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# Welcome to Algoma Manor

Dear Resident / Family Member,

Welcome to Algoma Manor Nursing Home. Our compassionate staff and their respect for the individual needs and/or preferences of resident and families is what makes our home a true community of caring. Our philosophy is to ensure all residents are provided with choices for daily living, while also ensuring that the quality and level of care is consistent.

What does this mean for you or your loved one? It means that we sincerely care about what you think, we will listen to your concerns and always welcome your input. It means that we will be ready to provide assistance when needed while also respecting the privacy and dignity of the resident at all times.

Algoma Manor is licensed under the Ministry of Health and Long-Term Care. We strive to exceed all legislated regulations and requirements of the Ministry.

The information provided in the Resident Handbook outlines many programs that are provided by our home. Please take the time to review this information and if you have any questions please do not hesitate to contact me.

Respectfully yours,

PAMELA FICOCIELLO EXECUTIVE DIRECTOR

## Meet our team

### Executive Director - Pamela Ficociello

Is responsible for the overall management of the home. She reports directly to the Algoma Manor Board of Management, more specifically, Donna Latulippe. The Executive Director's office is located in the main administration area. She can be reached directly at (705) 842-2840, EXT. 135. Any serious concerns should be addressed directly to the Executive Director.

### Director of Care - Linda Beitz

Is responsible for maintaining the highest quality of nursing care standards throughout our entire residence. She is also directly responsible for our nursing department and all care that is facilitated within the home. The Director of Care's office is located in the main administration area. She can be reached directly at (705) 842-2840, EXT. 164

### Associate Director of Care - Jennifer Fogal

Is responsible for clerical and bookkeeping functions for the home as well as for ensuring that staff provided quality care to residents, consistent with the standards of nursing practice, the MOHLTC, and guidelines of Algoma Manor. She is located in the main administration area, and reports directly to the Executive Director. She can be reached at extension 133.

### Director of Dietary Services - Jocelyn Parr

The Director of Dietary Services is responsible for all the meals within the home. The Director of Dietary Services and the Dietician are available for nutritional counselling, as required. She is located in the main-kitchen, and reports to the Executive Director. The Director of Dietary Services can be reached at extension 124. All dietary concerns should be given to the Director of Dietary Services.

### Envrionmental Service Manager - Tina Peppler

Is responsible for our Maintenance, Laundry, and Housekeeping departments. She is also responsible for maintaining the Health and Safety of our home. The Environmental Service Manager's office is located inside the main-floor kitchen, and reports to the Executive Director. Please ask to speak with the Environmental Service Manager if you have any questions concerning the building and its equipment and/or physical operations. She can be reached directly at extension 175.

### PSW Manager - Tanya McColeman

Is responsible for providing front-line leadership to PSW nursing team, and for the planning, directing and coordinating non-clinical resident care necessary for the daily management of all resident home areas. She reports to the Executive Director. She can be reached directly at extension 155.

### Adminitrative Assistant - Jenny Daoust

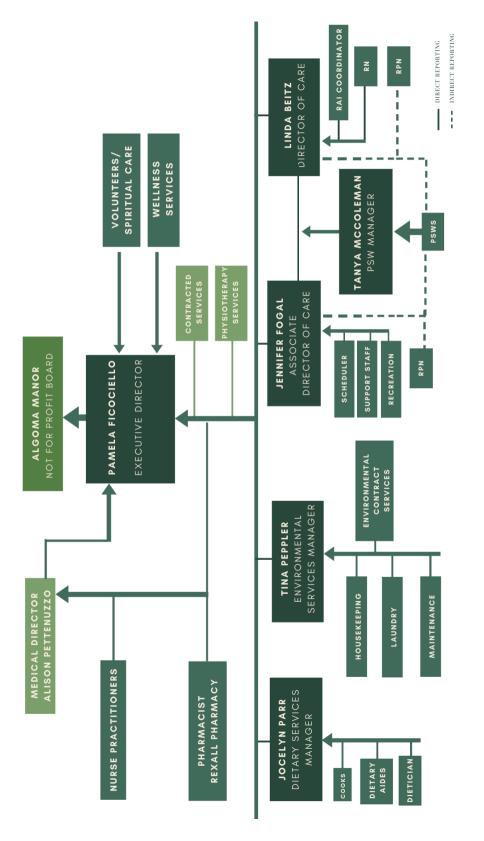
Is responsible for assisting in clerical duties. The Administrative Assistant completes operational requirements by scheduling and assigning administrative projects and expediating work results. The Administrative Assistant is located in the administration area, and reports directly to the Executive Director. She can be reached directly at extension 134.

