

# Long Term Care Covid-19 Commission Mtg.

Group Meeting with the Commissioner and  
Residents  
on Wednesday, February 3, 2021



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8	MEETING OF THE LONG-TERM CARE COVID-19 COMMISSION
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17	Held via Zoom Videoconferencing, with all
18	participants attending remotely, on the 3rd day of
19	February, 2021, 2:04 p.m. to 3:30 p.m.
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1 COMMISSIONERS:

2 Angela Coke, Commissioner

3 Dr. Jack Kitts, Commissioner

4

5 PARTICIPANTS:

6 Ida Bianchi, Counsel, Long-Term Care Commission

7 Secretariat

8 Melissa McVie, Ontario Association of Residents'

9 Councils

10 Jennifer Langston, Ontario Association of

11 Residents' Councils

12 Jo-Anne T, Resident

13 Erica Parent, Support staff

14 Marion K, Resident

15 Nancy Mountney, Support staff

16 Gloria B, Resident

17 Ruthann N, Resident

18 Sarah Allan, Support staff

19 Kathy B, Resident

20 Charlene Cornfield, Support staff

21 Roger M, Resident

22 Jessica Babcock, Support staff

23 George F, Resident

24 Coliza (last name unknown), Support staff

25 Peter D, Resident

- 1 Karli Cass, Support staff
- 2 Tom I, Resident
- 3 Michelle Denniss, Residents' council assistant
- 4 Susan B, Resident
- 5 David Crafts, Support staff
- 6 Phyllis L, Resident
- 7 Amelie Gove, Support staff
- 8 Linda S, Resident
- 9 June H, Resident
- 10 Penny D, Resident
- 11 Kim B, Resident
- 12 Deanna Archer, Support staff
- 13
- 14 Eveliene Symonds, Stenographer/Transcriptionist
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1 -- Upon commencing at 2:04 p.m.

2 MELISSA MCVIE: I just want to say  
3 thank you so much everyone for your patience with  
4 being here today. I'm going to click my record  
5 button.

6 Thank you, everyone. My name is  
7 Melissa Mcvie. I am part of the team with the  
8 Ontario Association of Residents' Councils, and I  
9 will be kind of helping behind the scenes today.

10 I wanted to thank you very much for  
11 taking the time to participate in today's session  
12 with the commissioners from the Ontario long-term  
13 care COVID-19 commission.

14 Before we get started, we ask that you  
15 individually mute your phone or computer audio if  
16 this is a possibility for you. It makes a huge  
17 difference to eliminating the background noise, and  
18 it's easier for you to do it for yourself than if I  
19 do it for you. It might -- you might not be able  
20 to speak when you're called upon. So if you can  
21 take a moment now to identify the button that looks  
22 like a microphone and click that to mute yourself,  
23 we really sincerely appreciate that.

24 This session, as I mentioned, is being  
25 recorded for transcription purposes, and the

1 information that you share today will be publicly  
2 available as part of the transcript, which Ida will  
3 speak to momentarily. So the information is not  
4 confidential.

5 If there is something that you would  
6 like to contribute to the commission of a  
7 confidential or private nature, please let me know,  
8 and I will be happy to follow up and share those  
9 details so you can send those messages separately  
10 outside of our discussions today.

11 Today, you will be asked two questions,  
12 and you will be called upon to share individually  
13 one by one. So, please, when you are called upon,  
14 unmute yourself, and please let us know who is  
15 speaking by saying your first name and last  
16 initial. Another option is to use the chat box if  
17 you prefer to type your responses, and I can share  
18 or Ida can share on your behalf.

19 At this time, I'd like to invite our  
20 commission co-facilitator, Ida Bianchi, who is  
21 senior counsel with the Long-Term Care Commission,  
22 to formally introduce our commission guests and  
23 share a few more details about our time together.

24 IDA BIANCHI: Thanks. (No audio) was  
25 given to me, and as I said, the commissioners are

1 really interested in hearing the input of  
2 residents. Your voice matters the most in terms of  
3 the work that the commission is doing, because  
4 you've had to live through the experience of living  
5 in long-term care during a pandemic, and that is  
6 the thing that this Commission was asked to  
7 investigate. I'd like to --

8 MELISSA MCVIE: Sorry, Ida. Sorry to  
9 interrupt. I'm just getting a message from our  
10 court reporter that she can't hear us. I just  
11 wanted to confirm. Eveliene, can you hear us?  
12 Currently, I don't see your camera anymore.

13 (ADJOURNMENT)

14 IDA BIANCHI: My name is Ida Bianchi,  
15 and I'm one of lawyers for the commission. I'm  
16 going to be facilitating today's meeting. Angela  
17 Coke, one of the commissioners, will be the  
18 commissioner chairing today's meeting, but we also  
19 have Commissioner Jack Kitts on the call. The  
20 commissioners are very eager to listen in on these  
21 calls, and I do believe the other commissioner,  
22 Frank Morocco would be here if he could.

23 So we did send along two questions that  
24 we wanted to talk to you about today. Melissa, I  
25 believe, has sent them along to you. And don't

1 worry if you didn't get them or if during the  
2 meeting you need them to be repeated to you. I'm  
3 very happy to do that.

4 As Melissa said, we are recording this  
5 meeting so that the words -- the things that you  
6 tell us can be published on our website. It's been  
7 very informative for the public to have this  
8 information so that they know exactly what's going  
9 on in long-term care. So your voices have been  
10 very important, the voices of residents. So I'm  
11 very grateful to you that you've come to spend some  
12 time with us and to help us get information that we  
13 need to prepare a report for the government.

14 The commissioners are -- the  
15 commissioners are going to have to submit their  
16 report to the government on April 30th, and we will  
17 take what you say, and I'm sure it will help to  
18 inform their report.

19 And at this point, I'd like to turn the  
20 meeting over to Commissioner Angela Coke to start  
21 the meeting. Thank you.

22 COMMISSIONER COKE: Thank you, Ida.  
23 Thank you, Melissa. Good afternoon, everyone, and  
24 thank you very much for participating in this  
25 meeting. As Ida mentioned, I'm Angela Coke. I'm

1 one of three commissioners to lead this commission.  
2 Our chair is Frank Morocco, and the other is  
3 Dr. Jack Kitts, who is with us here today.

4 As you know, this independent  
5 commission was set up to investigate the spread of  
6 COVID in long-term care homes, including how  
7 residents, staff, and families were impacted. And  
8 governments will often set up a commission or  
9 inquiry to look into tragic events when it occurs,  
10 and their purpose is to investigate what happened  
11 and why and have to make recommendations to ensure  
12 that it does not happen again.

13 Now, most commissions and inquiries are  
14 established after a tragedy has occurred, but ours  
15 is a little bit different in that we are carrying  
16 out our work in the middle of an ongoing crisis.  
17 And given the urgency of this situation, we have  
18 already made two sets of interim recommendations to  
19 assist the government in dealing with the pandemic  
20 as it is unfolding.

21 So as I mentioned, one of the key  
22 issues that we have been asked to investigate is  
23 how residents, staff, and family members, and  
24 others were impacted by the spread of COVID in  
25 long-term care homes. We've already heard from

1 residents and family associations and union  
2 representations about the devastating impacts, but  
3 we really need to hear directly from you, the  
4 residents. We're very grateful that you've agreed  
5 to participate in this meeting, and I cannot stress  
6 enough to you how important it is for us to  
7 understand your personal experiences and to hear  
8 your voices directly.

