplary conformance to the standards.
- Documentation of the specific sections of the CARF standards that were applied on the survey.
- Recommendations for improvement in any areas where the organization did not meet the minimum requirements to demonstrate full conformance to the standards.
- Any consultative suggestions documented by the surveyor(s) to help the organization improve its program(s)/service(s) and business operations.

Accreditation Decision

On balance, Fairmount Home - Frontenac County demonstrated substantial conformance to the standards. It is apparent that Fairmont Home provides excellent person-centred care to its residents and families. Leadership has a strong approach to performance measurement and performance management, and this approach is demonstrated throughout the organization. Fairmont Home demonstrates a commitment to using the CARF standards to the benefit of residents, families, and employees. Both families and residents expressed a high level of satisfaction with the organization and the services provided. The organization has strong practices in the area of employee recruitment and retention and has developed a positive culture of caring within the program. Fairmont Home has areas for improvement, including strategic planning, performance appraisals for all staff members, cybersecurity training, the accessibility plan, the refund policy, and education and training for volunteers.

Fairmount Home - Frontenac County appears likely to maintain and/or improve its current method of operation and demonstrates a commitment to ongoing quality improvement. Fairmount Home - Frontenac County is required to submit a post-survey Quality Improvement Plan (QIP) to CARF that addresses all recommendations identified in this report.

Fairmount Home - Frontenac County has earned a Three-Year Accreditation. The leadership team and staff are complimented and congratulated for this achievement. In order to maintain this accreditation, throughout the term of accreditation, the organization is required to:

- Submit annual reporting documents and other required information to CARF, as detailed in the Accreditation Policies and Procedures section in the standards manual.
- Maintain ongoing conformance to CARF's standards, satisfy all accreditation conditions, and comply with all accreditation policies and procedures, as they are published and made effective by CARF.

Survey Details

Survey Participants

The survey of Fairmount Home - Frontenac County was conducted by the following CARF surveyor(s):

- Bill A. Krever, Administrative
- Vesna M Adams, Program

CARF considers the involvement of persons served to be vital to the survey process. As part of the accreditation survey for all organizations, CARF surveyors interact with and conduct direct, confidential interviews with consenting current and former persons served in the program(s)/service(s) for which the organization is seeking accreditation. In addition, as applicable and available, interviews may be conducted with family members and/or representatives of the persons served such as guardians, advocates, or members of their support system.

Interviews are also conducted with individuals associated with the organization, as applicable, which may include:

- The organization's leadership, such as board members, executives, owners, and managers.
- Business unit resources, such as finance and human resources.
- Personnel who serve and directly interact with persons served in the program(s)/service(s) for which the organization is seeking accreditation.
- Other stakeholders, such as referral sources, payers, insurers, and fiscal intermediaries.
- Community constituents and governmental representatives.

Survey Activities

Achieving CARF accreditation involves demonstrating conformance to the applicable CARF standards, evidenced through observable practices, verifiable results over time, and comprehensive supporting documentation. The survey of Fairmount Home - Frontenac County and its program(s)/service(s) consisted of the following activities:

- Confidential interviews and direct interactions, as outlined in the previous section.
- Direct observation of the organization's operations and service delivery practices.
- Observation of the organization's location(s) where services are delivered.
- Review of organizational documents, which may include policies; plans; written procedures; promotional materials; governing documents, such as articles of incorporation and bylaws; financial statements; and other documents necessary to determine conformance to standards.
- Review of documents related to program/service design, delivery, outcomes, and improvement, such as program descriptions, records of services provided, documentation of reviews of program resources and services conducted, and program evaluations.
- Review of records of current and former persons served.

Program(s)/Service(s) Surveyed

The survey addressed by this report is specific to the following program(s)/service(s):

- Person-Centred Long-Term Care Community

A list of the organization's accredited program(s)/service(s) by location is included at the end of this report.