Spruce RPN - extension 131

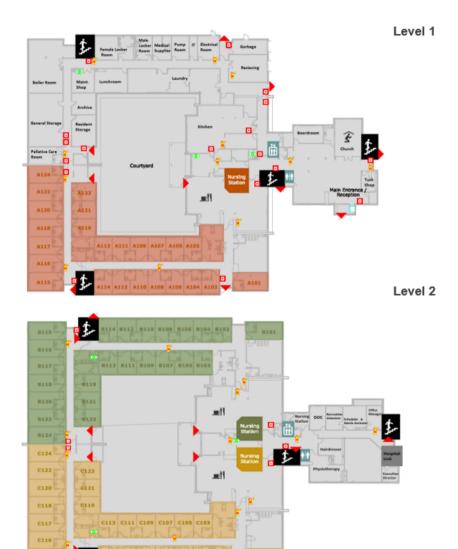
Pine RPN - extension 141

Tamarack - extension 151

Charge Nurse extension 146



# Building Layout



# Resident Handbook: Section I

Accommodations Legal and Financial Information

# Our Organization

Algoma Manor is a not-for-profit and CARF accredited long-term care home. Algoma Manor first opened in 1967 and has been providing reliable and quality care ever since! We are located in Thessalon, Ontario, and can be found between the junction of HWY-17 and HWY-129 on the North Shore of Lake Huron. Our home provides elderly and non-elderly residents alike the opportunity for 24-hour nursing care. Not only do we accommodate a total of 96 residents with 22 private, 24 semi-private, 48 basic, and 1 short stay, but also accommodate residents who range from fully-mobile to bed-ridden.



# Our Mandate

Algoma Manor's vision is to awaken our community to the positive possibilities of life's next chapters. Our mission is to help you live fully, everyday. Meanwhile, our values are respect, responsibility, passion, growth, and teamwork. We respect and value each other from our residents to our co-workers. We hold ourselves to the highest standards of safety and quality. If we see a problem or an opportunity, we own it. "Not my Job" is not in our vocabulary. Passion runs through us as we all understand that this job isn't for everybody. We feel it is a privilege to have elderly in our lives. We constantly push ourselves to learn, to develop, to stretch and do more than we thought was possible. Finally, we honour someone's voice and advocate for their choice. We understand and value our team. It's up to each one of us to communicate, collaborate, and support one another. We're in this together – coworkers, volunteers, physicians, and healthcare providers, suppliers, communities, families, and residents.

# Our Vision, Mission, and Values

# **Vision**

To provide quality care through innovative teamwork in a warm nurturing home where residents can be themselves.

# **Mission**

Algoma Manor Nursing Home, a respected accredited long-term care home, in a rural community hub; is recognized as a partner in an integrated regional continuum of care model for Northern Ontario.

# <u>Values</u>

### RESPECT

Show interest, listen and act, show esteem and consideration, show regard

### COMPASSION

Awareness of others physically, intellectually, emotionally, and spiritually.

### WELCOMING

Gladly receive with a warm smile, nurturing approach.

### RESIDENTS' BILL OF RIGHTS

#### Residents' Bill of Rights

**3** (1) Every licensee of a long-term care home shall ensure that the following rights of residents are fully respected and promoted:

#### RIGHT TO BE TREATED WITH RESPECT

- Every resident has the right to be treated with courtesy and respect and in a way that fully recognizes the resident's inherent dignity, worth and individuality, regardless of their race, ancestry, place of origin, colour, ethnic origin, citizenship, creed, sex, sexual orientation, gender identity, gender expression, age, marital status, family status or disability.
- Every resident has the right to have their lifestyle and choices respected.
- Every resident has the right to have their participation in decisionmaking respected.

### RIGHT TO FREEDOM FROM ABUSE AND NEGLECT

- 4. Every resident has the right to freedom from abuse.
- Every resident has the right to freedom from neglect by the licensee and staff.