9           So before we get started, though, I  
10 would ask you to just join me in observing a moment  
11 of silence for the residents and the staff of  
12 long-term care homes who have died from COVID-19.

13           Thank you.

14           IDA BIANCHI: Thank you, Commissioner  
15 Coke.

16           Okay. I'd like to start the session by  
17 asking Jo-Anne, Jo-Anne T, who is the spokesperson  
18 for the other residents in her home -- I'd like to  
19 ask you, Jo-Anne, to answer the question, and I  
20 will repeat it now.

21           What impact has COVID had on your life?  
22 Is there anything that could have made things  
23 better for you and the other residents?

24           JO-ANNE T: I am Jo-Anne T, in the  
25 wheelchair. I am Jo-Anne, from (indiscernible).

1 I've typed those answers out already. How has  
2 COVID influenced my life? My son lives in Whitby,  
3 along with my grandsons and Sara. I also have  
4 family in Marathon, which is 45 minutes away.

5 Sometimes when my daughter was still  
6 working, she would last in 14 days before she could  
7 get back. Some of the older residents live in  
8 (indiscernible), and they puzzled why their  
9 families couldn't come in like they could before.

10 I personally know these changes were  
11 made to protect us. There were (indiscernible)  
12 during the pandemic when we were isolated from our  
13 family and friends for six months. I understand it  
14 was for our protection, because everything was  
15 unknown, but it shouldn't have taken six months to  
16 get something in order. I feel like I won't live a  
17 long time, especially with COVID, and the most  
18 important thing we can do in a situation is to  
19 protect everyone, do everything that we can to  
20 understand it so we can fight it.

21 ERICA PARENT: That was it.

22 IDA BIANCHI: Thank you, Jo-Anne.

23 Thank you very much.

24 Okay. The next person on my list is  
25 Marion K. Marion, are you still with us?

1 MARION K: Yes, I am.

2 IDA BIANCHI: Okay. Would you like me  
3 to repeat the question?

4 MARION K: Yes, please.

5 IDA BIANCHI: Okay. What impact has  
6 COVID-19 had on your life? Is there anything that  
7 would have made things better for you and the other  
8 residents in your home?

9 MARION K: Well, it made me very  
10 depressed and lonely and very sad. And when we --  
11 we're not able to see our families, that was really  
12 bad.

13 IDA BIANCHI: I'm sure that was really  
14 hard. How long did you go without seeing your  
15 family?

16 MARION K: Well, it's been almost a  
17 year since I've seen some of them now.

18 IDA BIANCHI: I'm sorry to hear that,  
19 Marion.

20 MARION K: Yes, it's been a very bad  
21 time, and it's hard for everybody.

22 IDA BIANCHI: Yeah. Okay. Okay, thank  
23 you, Marion.

24 I'm going to now turn to Gloria B and  
25 Ruthann N, who are in a group together. Are you

1 there?

2 RUTHANN N: Yes.

3 GLORIA B: Yes, we are.

4 IDA BIANCHI: Would you like me to  
5 repeat the question?

6 RUTHANN N: No.

7 GLORIA B: It's okay.

8 IDA BIANCHI: Okay. Go ahead, please.

9 GLORIA B: We'd like to see our  
10 families more. Everyone used to enjoy music and  
11 sing and play. It's been quite a few months. Our  
12 friends are dying without family.

13 IDA BIANCHI: Okay.

14 RUTHANN N: Pretty much the same, but  
15 everyone is missing their families and I miss,  
16 like, Christmas, Easter, all the holidays, being  
17 with them. And getting out -- just getting outside  
18 and going places like coffee and shopping and -- so  
19 everybody's missing that.

20 IDA BIANCHI: Yeah.

21 RUTHANN N: And I realise that we can't  
22 because of COVID, but, still, it's hard.

23 IDA BIANCHI: And are you still in the  
24 lockdown?

25 RUTHANN N: Pretty much.

1 IDA BIANCHI: That is really tough.  
2 Thanks to both of you.

3 I'm going to turn it over to Kathy B  
4 now. Kathy, are you there?

5 KATHY B: Can you hear me?

6 IDA BIANCHI: Yeah, I can. Hi.

7 KATHY B: Hi.

8 IDA BIANCHI: You want me to repeat the  
9 question, Kathy?

10 KATHY B: I think the biggest thing is  
11 not seeing anybody. Like, you just don't see  
12 anybody. My family can't come in. They keep  
13 changing the rules all the time.

14 And I think in the dining room, we need  
15 to be able to talk to one another, sit with one  
16 another, and be there with one another, not a whole  
17 new (indiscernible) room apart. Except, you know,  
18 we can't. We have to be sat at our separate  
19 tables. And a lot of people are complaining about  
20 that, because it's too far from your friends.

21 IDA BIANCHI: So you can sit in the  
22 dining room, but you can't sit together?

23 KATHY B: Yeah, and that gets really  
24 awkward. Because, you know, when you're playing  
25 bingo or whatever you're doing, we were all

1 parts -- we're all part of somebody else.

2 IDA BIANCHI: Yeah.

3 KATHY B: We know each other and can't  
4 even talk to one another, and it's not possible  
5 because of the seating arrangement.

6 IDA BIANCHI: Yeah. Are you able to  
7 use the common space in your room -- in your home,  
8 sorry?

9 KATHY B: To some extent, but not that  
10 much, because we have masks on and everything. You  
11 know, but you can't really hear somebody.

12 IDA BIANCHI: Right.

13 KATHY B: There's a lot of people  
14 complaining about the mask. It muffles their  
15 voices.

16 IDA BIANCHI: Yeah, I can understand  
17 that. I have that problem myself, understanding  
18 people when they're wearing masks. All right.  
19 Okay. Thank you, Kathy.

20 KATHY B: You're welcome.

21 IDA BIANCHI: Roger. Are you with us,  
22 Roger?

23 MELISSA MCVIE: Roger should be on the  
24 telephone. Roger, are you there?

25 ROGER M: Hi.

1 MELISSA MCVIE: Hi, Roger.

2 IDA BIANCHI: Hi, Roger.

3 ROGER M: Yeah, I was muted. I forgot  
4 to unmute it when I started talking. Sorry.

5 IDA BIANCHI: That's okay. We've all  
6 done that before.

7 ROGER M: Yeah, there's too -- there's  
8 so many people in here who don't understand, and  
9 it's not explained, so they understand what's been  
10 going on the last eight months. And they just --  
11 they're at a loss. They just don't know, and I  
12 don't know how -- how -- how that can be overcome.

13 But all of a sudden once -- once they  
14 start allowing visitors come in, all of a sudden  
15 everything is back to normal. They just don't  
16 understand why they were -- their -- their  
17 daughters or sons were absent for so long when they  
18 used to come every day.

19 IDA BIANCHI: Right.

20 ROGER M: It's kind of tough for them.

21 IDA BIANCHI: Yeah. Did you see an  
22 impact on them when they couldn't?

23 ROGER M: Yeah, for sure.

24 IDA BIANCHI: What sorts of things did  
25 you see?

1                   ROGER M: Just disillusioned, not  
2 wanting to talk, not being able to express  
3 themselves. Yeah, it was pretty sad for some of  
4 them.