Representations and Constraints

The accreditation decision and survey findings contained in this report are based on an on-balance consideration of the information obtained by the surveyor(s) during the site survey. Any information that was unavailable, not presented, or outside the scope of the survey was not considered and, had it been considered, may have affected the contents of this report. If at any time CARF subsequently learns or has reason to believe that the organization did not participate in the accreditation process in good faith or that any information presented was not accurate, truthful, or complete, CARF may modify the accreditation decision, up to and including revocation of accreditation.

Survey Findings

This report provides a summary of the organization's strengths and identifies the sections of the CARF standards that were applied on the survey and the findings in each area. In conjunction with its evaluation of conformance to the specific program/service standards, CARF assessed conformance to its business practice standards, referred to as Section 1. ASPIRE to Excellence, which are designed to support the delivery of the program(s)/service(s) within a sound business operating framework to promote long-term success.

The specific standards applied from each section vary based on a variety of factors, including, but not limited to, the scope(s) of the program(s)/service(s), population(s) served, location(s), methods of service delivery, and survey type. Information about the specific standards applied on each survey is included in the standards manual and other instructions that may be provided by CARF.

Areas of Strength

CARF found that Fairmount Home - Frontenac County demonstrated the following strengths:

- Fairmount Home offers a pleasant and welcoming environment. The organization fosters a sense of family among the staff, residents, and their loved ones, and the small size of the community promotes the development of genuine and trustworthy relationships.
- Fairmont Home has a committed senior leadership team that provides excellent person-centred care to the residents and families. The Gentlecare® philosophy provides a cornerstone for this approach and was seen throughout all areas of the home and within all departments. The leadership team played an important role in leading the organization through the pandemic and has established a solid approach to infection prevention and control.
- Fairmont Home is an innovative leader in long-term care and has developed a number of best practices that ensure that the organization can meet its mission and vision through quality improvement initiatives. One example is the family and resident survey, which is conducted in coordination with other long-term care homes in the area. This collaboration allows results to be benchmarked with other providers. The organization

also developed a unique approach to scheduling by surveying staff members to get input on scheduling approaches and making adjustments based on this feedback. This initiative not only supported staff members, but it also led to improvements from a resident perspective by improving continuity of care on weekends.

- Fairmont Home has developed a strong approach to supporting the rights of persons served through a multifaceted approach, including videos of residents presenting resident rights and t-shirts that highlight resident rights.
- Fairmont Home has a robust approach to human resources, including a solid recruitment plan for addressing staffing needs. The organization is also moving forward with an automation process for employee records at a corporate level. There is a good succession planning process in place for all key leadership positions within the organization.
- The organization has a strong approach to technology, including plans for future improvement to technology for residents to improve quality of life and lifestyle within the home.
- At a corporate level and within the long-term care home, there is a comprehensive performance management and improvement process. This process has been supported by the implementation of a Lean process and Six Sigma. More than 30 staff members have been trained on these processes at a corporate level, and key projects include work orders, employee orientation, return to work and accommodations, attendance management, drug expiry dates, the human resources management information system (HRMIS), and supply ordering.
- Fairmount Home provides residents with the flexibility to choose their breakfast time, contributing to a homelike atmosphere. The dietary team accommodates residents who choose to sleep in by providing a late breakfast.
- Fairmount Home has strong palliative and end-of-life care services that are designed to respect the requests of both families and residents. The organization has established a “walk of honour” to pay tribute to residents who have passed away. Additionally, the organization celebrates the lives of residents annually with a butterfly release, demonstrating its culture of respect.

Opportunities for Quality Improvement

The CARF survey process identifies opportunities for continuous improvement, a core concept of “aspiring to excellence.” This section of the report lists the sections of the CARF standards that were applied on the survey, including a description of the business practice area and/or the specific program(s)/service(s) surveyed and a summary of the key areas addressed in that section of the standards.

In this section of the report, a recommendation identifies any standard for which CARF determined that the organization did not meet the minimum requirements to demonstrate full conformance. All recommendations must be addressed in a QIP submitted to CARF.