### RIGHT TO AN OPTIMAL QUALITY OF LIFE

- Every resident has the right to communicate in confidence, receive visitors of their choice and consult in private with any person without interference.
- Every resident has the right to form friendships and relationships and to participate in the life of the long-term care home.
- Every resident has the right to share a room with another resident according to their mutual wishes, if appropriate accommodation is available.
- Every resident has the right to meet privately with their spouse or another person in a room that assures privacy.
- 10. Every resident has the right to pursue social, cultural, religious, spiritual and other interests, to develop their potential and to be given reasonable assistance by the licensee to pursue these interests and to develop their potential.
- Every resident has the right to live in a safe and clean environment.

- 12. Every resident has the right to be given access to protected outdoor areas in order to enjoy outdoor activity unless the physical setting makes this impossible.
- 13. Every resident has the right to keep and display personal possessions, pictures and furnishings in their room subject to safety requirements and the rights of other residents.
- Every resident has the right to manage their own financial affairs unless the resident lacks the legal capacity to do so.
- Every resident has the right to exercise the rights of a citizen.
   RIGHT TO QUALITY CARE AND SELF-DETERMINATION
- Every resident has the right to proper accommodation, nutrition, care and services consistent with their needs.
- 17. Every resident has the right to be told both who is responsible for and who is providing the resident's direct care.
- Every resident has the right to be afforded privacy in treatment and in caring for their personal needs.
- 19. Every resident has the right to,
- i. participate fully in the development, implementation, review and revision of their plan of care,
- give or refuse consent to any treatment, care or services for which their consent is required by law and to be informed of the consequences of giving or refusing consent,
- iii. participate fully in making any decision concerning any aspect of their care, including any decision concerning their admission, discharge or transfer to or from a long-term care home and to obtain an independent opinion with regard to any of those matters, and
- iv. have their personal health information within the meaning of the Personal Health Information Protection Act, 2004 kept confidential in accordance with that Act, and to have access to their records of personal health information, including their plan of care, in accordance with that Act.
  - 20. Every resident has a right to ongoing and safe support from their caregivers to support their physical, mental, social and emotional wellbeing and their quality of life and to assistance in contacting a caregiver or other person to support their needs.

- 21. Every resident has the right to have any friend, family member, caregiver or other person of importance to the resident attend any meeting with the licensee or the staff of the home.
- 22. Every resident has the right to designate a person to receive information concerning any transfer or any hospitalization of the resident and to have that person receive that information immediately.
- 23. Every resident has the right to receive care and assistance towards independence based on a restorative care philosophy to maximize independence to the greatest extent possible.
- 24. Every resident has the right not to be restrained, except in the limited circumstances provided for under this Act and subject to the requirements provided for under this Act.

Note: On a day to be named by proclamation of the Lieutenant Governor, paragraph 24 of subsection 3 (1) of the Act is amended by striking out "restrained" and substituting "restrained or confined". (See: 2021, c. 39, Sched. 1, s. 203 (3))

- 25. Every resident has the right to be provided with care and services based on a palliative care philosophy.
- Every resident who is dying or who is very ill has the right to have family and friends present 24 hours per day.

RIGHT TO BE INFORMED, PARTICIPATE, AND MAKE A COMPLAINT

- 27. Every resident has the right to be informed in writing of any law, rule or policy affecting services provided to the resident and of the procedures for initiating complaints.
- 28. Every resident has the right to participate in the Residents' Council.
- 29. Every resident has the right to raise concerns or recommend changes in policies and services on behalf of themself or others to the following persons and organizations without interference and without fear of coercion, discrimination or reprisal, whether directed at the resident or anyone else:
- the Residents' Council.
- ii. the Family Council.
- iii. the licensee, and, if the licensee is a corporation, the directors and officers of the corporation, and, in the case of a home approved under Part IX, a member of the committee of management for the home under section 135

or of the board of management for the home under section 128 or 132.

- iv. staff members.
- v. government officials.
- vi. any other person inside or outside the long-term care home.