5                   IDA BIANCHI: Yeah.

6                   ROGER M: Especially the ones that had  
7 visitors every day.

8                   IDA BIANCHI: Yeah. And how about you,  
9 Roger? You doing okay?

10                  ROGER M: Yeah, I'm fine.

11                  IDA BIANCHI: How are you keeping  
12 yourself occupied?

13                  ROGER M: Television and computer  
14 games.

15                  IDA BIANCHI: Right.

16                  ROGER M: But, you know, there's only  
17 so many people that have TVs, so the rest sit in  
18 their rooms and do nothing.

19                  IDA BIANCHI: Does your home have  
20 internet access?

21                  ROGER M: No.

22                  IDA BIANCHI: No. Do you think that  
23 would help?

24                  ROGER M: Probably not. Maybe for  
25 some, but a limited number, because the vast

1 majority of the people here wouldn't be able to go  
2 and get through it and use it.

3 IDA BIANCHI: Okay. Okay. What if you  
4 had more televisions?

5 ROGER M: Well, you'd have to have one  
6 in every room.

7 IDA BIANCHI: Yeah.

8 ROGER M: And, you know, some people  
9 would take -- would like that. But, you know,  
10 there's still a portion of them that wouldn't be  
11 able to figure out how to turn it on.

12 IDA BIANCHI: Right. Okay. Thanks,  
13 Roger.

14 ROGER M: I think -- I think the secret  
15 is figure out how to -- what we learn from this and  
16 correct it in the future.

17 IDA BIANCHI: Yeah. That's what the  
18 commissioners hope to do in their report, so thank  
19 you.

20 ROGER M: My opinion, I think the  
21 government's just waited far too long to lock  
22 things down or we would have been out of this six  
23 months ago.

24 IDA BIANCHI: M-hm. It's possible.

25 I --

1                   ROGER M: I mean, the virus is coming  
2 in by air. I mean, can't they figure that out?

3                   IDA BIANCHI: Yeah.

4                   ROGER M: And now they're saying March  
5 is going to be worse than anything we've had so  
6 far.

7                   UNIDENTIFIED PARTICIPANT: Oh, my. Did  
8 you hear that? Did you hear that?

9                   IDA BIANCHI: Thanks, Roger.  
10 George, are you there?

11                  GEORGE F: Yes.

12                  IDA BIANCHI: Do you want me to read  
13 the question again?

14                  GEORGE F: If you want to.

15                  IDA BIANCHI: Okay, I will. What  
16 impact has COVID had on your life? Is there  
17 anything that could have made things better for you  
18 and the other residents?

19                  GEORGE F: I don't know of anything  
20 better that can work than the program right here in  
21 this home. I -- I feel safe from the virus. My  
22 wife has the same situation at home. She is  
23 shutting herself in her home to keep from going out  
24 and connecting with anyone with the virus.

25                  IDA BIANCHI: Right.

1                   GEORGE: And there -- I don't have to  
2 do that. I -- I'm here, kept safe, and I feel very  
3 good about the way they handle things in this  
4 residence.

5                   IDA BIANCHI: Tell me a little bit  
6 about that. What are the good things they did?

7                   GEORGE F: Pardon?

8                   IDA BIANCHI: What sorts of things did  
9 they do that you thought were good?

10                  GEORGE F: Well, I think when there's  
11 a -- we have had two people in three years who have  
12 broken out with the virus. And we were in the  
13 last, oh, six months, those two people broke out  
14 with the virus. And as that happened, we were kept  
15 in our single rooms, and our food was brought to us  
16 in those rooms and mail or anything -- any  
17 connection that was to be made with us.

18                  And I'd been working on colouring in  
19 colouring books, and I've done over 3,000 colouring  
20 pieces for people in this residence or in churches  
21 out in the community. And that keeps me --

22                  IDA BIANCHI: That's lovely.

23                  GEORGE F: -- busy, something to do.

24                  IDA BIANCHI: Yeah. And I'm sure  
25 people appreciate your work, so that's lovely.

1                   GEORGE F: That's what they tell me.

2                   IDA BIANCHI: Thanks, George.

3                   The next person on my list is Peter D,  
4 and I see you there, Peter. How are you?

5                   PETER D: Very good. Very good.

6                   IDA BIANCHI: Would you like me to  
7 repeat the question?

8                   PETER D: Ummm...

9                   IDA BIANCHI: Okay. Okay. Peter, what  
10 impact has COVID had on your life? Is there  
11 anything that would have made things better for you  
12 and the other residents?

13                  PETER D: I think the dangerous  
14 thing -- pardon my voice, but it has continued to  
15 go. But I'm trying.

16                  IDA BIANCHI: Yeah.

17                  PETER D: Okay? I think that the  
18 biggest thing about the (indiscernible) home and  
19 ever. Right? I think the biggest thing -- thing  
20 here is they -- I learned about is -- I've learned  
21 the importance of love, because everybody in this  
22 home -- home is a place for love. Without my  
23 religion, without my TV, I'd be lost.

24                  I have the opportunity -- I'm living on  
25 the ground floor, so my visitors can -- can -- can

1 come at my window, and we can visit by telephone.

2 IDA BIANCHI: And who comes to visit  
3 you?

4 PETER D: My mother and my brothers and  
5 sisters whenever they can. So I think the biggest  
6 thing about my -- biggest thing being here is  
7 learning, because every time we have a -- somebody  
8 gets that again and lock it down. Everybody stays  
9 in the room, whether it's to protect us from the --  
10 (indiscernible) one another. Now, the biggest  
11 thing we have is (indiscernible) for the loving and  
12 caring and -- nursing staff who know when and how  
13 to handle things.

14 IDA BIANCHI: So you have good --

15 PETER D: I think --

16 IDA BIANCHI: -- staff at your home?

17 PETER D: I think the biggest thing I  
18 have learned since doing this is one person in  
19 there with a negative tone, you can't. You can't.  
20 You gotta think positive all the time.

21 IDA BIANCHI: Yeah.

22 PETER D: Because with a negative  
23 attitude, man, there ain't going to be anything,  
24 because they (indiscernible).

25 IDA BIANCHI: Yeah.

1                   PETER D: And you've got to learn to  
2 listen when somebody speaks. I think that's the  
3 biggest thing for down in the United States; they  
4 had an idiot down there who didn't know what they  
5 were doing. Well, now we have down there,  
6 (indiscernible). There's doing something. And  
7 that's what we got in our home here in Brantford.  
8 (Indiscernible) is our concern.

9                   IDA BIANCHI: Right.

10                  POOERT: That's all I have to say.

11                  IDA BIANCHI: Thank you, Peter. Thanks  
12 very much.

13                  Joe? I see you there, Joe, in the red  
14 T shirt. How are you?

15                  MICHELLE DENNISS: Hi. Sorry, it's  
16 Michelle Denniss, the residents' council assistant.  
17 Joe S, Helen L, and Laura C all just wanted -- gave  
18 their statements to Tom. This is Tom I (name  
19 removed). He's the resident counsel president.