In addition, consultation may be provided for areas of or specific standards where the surveyor(s) documented suggestions that the organization may consider to improve its business or service delivery practices. Note that consultation may be offered for areas of specific standards that do not have any recommendations. Such consultation does not indicate non-conformance to the standards; it is intended to offer ideas that the organization might find helpful in its ongoing quality improvement efforts. The organization is not required to address consultation.

When CARF surveyors visit an organization, their role is that of independent peer reviewers, and their goal is not only to gather and assess information to determine conformance to the standards, but also to engage in relevant and meaningful consultative dialogue. Not all consultation or suggestions discussed during the survey are noted in this report. The organization is encouraged to review any notes made during the survey and consider the consultation or suggestions that were discussed.

During the process of preparing for a CARF accreditation survey, an organization may conduct a detailed self-assessment and engage in deliberations and discussions within the organization as well as with external stakeholders as it considers ways to implement and use the standards to guide its quality improvement efforts. The organization is encouraged to review these discussions and deliberations as it considers ways to implement innovative changes and further advance its business and service delivery practices.

Section 1. ASPIRE to Excellence®

1.A. Leadership

Description

CARF-accredited organizations identify leadership that embraces the values of accountability and responsibility to the individual organization's stated mission. The leadership demonstrates corporate social responsibility.

Key Areas Addressed

- Leadership structure and responsibilities
- Person-centred philosophy
- Organizational guidance
- Leadership accessibility
- Cultural competency and diversity
- Corporate responsibility
- Organizational fundraising, if applicable

Recommendations

There are no recommendations in this area.

1.C. Strategic Planning

Description

CARF-accredited organizations establish a foundation for success through strategic planning focused on taking advantage of strengths and opportunities and addressing weaknesses and threats.

Key Areas Addressed

- Environmental considerations
- Strategic plan development, implementation, and periodic review

Recommendations

1.C.2.d.

1.C.2.e.

While the organization has developed a solid strategic plan that is specific to the organization and outlines a number of key strategic directions, the plan is not reviewed on an annual basis or updated. The organization is urged to implement a strategic plan that is reviewed at least annually for relevance and updated as needed.

Consultation

- While the strategic plan does include key goals for the organization, the organization might consider developing goals that are clear, realistic, and measurable and can be reviewed for progress on a regular basis. It might be helpful to look at developing specific, measurable, achievable, relevant, and time-bound (SMART) goals as part of the strategic plan.

1.D. Input from Persons Served and Other Stakeholders

Description

CARF-accredited organizations continually focus on the expectations of the persons served and other stakeholders. The standards in this subsection direct the organization's focus to soliciting, collecting, analyzing, and using input from all stakeholders to create services that meet or exceed the expectations of the persons served, the community, and other stakeholders.

Key Areas Addressed

- Collection of input from persons served, personnel, and other stakeholders
- Integration of input into business practices and planning

Recommendations

There are no recommendations in this area.

1.E. Legal Requirements

Description

CARF-accredited organizations comply with all legal and regulatory requirements.

Key Areas Addressed

- Compliance with obligations
- Response to legal action
- Confidentiality and security of records

Recommendations

There are no recommendations in this area.

1.F. Financial Planning and Management

Description

CARF-accredited organizations strive to be financially responsible and solvent, conducting fiscal management in a manner that supports their mission, values, and performance objectives. Fiscal practices adhere to established accounting principles and business practices. Fiscal management covers daily operational cost management and incorporates plans for long-term solvency.

Key Areas Addressed

- Budgets
- Review of financial results and relevant factors
- Fiscal policies and procedures

- Reviews of bills for services and fee structures, if applicable
- Review/audit of financial statements
- Safeguarding funds of persons served, if applicable

Recommendations

There are no recommendations in this area.

1.G. Risk Management

Description

CARF-accredited organizations engage in a coordinated set of activities designed to control threats to their people, property, income, goodwill, and ability to accomplish goals.