# Resident and Family Responsibilities

Both the residents and their families have obligation and responsibilities to the home. Resident's and their families hold a responsibility to other residents, staff members, families, and the management team. You have a responsibility to:

- · Respect the rights and needs of other residents, families, staff, and volunteers.
- Respect the rights of staff to work in an environment that is free from harassment.
- treat fellow residents and staff with both courtesy and consideration in order to manage any conflict in a respectful manner.
- Respect the diverse backgrounds and interests of all others who are different from you.
- Maintain Algoma Manor policy and procedures and report any violations to appropriate staff.
- Provide the home an opportunity to correct any complaints by either speaking directly to the supervisor or by using a feedback form.
- Report promptly anything he and/or she feels is a safety concern.
- Provide truthful information to the staff and administration concerning all aspects of his and/or her mental, physical and financial status, and of any relevant change.
- Smoke only in designated outside areas which are located a minimum of nine (9)
  meters from any entrance to the home or from any other resident's bedroom
  window or office window.
- Be responsible for his and/or her own personal belongings, including repairs to wheelchairs, hearing aids, razors, glasses and dentures belonging to the resident.
- Sign out, in accordance with the home's policy, when leaving the home.
- Ensure that bills are paid on a timely basis.
- Adhere to policies prohibiting gratuities or gifts to staff or any involvement in resident's personal business matters such as cashing cheques or paying bills.
- Refrain from requesting staff to witness a will or any other legal documents.

### Accommodation, legal & Financial Information

## <u>Signing Agreements</u>

Provincial legislation requires that the Residency Agreement and Unfunded Services Agreement be signed upon admission by the resident and/or resident's representative, and that they receive a copy of these agreements.

Any agreement signed between the Home and a resident, prospective resident/resident's representative is voidable by the resident, prospective resident/resident's representative for ten (10) days after it is made.



## <u>Residency Agreement</u>

The Ministry of Health and Long-term care sets accommodation rates annually. The current rate information is included in this information package. The Residency Agreement is signed on the day of admission and reviewed annually at the annual care conferences.

Resident monthly accommodation fees are due on the first of each month.

A rate reduction is available if a resident is unable to afford the maximum basic or ward rate. Reductions are based upon income levels as the actual level of income will determine the actual rate paid. The Ministry of Health's rate reduction application will be provided by CCAC and brought to the Home by the resident, along with all required documentation to support the application.

# Services Included in Charge for Basic Accommodation

- a. Nursing and personal care on a 24-hour basis, including the administration of medication and assistance with activities of daily living.
- b. Medical care that is available in the home
- c. Medical supplies and nursing equipment necessary for resident care (e.g. for wound/skin disorders, continence care, infection control and sterile procedures).
- d. Medical devices such as catheters
- e. Supplies and equipment for personal hygiene and grooming (lotion, soap, shampoo, deodorant, toothbrush, toothpaste, denture cups & cleansers, toilette tissue, facial tissue, hairbrush, comb, razor/shaver, shaving cream, feminine hygiene products).
- f. Equipment for general use of residents (upon availability: wheelchair, geriatric chair, cane, walker, toilet aide, and other self-help aids for activities of daily living).
- g. Meal service and meals (three (3) meals, between meal snack and at bedtime, dietary supplements and devices enabling residents to feed themselves).
- h. Social, recreational and physical activities and programs, including the related supplies, equipment and staff.
- i. Laundry, including labelling, machine washing and drying of personal clothes.
- j. Bedding and linen (mattresses with waterproof covers, pillows, bed linen, washcloths and towels).

- k. Bedroom furnishings (bed with adjustable head and foot, adjustable bed rails, bedside table, easy chair and wardrobe / closet).
- I Standard ward accommodation
- m. The cleaning and upkeep of accommodation
- n. Suitable accommodation and seating for meetings of Resident's and Family Councils.
- o. Prescription pharmaceutical preparations listed in the Drug Benefit Formulary (pharmaceutical supplier dispensing fees not included).
- p. Special preparations or medical devices which may be obtained from the Ontario Drug Benefit Program as interim non-formulary benefits.
- q. 'Insured' devices, equipment, supplies and services available to residents through other programs such as Home Care program and Assistive Devices program.
- r. Non-prescription drugs, medication and treatments and supplies that are obtained through Ontario Government Pharmaceutical and Medical Supply Services.

### <u>Services Avaliable at Extra Cost</u>

The Unfunded Services Agreement lists all services available and the charge for each service. Whenever there is a change to charges of any of the services that you have requested, you will be asked to approve the change. Please see the Unfunded Services Agreement for details.

Please note that residents are not required to purchase care, services, programs or goods from us and may purchase such things from other providers, subject to Long Term Care Homes Act, 2007 restrictions with respect to the supply of drugs.