20                  IDA BIANCHI: Okay. Hi, Tom.

21                  MICHELLE DENNISS: So he's going to go  
22 share what he has to say as well as what the other  
23 residents had to share in the counsel meeting.  
24 Okay?

25                  IDA BIANCHI: That's great. Thank you.

1 Hi, Tom.

2 TOM I: Hi. How are you?

3 IDA BIANCHI: Good. How are you?

4 TOM I: Not bad, thank you.

5 MICHELLE DENNISS: I can read their  
6 statements, if you just talk about what you feel  
7 like. Do you want me to go first?

8 TOM I: Sure.

9 MICHELLE DENNISS: Okay. So one  
10 resident says:

11 "COVID has taken all the things  
12 away that make life worth living.  
13 We don't have time to waste to wait  
14 for things to get better."

15 Another resident in residence Castle  
16 stated:

17 "All of our gathering spaces  
18 are being used to accommodate social  
19 distancing. For staff and for  
20 residents and for keeping the staff  
21 safe too for eating. We need more  
22 space to distance and safely  
23 socialise."

24 Another resident stated:

25 "There's not enough going on.

1 Not enough recreation or people to  
2 spend time with us. Not enough  
3 recreation programs. We can't  
4 gather as a group."

5 Another resident stated:

6 "Not enough iPads for -- for  
7 games and leisure and for video  
8 calls with friends and family. We  
9 need technology assistance."

10 We -- another resident said:

11 "It's -- it's very depressing  
12 when we can't even get our haircut."

13 Another resident said:

14 "I would rather risk catching  
15 COVID than live life in this jail."

16 IDA BIANCHI: Okay.

17 MICHELLE DENNISS: Now, Tom, do you  
18 want to add your own -- your own statement? So  
19 these are all -- and I can give the first name of  
20 all those statements and last initial.

21 IDA BIANCHI: Can I suggest, Michelle,  
22 can you just forward that to Melissa?

23 MICHELLE DENNISS: Sure. Sure.

24 IDA BIANCHI: Okay. Thank you.

25 MICHELLE DENNISS: Yeah, sure.

1                   And so, Tom -- Tom, let's take your  
2 time, Tom. Okay? There you go.

3                   TOM I: I want to say (indiscernible)  
4 from residents (indiscernible) work. And  
5 (indiscernible) residents do have (indiscernible).

6                   MICHELLE DENNISS: He's very  
7 appreciative that there's people that really care  
8 to hear what he has to say and they have to say,  
9 and he's glad that people are finally -- like, he's  
10 happy that -- it's never happened before, he said.

11                  IDA BIANCHI: Yeah. Well, we're glad  
12 to be here, Tom.

13                  TOM I: (Indiscernible).

14                  IDA BIANCHI: Thank you. Thank you for  
15 coming.

16                  MICHELLE DENNISS: Remember what you  
17 said to me before you wanted to say? I can -- go  
18 ahead. Well, we'll -- anything he wants to add,  
19 I'll put with his name in the messages I'm sending.  
20 Okay?

21                  IDA BIANCHI: Okay. You can also share  
22 it in the chat box, Michelle.

23                  MICHELLE DENNISS: Oh, okay. Great.

24                  IDA BIANCHI: And I'll read it out, if  
25 that helps.

1 MICHELLE DENNISS: Okay. With what Tom  
2 says?

3 IDA BIANCHI: Yeah.

4 Okay. I'm going to move now to Joe.  
5 No. Sorry, Susan B. Susan, are you there? Hi,  
6 Susan. We can't hear you. You might be on mute.

7 SUSAN B: Can you hear me?

8 IDA BIANCHI: Yeah, now we can hear  
9 you.

10 SUSAN B: Hi. The sad thing is that  
11 I'm not able to see my new grandchildren and not  
12 able to hold them or anything. Staying in our  
13 rooms, like, it's very depressing to stay in your  
14 room.

15 MICHELLE DENNISS: Yeah. Yes.

16 SUSAN B: I do have breathing problems  
17 on a normal day, and we are -- if I sneeze or  
18 cough, then they put me in isolation for suspect of  
19 COVID, which is quite a lot, lately.

20 Not being able to leave the property to  
21 go shopping. I have a problem with shampoo. I  
22 can't use the shampoo here, because I'm allergic,  
23 and I have to have my own shampoo. And I can't go  
24 out to get the shampoo, then it's not healthy for  
25 me.

1                   Not being able to see friends and other  
2 (indiscernible).

3                   MICHELLE DENNISS: (Indiscernible) hard  
4 to understand people with the mask on. What else?

5                   IDA BIANCHI: Michelle, can you put  
6 yourself on mute?

7                   MICHELLE DENNISS: Oh, shoot. I  
8 thought I was.

9                   IDA BIANCHI: That's okay. No problem.

10                  MICHELLE DENNISS: (Indiscernible).

11                  IDA BIANCHI: Okay. It happens. Okay.  
12 It's all right. Go on.

13                  SUSAN B: With COVID, there's no  
14 programs. We're not allowed to go to the -- you  
15 know, the hockey games. Musical bands that usually  
16 come, they're not allowed. Not allowed to order  
17 food that the other people (indiscernible). And we  
18 usually to do that, my cousin and I.

19                  Things that could be made -- make the  
20 place better is (indiscernible) are allowed to go  
21 outside while everybody else has -- has to stay in  
22 isolation in their rooms. At this point, that's  
23 not fair. And then seeing family.

24                  IDA BIANCHI: Thanks, Susan. I'm sorry  
25 that you haven't had the chance to hold your

1 grandchildren yet. That's tough. Yeah.

2 I'm going to move on to Phyllis now.  
3 Phyllis, are you there?

4 PHYLLIS L: I am.

5 IDA BIANCHI: Hi.

6 PHYLLIS L: Hi. I'd like to say as far  
7 as myself and the residents here, we have all the  
8 same concerns as what the other resident --  
9 residents have said.

10 Also, we're very lucky here that we  
11 have good staff, good security, and we also -- a  
12 lot of the residents have tablets -- they have been  
13 supplied with tablets. Our meetings are virtual  
14 now so that all the residents can attend our  
15 meetings. They do it in their room, and it's on  
16 their TVs, because we have our own website. And  
17 I -- they find that a lot easier to communicate  
18 with each other.

19 The loneliness because of not seeing  
20 their families, just general -- not depression but  
21 just not quite with it, because we're used to  
22 having a lot of parties, and they miss these  
23 parties with they -- everybody with the music and,  
24 you know, the (indiscernible) happy here at  
25 St. Joe's.

1 IDA BIANCHI: Yeah.

2 PHYLLIS L: So does that answer your  
3 question?

4 IDA BIANCHI: It sure does. Is there  
5 anything else that you want to add?

6 PHYLLIS L: No. Well, I mean, if -- as  
7 long as we can -- the residents act -- we have a  
8 craft room where the residents go where they can  
9 paint or they can knit or crochet, it keeps them --  
10 we have a social -- but all distancing, and they  
11 can still have a conversation with them while  
12 they're knitting or crocheting or painting. So I  
13 think, you know, generally our -- our home is very  
14 well equipped with other things that keep us safe.

15 But we could always do with more,  
16 because, you know, people are missing different  
17 things, different articles, maybe a different type  
18 of conversation.