Key Areas Addressed

- Risk management plan implementation and periodic review
- Adequate insurance coverage
- Media relations and social media procedures
- Reviews of contract services

Recommendations

There are no recommendations in this area.

Consultation

- While the organization has a comprehensive approach to identifying risks and has built this into its business practices, it might consider looking into a risk management system, such as an enterprise risk management process that clearly identifies specific risks and outlines mitigation strategies. This type of approach could be implemented to capture all of the key risk areas, including business and care functions.

1.H. Health and Safety

Description

CARF-accredited organizations maintain healthy, safe, and clean environments that support quality services and minimize risk of harm to persons served, personnel, and other stakeholders.

Key Areas Addressed

- Healthy and safe environment
- Competency-based training on health and safety procedures and practices
- Emergency and evacuation procedures
- Access to first aid and emergency information
- Critical incidents
- Infections and communicable diseases
- Health and safety inspections

Recommendations

There are no recommendations in this area.

1.I. Workforce Development and Management

Description

CARF-accredited organizations demonstrate that they value their human resources and focus on aligning and linking human resources processes, procedures, and initiatives with the strategic objectives of the organization.

Organizational effectiveness depends on the organization's ability to develop and manage the knowledge, skills, abilities, and behavioural expectations of its workforce. The organization describes its workforce, which is often composed of a diverse blend of human resources. Effective workforce development and management promote engagement and organizational sustainability and foster an environment that promotes the provision of services that centre on enhancing the lives of persons served.

Key Areas Addressed

- Composition of workforce
- Ongoing workforce planning
- Verification of backgrounds/credentials/fitness for duty
- Workforce engagement and development
- Performance appraisals
- Succession planning

Recommendations

1.I.7.e.

While the organization has a policy that outlines the process and frequency for conducting performance appraisals and has developed a solid tool for performance appraisals, it was noted that not all employees received a performance appraisal within the guidelines outlined in the policies. The organization should implement written procedures for performance appraisal that address timeframes/frequencies related to the performance appraisal process.

1.J. Technology

Description

Guided by leadership and a shared vision, CARF-accredited organizations are committed to exploring and, within their resources, acquiring and implementing technology systems and solutions that will support and enhance:

- Business processes and practices.
- Privacy and security of protected information.
- Service delivery.
- Performance management and improvement.
- Satisfaction of persons served, personnel, and other stakeholders.

Key Areas Addressed

- Ongoing assessment of technology and data use, including input from stakeholders
- Technology and system plan implementation and periodic review
- Technology policies and procedures

Recommendations

1.J.5.a.

1.J.5.b.

1.J.5.c.(1)

1.J.5.c.(2)

While the organization is planning to implement formal cybersecurity training in 2023, there was no evidence that this training was provided to personnel on a regular basis prior to this year. The organization should provide documented training to personnel on cybersecurity and on the technology used in performance of their job duties, including initial training and ongoing training.

1.K. Rights of Persons Served

Description

CARF-accredited organizations protect and promote the rights of all persons served. This commitment guides the delivery of services and ongoing interactions with the persons served.

Key Areas Addressed

- Policies that promote rights of persons served
- Communication of rights to persons served
- Formal complaints by persons served

Recommendations

There are no recommendations in this area.

1.L. Accessibility

Description

CARF-accredited organizations promote accessibility and the removal of barriers for the persons served and other stakeholders.

Key Areas Addressed

- Assessment of accessibility needs and identification of barriers
- Accessibility plan implementation and periodic review
- Requests for reasonable accommodations

Recommendations

1.L.2.a.(1)

1.L.2.a.(2)

1.L.2.b.(1)

1.L.2.b.(2)

1.L.2.c.

While the county of Frontenac develops an accessibility plan, there was no evidence of an accessibility plan specifically for Fairmont Home. The organization should implement an accessibility plan that includes, for all identified barriers, actions to be taken and timelines. The plan should be reviewed at least annually for relevance, including progress made in the removal of identified barriers and areas needing improvement, and be updated as needed.