### Furnishings & Hospitality Services

Each room is furnished with a bed, a bedside cabinet, an armchair and a wardrobe. Residents are invited to bring a favourite chair, dresser, lamp, plants, afghans and pictures to make their rooms more homelike, personal and comfortable. For safety reasons, flat screen televisions must be no larger than 32 inches and must be placed on appropriate table/stand. Flat screen televisions cannot be wall mounted. Also for safety and appearance reasons, please consult with the Director of Care before hanging pictures or rearranging furniture -- our Maintenance staff will assist in these tasks. Please remember that a crowded room impedes resident and staff movement, housekeeping services, and may cause safety hazards.

Residents in private rooms may also have a mini-fridge in their room if the resident or family members ensure that the fridge is cleaned, temperatures are taken regularly and contents are maintained on a regular basis. Please notify the Director of Care to sign an agreement for the fridge.

Residents are encouraged to provide bulletin boards for their rooms to keep things neat and tidy and prevent wall damage.

Linen, washcloths, and towels are provided; however, you may wish to decorate with a bedspread, as they are not provided by the home. Please ensure that they are flame resistant.

Residents and/or families must consult with the Director of Care before purchasing personal appliances or operating such appliances in the home (e.g. fans), as legislation regarding fire and safety must be adhered to. Our maintenance staff must be inspect all electrical appliances to ensure they are CSA approved and are in good working order. Power bars must be used instead of extension cords or "octopus" plugs.

### Please note the following items are

- Teakettles
- Coffeepots
- Flectric Blankets
- · Clothing Irons
- Heating Pads
- Space Heaters
- Air Conditioners
- Disposable razors

Please consult the Executive Director if you wish major décor changes or before bringing in large and unusual items.

### <u>Valuables</u>

Due to fire and safety regulations, resident rooms cannot be locked. We are unable to protect resident's valuables (jewelry, collector items, etc.) from breakage or loss. *Therefore, do not bring in articles of value*.

### <u>Smoking</u>

Algoma Manor is a NON-SMOKING home. There will be no smoking in the home or within nine (9) meters of a doorway into the home, There are designated smoking areas outside the home and smoking is unsupervised. Residents who smoke must be able to manage their access to the smoking area and the smoking process by themselves. The resident is responsible to sign out when leaving the home to smoke and to report to the information center upon their return. Smoking materials are not permitted to be kept in the resident's rooms.

For residents who smoke, and are unable to access the designated smoking area safely, the home will initiate measures to assist the resident in a smoking cessation program.

All policies and procedures pertaining to resident smoking must be adhered to.



### <u>Information Practices</u>

We place a high value on the privacy, confidentiality and security of your personal healthcare information. Under the Declaration of Confidentiality, all our staff are not permitted to divulge any knowledge at any time with any unauthorized person during their employment or thereafter, except in the course of duties as an employee.

# We adhere to the following principles based on ten internationally recognized privacy standards:

Principle #1 Accountability - Algoma Manor Nursing Home is accountable for the personal health information of residents and has assigned accountability to manage and monitor privacy issues.

Principle #2 Identifying Purposes - At or before the time we collect your personal healthcare information, we are required to explain to you why this information is being collected. The information may be required for your care, to administer programs, services, conduct quality improvement and risk management activities, for teaching, fundraising, statistics, to obtain payment for your treatment and care or to comply with legal requirements.

Principle #3 Consent - Your consent, which can be either expressed or implied, is required for the collection, use and disclosure of your personal health information, unless the law permits otherwise.

Principle #4 Limiting Collection - Algoma Manor Nursing Home limits the collection of personal health information by ensuring you are only asked for necessary information.

Principle #5 Limiting Use, Disclosure and Retention - Personal health information will not be used or disclosed for purposes other than that for which it was collected, except with your consent or as required by law. If Algoma Manor Nursing Home uses your personal information for a new purpose, we will document this purpose and notify you.

Principle #6 Accuracy - Algoma Manor Nursing Home ensures that your personal health information is accurate, complete and up-to-date as is necessary for the purposes for which it is to be used. This minimizes the possibility of incomplete or incorrect information being used.

Principle #7 Safeguards - Algoma Manor Nursing Home has appropriate security measures and safeguards in place to protect your personal health information.