19 We now have a mass on our channels so  
20 the ladies -- the residents can see mass on the  
21 channel, which helps them with their spirituality.

22 And I think that's pretty much what I  
23 have to say.

24 IDA BIANCHI: Thank you, Phyllis.

25 I'll turn it over to Linda now. Linda,

1 are you there?

2 LINDA S: Yes.

3 IDA BIANCHI: Hi, Linda.

4 LINDA S: Hi.

5 IDA BIANCHI: Would you like me to  
6 repeat the question?

7 LINDA S: No, I don't think so.

8 IDA BIANCHI: Okay.

9 LINDA S: I think I would -- a few of  
10 the -- most of the ones -- suggestions that I have  
11 have already been -- comments have already been  
12 commented on.

13 But I think a big problem at the -- at  
14 the beginning of all of this, I don't think there  
15 was enough communication that should have been  
16 on -- written on paper, because a lot of people  
17 don't hear the announcements over the PA. But if  
18 it's written down about what COVID is and -- and  
19 what the restrictions are for -- for us at this  
20 time or what we can and cannot do, if all of that  
21 was put on a -- in a -- on a sheet of paper and  
22 communicated -- brought up as things changed, then  
23 people would at least know, you know, oh, okay, so  
24 for then this, severity, or if we have an outbreak,  
25 yes, this is what would happen.

1           And if we -- if there's other problems  
2 that we run into, then that would be written there  
3 as well.

4           And because I think the COVID pandemic,  
5 it's really a -- impacted all of the daily aspects  
6 of living, you know, with long-term care facility.  
7 And I -- I feel that the communication, the --  
8 could have been improved upon. And I think that,  
9 you know, every step of the way, if -- if it was  
10 written down on paper, it would have been less  
11 scary, and we would have been more prepared to  
12 handle things as they came.

13           And I guess that's -- that's mostly the  
14 opinions that I'm hearing back from people that I'm  
15 relaying to you today is -- is mostly that -- that  
16 idea about better communication.

17           IDA BIANCHI: Okay. Thanks, Linda.

18           LINDA S: Okay.

19           IDA BIANCHI: I think as I understand  
20 it June and Penny are in the same home, but I also  
21 see Kim B. And are you all part of the same group,  
22 Kim?

23           DEANNA ARCHER: We are, but Kim's just  
24 listening, and so is St. Joseph's (indiscernible).

25           IDA BIANCHI: Okay. Okay.

1 DEANNA ARCHER: Kim's just listening,  
2 but Kim -- or June and Penny will be speaking for  
3 us.

4 IDA BIANCHI: Okay. Thanks. Thank  
5 you.

6 DEANNA ARCHER: No problem.

7 JUNE H: That's me. Okay. Well, I can  
8 relate to the way people have been speaking, and we  
9 all have a common denominator: We miss our family.  
10 And that's only natural, in my -- but, you know,  
11 when we look around, we are blessed. For one  
12 thing, I thank the good Lord for telephones. I  
13 thank the Lord for what we are doing right now. If  
14 we can see at least whom we're speaking to and  
15 throw a kiss and give a hug, it means an awful lot.

16 Now, I can't speak for all the  
17 residents, because we don't have that much  
18 communication, and you don't believe everything you  
19 hear and only half of what you see. So I'm most  
20 grateful, and I can't think of anything that you  
21 could do to make things any better for me.

22 As I've said before, I take one day at  
23 a time, and I trust the Lord 100 percent to look  
24 after me and the staff and the residents. I pray  
25 COVID-19 droplets that we come in contact with are

1 all dormant.

2 And with the entertainment, I think our  
3 girls, our recreation staff here are run off of  
4 their feet. Same with the PSWs and the staff and  
5 the top of the ladder down the bottom rung. They  
6 work overtime to make up for those that can't come  
7 in.

8 But we do have a little craft club, and  
9 we do word games and that game that's a lot like  
10 Wheel of Fortune, and they take instructions over  
11 the -- what is it?

12 DEANNA ARCHER: Zoom.

13 JUNE H: Zoom into other countries.  
14 And they try so hard to do Valentine's things to  
15 put up and have a -- have us to work on those. I  
16 stay busy with painting, crossword puzzles and  
17 jigsaw puzzles, little games that I have here. And  
18 I just feel I'm well blessed.

19 And I feel honoured that a lot of  
20 people have encouraged me and -- and asked me to  
21 play the keyboard for them every other night after  
22 supper. Even with all my mistakes, they still  
23 allow me to (indiscernible) on.

24 So I -- I'm just so thankful. We look  
25 around us, and then we see but for the grace of

1 God, there goes you or I. Because we don't know  
2 where they are. They don't know what they're  
3 doing. They have to be fed.

4 Think about it. Just think about it.  
5 It doesn't matter where it is, whether it's a  
6 business or a church or the government or right  
7 here even, you can't please everybody. No matter  
8 how hard you try, you're not going to be able to  
9 please everyone. So let's keep a ray of sunshine  
10 shining in our hearts and keep plugging on, because  
11 there's nothing we can do about it, and take one  
12 day at a time. Thanks for listening.

13 IDA BIANCHI: Thanks, June. That's a  
14 very uplifting message. I'm sure your residents  
15 are grateful for your keyboard playing. Thank you  
16 so much.

17 Penny, hi.

18 PENNY D: June, there you go. I fondly  
19 agree with June.

20 IDA BIANCHI: Okay.

21 PENNY D: We're very fortunate here,  
22 but we get by the way we do. And someone's at my  
23 door.

24 UNIDENTIFIED PERSON: Oh, sorry.

25 PENNY D: They came to take away the

1 wastepaper basket.

2 IDA BIANCHI: Okay.

3 PENNY D: There wasn't much in it.

4 Just speculating. I'd hate to have to  
5 be in charge and make the rules and regulations,  
6 because whatever rule you make has to be flexible  
7 enough to bend to suit whoever you're talking with.

8 IDA BIANCHI: Yeah.

9 PENNY D: You cannot have any strict,  
10 no gray areas. And it seems with this virus thing,  
11 COVID is going to stick with us like the flu and  
12 mutate, and we get to enjoy what this vaccine will  
13 find.

14 IDA BIANCHI: Have you been vaccinated  
15 yet, Penny?

16 PENNY D: Not yet, but that will come.  
17 And we will see how the virus itself enjoys it. We  
18 have to stay especially distant and apart from  
19 people until we learn how to cope and live with it.  
20 Like the flu bug all these years and mutates to  
21 sort of like the vaccinations until we find  
22 something new. That's about it.

23 IDA BIANCHI: Okay. Thank you, Penny.

24 So that concludes the discussion about  
25 question one, so I'd like to turn to question two,

1 which I'll read now, and I'll read it as needed.  
2 In your view, what is the most important thing that  
3 the commissioners need to know as they consider  
4 their recommendations?

5 And, Jo-Anne, would you like to go  
6 first?

7 ERICA PARENT: Hello. Jo-Anne had  
8 typed it up in her first question, and so --

9 IDA BIANCHI: Okay.

10 ERICA PARENT: -- if you need to back  
11 up and replay it from the record, it was the second  
12 part to her...

13 IDA BIANCHI: That's fine. We have it  
14 on the transcript, Jo-Anne, so it will be reflected  
15 on the record of this meeting. So thank you very  
16 much.