1.M. Performance Measurement and Management

Description

CARF-accredited organizations demonstrate a culture of accountability by developing and implementing performance measurement and management plans that produce information an organization can act on to improve results for the persons served, other stakeholders, and the organization itself.

The foundation for successful performance measurement and management includes:

- Leadership accountability and support.
- Mission-driven measurement.
- A focus on results achieved for the persons served.
- Meaningful engagement of stakeholders.
- An understanding of extenuating and influencing factors that may impact performance.
- A workforce that is knowledgeable about and engaged in performance measurement and management.
- An investment in resources to implement performance measurement and management.
- Measurement and management of business functions to sustain and enhance the organization.

Key Areas Addressed

- Leadership accountability for performance measurement and management
- Identification of gaps and opportunities related to performance measurement and management
- Input from stakeholders
- Performance measurement and management plan
- Identification of objectives and performance indicators for service delivery
- Identification of objectives and performance indicators for priority business functions
- Personnel training on performance measurement and management

Recommendations

There are no recommendations in this area.

1.N. Performance Improvement

Description

CARF-accredited organizations demonstrate a culture of performance improvement through their commitment to proactive and ongoing review, analysis, reflection on their results in both service delivery and business functions, and transparency. The results of performance analysis are used to identify and implement data-driven actions to improve the quality of programs and services and to inform decision making. Performance information that is accurate and understandable to the target audience is shared with persons served, personnel, and other stakeholders in accordance with their interests and needs.

Key Areas Addressed

- Analysis of service delivery performance
- Analysis of business function performance
- Identification of areas needing performance improvement
- Implementation of action plans
- Use of performance information to improve program/service quality and make decisions
- Communication of performance information

Recommendations

There are no recommendations in this area.

Section 2. Care Process for the Persons Served

Description

For an organization to achieve quality services, the persons served are active participants in the planning, implementation, and ongoing review and revision of the services offered. The organization's commitment to quality and the involvement of the persons served spans the entire time that the persons served are involved with services. Persons served are treated with dignity and respect, have access to needed services that achieve optimum outcomes, and are empowered to exercise informed choice.

2.A. Program/Service Structure

Description

A fundamental responsibility of the organization is to provide a comprehensive program structure. The staffing is designed to maximize opportunities for the persons served to obtain and participate in the services provided.

Key Areas Addressed

- Scope of the program
- Entry, transition, exit criteria of the program
- Composition of the service delivery team
- Service delivery team communication
- Person-centred planning
- Provision of services to persons served
- Partnering with families/support systems

Recommendations

2.A.10.e.(7)

The organization has a number of admission documents that are signed by the person served or substitute decision maker. However, the admission agreement does not cover all of the elements contained in the standard. It is recommended that the organization include refund policies in the written agreement.

2.B. Residential Communities

Key Areas Addressed

- Service delivery planning in a congregate residential program
- Medication management/assistance
- Contracting for outside services
- Safety and security of the living environment
- Procedures for medications and controlled substances

Recommendations

There are no recommendations in this area.

2.C. Care Process for Specific Diagnostic Categories

Key Areas Addressed

- Adequately addressing the complex needs of individuals with dementia
- Person-centred approach to service delivery
- Positive, therapeutic approach to behaviour
- Primary areas of education and support needed for personnel, families and support systems, and all stakeholders to meet the needs of individuals with dementia

Recommendations

2.C.6.c.

2.C.6.d.

There is no evidence of education provided to volunteers that addresses post-incident debriefing opportunities and therapeutic approaches to behaviour. It is recommended that Fairmount Home provide documented competency-based training to volunteers that includes post-incident debriefing opportunities and a therapeutic approach to behaviour. As part of this approach, the organization might consider using elements of evidence-based dementia training resources for volunteers.