Principle #8 Openness - Algoma Manor Nursing Home's information practices and complaint processes are posted in public areas in the home. This information can also be obtained by contacting the Administrator.

Principle #9 Patient Access and Correction to Personal Health Information - You have the right to request access to your health records and, once given access, you also have the right to request a correction to that record if you believe that it is inaccurate or incorrect and provide the proof to correct it.

Principle #10 Challenging Compliance - If you have issues with our privacy practices you can address your concerns to the Administrator of the home. You may also contact the following:

The Corporate Privacy Office: ALGOMA MANOR NURSING HOME
145 Dawson Street
Thessalon, ON, POR 1LO
Tel: (705) 842 2840

The Information Privacy Commissioner for Ontario:

2 Bloor Street East, Suite 1400

Toronto, ON, M4W 1A8

Tel: (416) 326 3333

# <u>Power of Attorney</u>

It is strongly recommend that residents arrange to have legal Power of Attorney for Personal Care and Power of Attorney for Property at the time of admission. When completed, the home will require a copy.

The name and contact information of the Power of Attorney for Personal Care, Substitute Decision Maker, or responsible party is listed on the resident's file. Every effort is made to notify this person if a resident is injured or has a change in health status

The resident or representative must designate one primary contact and ensure that this information is kept up-to-date.

Remember: At times when the responsible party is out of town, an emergency contact shall be provided.

# <u>Trust Accounts</u>

Trust Accounts can be set up so that residents can securely keep and access their money within the home. The home will maintain a dedicated non-interest bearing trust account to which it will deposit money entrusted to it on behalf of residents (maximum \$5,000 per resident). The resident and/or Power of Attorney for Property may at any time request to see the account to verify resident spending. Trust account statements are sent quarterly to the responsible party.

#### Residents can access their trust account during the following hours:

Monday, Wednesday, and Friday between 9:00am and 12:00pm.

When a deposit is made to a trust account, you will receive a written receipt for all monies received. The trust account may be used for charges such as goods and services provided, upon written authorization that specifies what the charge is for.

If pocket money is important to the resident, we suggest that the residents keep no more than \$20.00 on their person.

# <u>Leave of Absence</u>

The resident/family or responsible party must notify the Registered Staff prior to the resident's departure and on the resident's return. Leave of absence policies are governed by provincial legislation. The policies are summarized below:

#### Casual

A casual leave of absence of up to 48 hours per week is available to residents of a long-term care home. Casual leaves are permitted throughout the year regardless of vacation or other medical leaves taken. For calculation of the period for casual leaves, the first day of the week is considered to be Sunday.

Where possible, two days notice should be given to the Registered Staff if the resident will be leaving the home. For each casual leave, a release of responsibility form must be signed by the person accompanying the resident prior to leaving and upon return.

These forms are located in the Information Centre's on each home area.



#### Vacation

A vacation leave of absence of twenty-one (21) days a year is available to residents of long-term care homes upon admission.

Vacation leave described here can be used only in the calendar year in which it is granted and is not cumulative. Casual leave of absence days may be combined with vacation leave to extend the period of time available. When the casual leave is combined with vacation leave at the rate of 48 hours per week, it is possible to have up to 31 days of combined leave once a year.

Our policy requires that all leaves of absence, including casual or vacation leaves, must be authorized by the resident's Attending Physician.

#### Medical Leave

A medical leave is a leave of absence for a thirty (30) day period, or less, for the purpose of continued hospital care. If the resident is unable to return to the home, the resident or responsible party must, on or before the thirtieth day of the medical leave, discharge the resident from the long-term care home. Both the home and the CCAC should be contacted by the resident or responsible party.

#### Psychiatric Leave

A psychiatric leave of absence is for a sixty (60) day period or less, for the purpose of hospitalization for assessment and treatment. This leave is for the purpose of psychiatric care, not medical care, and requires the attending physician's authorization, reason and anticipated length of absence from the long-term care home. If the resident will be staying beyond the allowed days, the resident is discharged from the home. Both the home and the CCAC should be contacted by the resident or responsible party.

During the above leaves, the resident remains obligated to pay for the same class of accommodation charges that was provided before the absence.