17 ERICA PARENT: Thank you.

18 IDA BIANCHI: Okay. Marion.

19 MARION: Yeah, I'm really glad to be  
20 here. I'm glad about being able to help out. And  
21 I do want to say that things could be better, but,  
22 you know, we're safe, and we hope that God will  
23 bring us through this safe.

24 It is very hard to be without your  
25 family, and I hope everything will turn out good.

1 It's been -- it's been a long time since we've been  
2 able to see our families, which is very sad. But I  
3 hope things will get better soon.

4 Residence staff. We need more staff,  
5 more recreation staff, household cleaning, PSW,  
6 dietary staff, laundry staff, just more staff  
7 everywhere. We deserve good care, and we need more  
8 staff here to accomplish this.

9 We used to socialise with other  
10 residents. We need -- this interaction is for  
11 mental health and well-being, and I don't  
12 understand why we can't be together. We're all  
13 together in the dining room, and I don't understand  
14 why we can't be in bigger groups when we're doing  
15 recreation programs. It would be a lot better for  
16 the recreations and the people that's doing it.  
17 And they're getting pretty played out, I think. So  
18 I do hope that things will change.

19 I have asked the residents what they  
20 would prefer to make things better, and all they  
21 could say was they want -- they wanted more changes  
22 in food. Now, I don't know what they mean by that,  
23 but just hope that everything will turn out okay.  
24 I hope everybody will have a good day and be well  
25 and safe.

1 IDA BIANCHI: Thank you, Marion.

2 Thanks for your contribution.

3 Okay. Gloria B and Ruthann N.

4 SARAH ALLAN: Go ahead.

5 GLORIA B: Hi.

6 IDA BIANCHI: Hi.

7 GLORIA B: I find the most important  
8 thing is the mental -- mental health. It could  
9 cause depression in some people, because they don't  
10 understand what's going on. And the  
11 (indiscernible) people are excellent, doing the  
12 best they can with what they have. I was just  
13 wondering how long do we still need to keep 6 feet  
14 between each other? Because it makes it hard to  
15 talk to each other.

16 IDA BIANCHI: Yeah, I can imagine that.  
17 Do you think that some additional support for  
18 people with mental health would be helpful?

19 GLORIA B: Yeah, maybe.

20 IDA BIANCHI: Someone to talk to?

21 GLORIA B: Yeah, maybe.

22 IDA BIANCHI: Okay. Ruthann, are you  
23 there?

24 RUTHANN N: Yes. I don't have anything  
25 else to add.

1 IDA BIANCHI: Okay. Thank you.

2 Kathy B?

3 KATHY B: I agree with a lot of people  
4 that have just -- I think we need more personal --  
5 like, in the dining room, why we can't sit together  
6 is as big problem in our home. Over here and sit  
7 away. You know, and, again, and 6 feet is -- is  
8 logical, but I just don't understand what the  
9 difference is between (indiscernible), you know, in  
10 a room 10 feet long, somebody down at the other end  
11 wants to talk to me, but they have to stay where  
12 they are, and they can't come up and talk to me.

13 And, you know, just to have them be  
14 able to talk back and forth makes a big difference  
15 in a lot of people, to speak to someone else. You  
16 know, and they'll just be sitting in this big room,  
17 taking sign language to, you know, sort of do this,  
18 or -- I think that's one of the biggest problems we  
19 have is this 6-feet apart thing.

20 You know, a lot of us just don't eat,  
21 because there's no real desire to eat, because, you  
22 know, you're so far away, and you can't do  
23 anything.

24 IDA BIANCHI: M-hm.

25 KATHY B: Thank you.

1 IDA BIANCHI: Thanks, Kathy.

2 Roger? Are you there? Hello?

3 MELISSA MCVIE: Roger is self-muted.

4 Roger, could I trouble you to unmute? There he is.

5 ROGER M: Yeah.

6 IDA BIANCHI: Hi, Roger. Do you want  
7 me to repeat the question?

8 ROGER M: Yeah.

9 IDA BIANCHI: Sure. In your view, what  
10 is the most important thing that the commissioners  
11 need to know as they consider their recommendation?

12 ROGER M: Well, one lady earlier  
13 mentioned staff. Well, in one dining room, they  
14 got ten people that need to be fed. And they have  
15 three staff, and they're busing doing showers at  
16 nine in the morning. So by the time they get to  
17 eat, they're sitting there for an hour.

18 And nobody's mentioned it, but  
19 everybody here would like better food.

20 IDA BIANCHI: Yeah, we've heard that  
21 more than once. I'm sorry about that. That's a  
22 drag, not having good food. That's a real drag.

23 ROGER M: Yeah.

24 IDA BIANCHI: Yeah.

25 ROGER M: Yeah, you know, like, just --

1 after 4:00, there's a -- like, three-quarters of  
2 the people in here have no contact with anybody.

3 IDA BIANCHI: M-hm. Until the next  
4 morning, you mean?

5 ROGER M: Yeah.

6 IDA BIANCHI: That's a long time.

7 ROGER M: Yeah.

8 IDA BIANCHI: Yeah. Okay, Roger, thank  
9 --

10 ROGER M: After supper -- after supper,  
11 they finish showers, and then they start putting  
12 people to bed. So there's no -- there's no -- they  
13 gotta sit there for, like, three hours with nobody  
14 to talk to, and they sit in the wheelchair sound  
15 asleep. They should be in bed, but there's only so  
16 many staff to go around.

17 IDA BIANCHI: Yeah. So staff, more  
18 staff.

19 ROGER M: Yeah. Well, you got one --  
20 one -- one staff for 13 residents or 12 residents.

21 IDA BIANCHI: Yeah. Okay. Thanks,  
22 Roger.

23 I'm going to turn to George now.  
24 George, are you still there?

25 GEORGE F: I'm still there.

1                   IDA BIANCHI: Excellent. Would you  
2 like me to repeat the question?

3                   GEORGE F: Okay.

4                   IDA BIANCHI: In your view, what is the  
5 most important thing that the commissioners need to  
6 know to make their recommendations?

7                   GEORGE F: Most important thing that I  
8 need to --

9                   IDA BIANCHI: That they need to know  
10 from you.

11                  GEORGE F: Oh. We need more staff.  
12 That's true. A lot of -- lot of people are a  
13 little longer on there being cared for. But here  
14 I'm impressed with the staff that they have. I  
15 know they need more, but here's all these people  
16 that are virtually risking a lot to be with us to  
17 care for elderly people. I -- I really appreciate  
18 them. We have almost 150 people in this building,  
19 and in the time the virus has been affecting  
20 people, there's only been those two people affected  
21 in this building.

22                  IDA BIANCHI: Okay. Thanks, George.

23                  COLIZA: Can I speak? I'm -- George,  
24 can I -- give a little bit feedback, you know, for  
25 other residents too?

1 IDA BIANCHI: Of course. Please.

2 COLIZA: Right now, actually, it's so  
3 true, you know, because we have outbreak one after  
4 the other. So -- and then, you know, when --  
5 especially when outbreak is on, and then the staff,  
6 most importantly the recreation staff, they cannot  
7 float around and work. By that time, we don't have  
8 staff, you know, for the whole floor. For 64  
9 residents might not have any recreation staff or  
10 maybe just one. Just like tomorrow, we have no  
11 recreation staff or maybe just one. Just like  
12 tomorrow, we have no recreation staff to work.