2.D. Skin Integrity and Wound Care Standards

Key Areas Addressed

- Written procedures to address skin integrity and wound care
- Written protocols for wound care needs that are within the scope of the program
- Referrals to appropriate healthcare professionals to address wound care needs that are outside the scope of the program
- Initial and ongoing assessments of persons served
- Documented competency-based training for personnel related to skin integrity and wound management
- Data collection and analysis

Recommendations

There are no recommendations in this area.

2.F. Service Delivery Using Information and Communication Technologies

Description

Depending on the type of program, a variety of terminology may be used to describe the use of information and communication technologies to deliver services; e.g., telepractice, telehealth, telemental health, telerehabilitation, telespeech, etc. Based on the individual plan for the person served, the use of information and communication technologies allows providers to see, hear, and/or interact with persons served, family/support system members, and other providers in remote settings.

The provision of services via information and communication technologies may:

- Include services such as assessment, individual planning, monitoring, prevention, intervention, follow-up, supervision, education, consultation, and counselling.
- Involve a variety of professionals such as case managers/service coordinators, social workers, psychologists, speech-language pathologists, occupational therapists, physical therapists, physicians, nurses, rehabilitation engineers, assistive technologists, and teachers.
- Encompass settings such as:
 - Hospitals, clinics, professional offices, and other organization-based settings.
 - Schools, work sites, libraries, community centres, and other community settings.
 - Congregate living, individual homes, and other residential settings.

The use of technology for strictly informational purposes, such as having a website that provides information about the programs and services available, is not considered providing services via the use of information and communication technologies.

Key Areas Addressed

- Written procedures for the use of information and communication technologies (ICT) in service delivery
- Personnel training on how to deliver services via ICT and the equipment used
- Instruction and training for persons served, family/support system members, and others
- Provision of information related to ICT
- Maintenance of ICT equipment
- Emergency procedures that address unique aspects of service delivery via ICT

Recommendations

There are no recommendations in this area.

Section 3. Program Specific Standards

3.C. Person-Centred Long-Term Care Community

Description

Person-centred long-term care communities, such as nursing homes or long-term care homes, may include freestanding homes, homes that are part of continuums of care, or homes that are part of health systems. Person-centred long-term care communities are residential programs that provide nursing and other services 24 hours a day, 7 days a week. Programs may offer long-term services, short-term services, or both to address a variety of needs.

Person-centred long-term care communities foster a holistic culture that focuses on:

- Autonomy, dignity, and individual choice of the persons served.
- Relationships among persons served, families/support systems, and personnel.
- Understanding what services persons served want, how the services should be delivered, and how the persons served can be engaged in the community.
- Persons served making decisions about the rhythm of their day, the services provided to them, and the issues that are important to them.
- Cultural competence, flexibility, and safety and security of the community.

Persons served are the experts regarding life in their home. Their voices are heard and their life stories, wishes, and needs drive service delivery. Persons served and personnel celebrate the cycles of life and connect to the local community to continue relationships that nurture the quality of everyday life.

Leadership commits to continuous learning and growth, teamwork, empowerment, responsiveness, and spontaneity. A person-centred long-term care community is a place where persons served want to live, people want to work, and both choose to stay.

Key Areas Addressed

- Person-centred philosophy
- Arrangements for specific services
- Reducing risks for persons served
- Promoting choices of persons served
- Responding to individual needs of persons served
- Nursing services
- Medical management and physician involvement
- Performance measurement regarding long-term care topics
- Palliative care
- End-of-life care

Recommendations

There are no recommendations in this area.

Consultation

- While the organization meets with the resident council to discuss regular business, it might consider implementing monthly program meetings where the residents can meet, with the assistance of recreationists, and discuss choices of the programming they would like to see on the monthly recreation calendar.

Program(s)/Service(s) by Location

Fairmount Home - Frontenac County

2069 Battersea Road
Glenburnie ON K0H 1S0
CANADA

Person-Centred Long-Term Care Community