13 And actually right now, the most  
14 important is many family members, that's the only  
15 thing they can to do is, like -- well, family  
16 connection with the resident. But when we don't  
17 have a recreation staff, then they don't even have  
18 that other than with the -- the programs. And then  
19 because we have only one staff, so short staff --  
20 well, we really need more staff to help circulate  
21 programs of the -- even the family connections.

22 And then, you know, because of one --  
23 one in -- one after the other for the outbreak  
24 happening, and then the resident that's so happy,  
25 they are emotionally so up and down. And because

1 the one time, oh, outbreak's over, they all come  
2 out so happily. The next day, oh, another outbreak  
3 was because of staff, they don't suspect it. And  
4 then -- so the outbreak will be back again or  
5 again. So this is a kind of really, like,  
6 difficult for the physical well-being to experience  
7 this kind of emotional feeling.

8           So right now, it's the most  
9 important, you know -- I mean, not most important.  
10 Everything is most important, actually. But I  
11 don't know how the staffing -- how can it be  
12 improved to -- to make it better? Because we are  
13 now -- we only have five -- what, we have five  
14 units. But we can only have four full-time staff,  
15 one for each unit.

16           And that is only saying -- and, for  
17 example, right now, you know, one -- one full-time  
18 staff has been, like, exposed with another COVID-19  
19 staff, and then we -- we -- again we short one more  
20 staff. So it's really, really difficult.

21           So I don't know how I'm -- I'm not sure  
22 whether it's money. But we can -- we can have  
23 more, like, recreation staff, right, for the  
24 residents. Like, I'm sure they'll be so much  
25 happy.

1                   Just, like, for example, these days,  
2 when I have been -- I have to -- can only work for  
3 one unit, but then they -- when the outbreak so  
4 far, then I can float around to other units. And  
5 then they're so thrilled and so -- almost cry when  
6 they see the -- the staff. And they say, "Oh, I  
7 miss you so much. Miss you." Or, "We don't have  
8 any more programs." You can have -- but what can  
9 we do? We are so short staff. Right? So short  
10 staffed as well.

11                   IDA BIANCHI: Thank you. Thanks very  
12 much. That's really helpful input. I'm glad that  
13 you told us about that. I'd like to --

14                   GEORGE F: Coliza is from the staff,  
15 and she's wonderful.

16                   IDA BIANCHI: That's lovely to hear.  
17 I'm sure she appreciates hearing you say that.

18                   Okay. Peter, over to you.

19                   PETER D: The biggest thing the nurses  
20 that work in the homes is more money.

21 (Indiscernible) money. They need to have  
22 (indiscernible) to do their job. So that one girl  
23 on this week worked two 15-hour shifts between  
24 that. She's flat out, and goes back to work.

25                   IDA BIANCHI: That's a lot.

1           PETER D: That goes on constantly all  
2 the time. But these people, they work, work.

3           Half of the time -- a person there was  
4 talking about food. We do not have our food  
5 delivered to us. They make it here on the  
6 premises. And it's a big difference, because I was  
7 over in (indiscernible) and (indiscernible) living  
8 there for the last 20 years. They delivered the  
9 food (indiscernible) at 4:30, (indiscernible). And  
10 then Covered Wagon, they delivered the -- if you  
11 wanted it, but they cost you \$15 a meal, so if you  
12 wanted it. But here, everything is very  
13 unappetising. (Indiscernible). That's not  
14 (indiscernible) approved. That would  
15 (indiscernible).

16           IDA BIANCHI: Is it better to have it  
17 on site?

18           PETER D: It is, yeah, because you get  
19 a bigger variety.

20           IDA BIANCHI: Yeah.

21           PETER D: And every day, there's  
22 something different. Two meals, two choices,  
23 you've got. Some places, you've only got one.  
24 Like (indiscernible), you've only got one choice.  
25 So you've got no -- you can't choose for yourself

1 what you want to have.

2 IDA BIANCHI: Right. Okay. Thanks,  
3 Peter.

4 PETER D: Okay.

5 IDA BIANCHI: Okay.

6 On to Joe. Michelle?

7 MELISSA MCVIE: We've got Tom there  
8 with Michelle.

9 IDA BIANCHI: Oh, Tom. Yeah, I forget  
10 about Tom.

11 MELISSA MCVIE: There were a few  
12 comments from Tom in the chat box.

13 IDA BIANCHI: Okay. Let me just see.  
14 Hold on a sec quick to read your -- okay. Okay.  
15 Here we are.

16 "I thank you for having this  
17 meeting."

18 This is from Tom:

19 "It is very hard to hear and  
20 understand people with a mask. Hard  
21 to stay in your room all day when  
22 one person has a symptom."

23 And, sorry, Michelle, is there  
24 anything else? Is that it?

25 MICHELLE DENNISS: Let me just make

1 sure. He might be muted on my end. Pardon me.

2 MELISSA MCVIE: I apologise, Michelle.  
3 Okay. There we go. Sorry, Michelle. Sorry, Tom.

4 MICHELLE DENNISS: Do you want me to  
5 read this? Okay. So (indiscernible) also  
6 residents also wanted their main point to be -- to  
7 mention:

8 "Can health -- the Ministry  
9 find a way to keep us physically  
10 safe without harming our mental  
11 well-being? We want to connect with  
12 our friends, our family, staff, and  
13 other residents. We want  
14 entertainment. We want more  
15 devices. We want better internet  
16 connections and -- and more  
17 recreation and nursing staff. Often  
18 there is only one or -- or sometimes  
19 2 people for 90 residents in  
20 recreation."

21 IDA BIANCHI: Okay. Thank you.

22 Thanks, Michelle.

23 And I'm sorry if anyone heard that, I  
24 had something ringing on my computer. Maybe that's  
25 not in the transcript and no one heard it, but I

1 apologise if you did.

2 Susan. Susan B. Hi. Who is going to  
3 see her grandkids really soon, we hope.

4 SUSAN B: I hope so.

5 Okay. Our home has people -- residents  
6 wandering and could be probably spreading virus in  
7 their wandering. It's curious -- spreading the  
8 virus in (indiscernible) the home's defence was to  
9 put up (indiscernible) gates for the wandering.

10 There was a strong need to be measured  
11 to maintain safe recreation for people. Possibly  
12 funding for (indiscernible).

13 Another thing is PSWs are getting \$3  
14 more, and the other staff should be getting the  
15 same amount like the nurses and the people that are  
16 cleaning, because some of them do several jobs, and  
17 if -- because nurses best -- just jobs, because  
18 they're not (indiscernible). All of them in the  
19 place do a lot of work, and they're really terrific  
20 people. Everybody's (indiscernible).

21 IDA BIANCHI: I'm sure that they -- if  
22 any staff are reading the transcripts, they'll be  
23 glad to hear that. We've heard from staff, and  
24 we've heard how difficult it is for them and how  
25 hard -- and some of them feel badly, you know, that

1 they didn't feel like they did enough. So I'm sure  
2 they'll be grateful to hear.

3 SUSAN B: They work very hard.

4 IDA BIANCHI: Yeah. Thank you.

5 SUSAN B: Another thing is mandatory  
6 swabs on residents. They should be swabbed when  
7 the first symptoms come, not waiting 14 days for a  
8 swab.

9 IDA BIANCHI: Okay. That's what's  
10 happening in your home?

11 SUSAN B: Yeah, they stay in there for  
12 48 hours, and we haven't been swabbed, so it's kind  
13 of hard.

14 IDA BIANCHI: Okay.

15 SUSAN B: When they do put is in  
16 isolation, the areas aren't very good. Like, they  
17 should place more chairs in the field hospital.

18 The beds and that, all this is great,  
19 but they need to have the beds being able to move  
20 up and down for people to get in and out.

21 IDA BIANCHI: Okay. Thanks, Susan.  
22 Thank you.

23 Phyllis. Are you still there, Phyllis?

24 PHYLLIS L: Yes, I am.

25 IDA BIANCHI: Okay. Would you like me

1 to repeat --

2 PHYLLIS L: Yes, please.

3 IDA BIANCHI: Go ahead. Okay, I will.

4 What the most important thing that commissioners  
5 need to know as they consider making  
6 recommendations?

7 PHYLLIS L: I think the commissioners  
8 should -- we need more funding so that everyone,  
9 all the staff here -- because they work, like the  
10 others were saying, double time, overworked,  
11 overtired, and the thing is underpaid. So I think  
12 the funding is the biggest thing that we need so  
13 that everybody can -- they can accomplish more  
14 within the long-term care homes.

15 The other is communication. There has  
16 to be a lot more communication, not only just  
17 verbal. It should be on paper so that some of the  
18 residents who can not -- and so -- because there's  
19 so much out there about COVID, and they just --  
20 they have a hard time understanding. But if they  
21 could read it in black and white and bring it up at  
22 our meetings, which we will be doing, that they  
23 would understand more and would probably be able to  
24 ask questions that they are too shy to talk about.

25 IDA BIANCHI: Okay.

1                   PHYLLIS L: I think that's what our --

2                   IDA BIANCHI: Okay.

3                   PHYLLIS L: -- what my concerns were.

4                   IDA BIANCHI: Thank you, Phyllis.

5 Thank you for sharing.

6                   Linda.

7                   LINDA S: Yes. Hi.

8                   IDA BIANCHI: Hi there.

9                   LINDA S: I would just like to continue  
10 on with what Phyllis just mentioned and what I  
11 mentioned in question one. It was about  
12 communication on all levels at the residence and  
13 different communication -- different tools of  
14 communication that can be used to -- to share with  
15 the residents so they know point blank plain what  
16 may be coming or what is coming and what's being  
17 implemented and what's being shared.

18                   Because the unknown is very, very  
19 difficult to handle and it's very stress --  
20 stressful and it's very depressing, the unknown.  
21 But as soon as you put it out on paper and  
22 communicate it, it takes some of the -- that fear  
23 away from -- away from the residents.

24                   And I would also like to say that I  
25 think depression right now is -- is a very big

1 mental health concern for seniors in long-term  
2 cares due to the fact of coping with all these  
3 challenges and not being able to visit with  
4 families and not being able to take part in  
5 recreation and not have their own -- their ordinary  
6 lives back to normal, it is very depressing. And  
7 I'm finding that, that a lot of residents are  
8 depressing. So recreation needs to look at some  
9 tools, or there needs to be some education in  
10 regards to depression and the elderly.

11 IDA BIANCHI: Okay. That's very  
12 helpful. Thank you.

13 June, over to you.

14 JUNE H: Hi. I'm like the rest of them  
15 that are concerned about the family. My one  
16 daughter lives in Brantford, which is a long way  
17 from Peterborough. I have a daughter lives in  
18 Bancroft. My daughter in Brantford, I haven't seen  
19 since September, but that doesn't even count  
20 compared to a year for some of the (indiscernible).  
21 When they come, it's only half an hour's visit, and  
22 then they go back in the same day. And that far --  
23 one is 75, and the other is 76, so they don't like  
24 driving at night anymore. So I just wondered if  
25 something could be done about that situation.

1                   And maybe there are others. I only  
2 have the two children, and some people have four,  
3 five, six. And that was something we're interested  
4 in.

5                   And hearing people talk about more  
6 tablets, more staff for sure, and being more  
7 flexible with programs. And social distance --  
8 distancing, we don't leave our home areas. But we  
9 do sit at a table if we're 6 feet apart, and we  
10 could communicate very well -- although there are  
11 some that don't speak -- and then all of us can  
12 hear. But I think that all of the -- the  
13 facilities should have the same distancing. Ten  
14 feet is a long way to try and have a conversation.

15                   So that's my -- that's my input for  
16 now, thank you.

17                   IDA BIANCHI: Thanks, June. Last word  
18 goes to Penny. Penny?

19                   PENNY D: Well, I've been listening to  
20 June, and where we are, we seem to manage very well  
21 indeed. (Indiscernible) it's a (indiscernible)  
22 thing, but we have to learn how to live with it and  
23 cope. Bye-bye.

24                   IDA BIANCHI: Okay. Thank you.

25                   Okay. Thank you, everyone. I'm going

1 to turn it back over to Commissioner Coke to end  
2 the meeting.

3 Commissioner Coke? You're on mute.

4 COMMISSIONER COKE: Sorry about that.  
5 Can you hear me now?

6 IDA BIANCHI: Yes. Yes.

7 COMMISSIONER COKE: Okay. I just  
8 wanted to thank everyone who helped to organise  
9 this session today.

10 And to all the residents who  
11 participated, I just want to say a special thank  
12 you for coming forward, for sharing your stories,  
13 telling us about your experiences through this  
14 difficult time. I know this is not easy. You've  
15 provided some great comments, some ideas, some  
16 insights into your experience that will really help  
17 to guide our final recommendations. So I just want  
18 to say we're very grateful for you helping us with  
19 our work.

20 And I just want to wish all of you a  
21 very good afternoon. And, again, thank you for  
22 taking the time the spend with us and really share  
23 what it is you're experiencing. It's very helpful  
24 to us. Thank you. Thank you.

25 MR. WISDOM: Thank you.

1                   MELISSA MCVIE: Thank you, everyone.

2                   Good afternoon. Thank you.

3                   IDA BIANCHI: Thank you, Commissioner

4                   Coke.

5                   COMMISSIONER COKE: You're welcome.

6                   MELISSA MCVIE: And our court reporter.

7                   Thank you, everyone.

8                   -- Upon concluding at 3:30 p.m.

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1 REPORTER'S CERTIFICATE

2  
3 I, Eveliene Symonds, BA, CSR(A),  
4 Certified Shorthand Reporter, certify;

5 That the foregoing proceedings were  
6 taken before me at the time and place therein set  
7 forth, at which time the witness was put under oath  
8 by me;

9 That the testimony of the witness  
10 and all objections made at the time of the  
11 examination were recorded stenographically by me  
12 and were thereafter transcribed;

13 That the foregoing is a true and  
14 correct transcript of my shorthand notes so taken.

15 I further certify that this  
16 questioning was conducted in accordance with the  
17 Protocol for Remote Questioning, Revised  
18 05/05/2020.

19 Dated this 3rd day of February, 2021.

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