#### Final Discharge

Algoma Manor staff is sensitive to the grief that family and friends face when a loved one passes and we strive to be supportive and responsive to the needs of family and friends. When this occurs, the room must be made available for occupancy within 48 hours of final discharge. If family is unable to clear the room within this time period, our staff is available to pack and assemble all personal affects for pick-up by the family at their earliest convenience. There may be a fee for storage and/or disposal if a resident's belongings remain in the home for more than 48 hours.



# <u>Financial Resources</u>

Service Canada	1-800-277-9914
Old Age Security (OAS) http://www.hrsdc.gc.ca/en/isp/oas/oastoc.shtml	1-800-277-9914
Guaranteed Income Supplement (GIS) http://www.sdc.gc.ca/en/isp/pub/oas/gismain.shtml	1-800-277-9914
Allowance for the Survivor Program http://www.hrsdc.gc.ca/en/isp/pub/oas/allowsurv.shtml	1-800-277-9914
Canada Pension Plan (CPP) http://www.sdc.gc.ca/en/isp/cpp/cpptoc.shtml	1-800-277-9914
Canada Pension Plan Payment Rate http://www.sdc.gc.ca/en/isp/pub/factsheets/rates.shtml	1-800-277-9914
Sharing your Pension http://www.sdc.gc.ca/en/isp/pub/factsheets/sharing.shtml	1-800-277-9914
Involuntary Separation Settlement	1-800-277-9914
Widowed Spouse's Allowance	1-800-277-9914
Ministry of Finance	1-800-263-7965
Guaranteed Annual Income System (GAINS)  http://www.fin.gov.on.ca/english/tax/credit/gains/	1-800-263-7965
GAINS Benefit Rate Table http://www.fin.gov.on.ca/english/tax/notices/itrp/1934.html	
Ministry of Community and Social Services	1-888-789-4199
Ontario Disability Support Program	1-416-325-5666

Income Support Policy Directives

http://www.mcss.gov.on.ca/mcss/english/pillars/social/odsp-is-directives/ODSP\_incomesupport.htm

Income and Employment Supports Office Listing <a href="http://www.mcss.gov.on.ca/mcss/english/pillars/social/questions/odsp/about\_odsp.htm">http://www.mcss.gov.on.ca/mcss/english/pillars/social/questions/odsp/about\_odsp.htm</a>

Veterans Affairs Canada Department of Veterans Affairs http://www.vac-cc.gc.ca/clients/sub.cfm?
source=services/benefits/content

1-866-522-2122

# <u>How to Get Involved</u>

Algoma Manor strives to provide responsive services to meet or exceed the expectations of residents and those close to them. We believe family are important members of the care planning team and invite them to take an active role in the care planning process by sharing their knowledge of the preferences and life history of their loved one so that together we can plan for superior delivery of care.

# Care Conferences

Within six (6) weeks after admission, the care plan planning team meets to discuss the initial care plan for each new resident. The core staff members on the team consist of nursing, dietary, and programs with input from medical advisors, pharmacy, therapists and administration as needed. Families and residents are invited to the initial care conference, and annually, as you are considered partners in planning the best ways to provide care and support to each resident.

Any time there is a significant change in health, or other condition, we will review the resident's plan of care. Families can also call the Director of Care to request a care conference.

# Resident Handbook: Section II

Getting Involved with our Community

# <u>Resident's Council</u>

Residents' Council is established to provide a strong line of communication between the residents and administration to achieve many goals and provide suggestions for improving the quality of care. They are a group of resident's and/or their representatives who meet at least quarterly to discuss pertinent issues related to the home. Residents' Council has the mandate to advise residents about their rights and obligations under the Long-term Care Homes Act, 2007, sponsor activities for residents, and provide recommendations to the home regarding what residents would like to see to improve quality of care or the quality of life in the Home.



# <u>Family Council</u>

The Family Council is an organized, self-led, self-determining, democratic group composed of family and friends of the residents of the home. The Family Council has the mandate to provide assistance, information and advice to residents, family members and friends of residents. They also support activities for residents, collaborate with community groups and advise the Home of any concerns or recommendations. The Administration office is available to liaison to support and facilitate the council. Minutes of the Family Council meetings are posted on the Family Information Board. All family members and friends of residents are welcome to participate as part of the Family Council.

## <u>Opportunities for Improvement</u>

All concerns are treated confidentially and are followed up quickly to make any possible improvements. We have numerous ways for you to provide feedback to us and to voice any concerns you may have.

## Satisfaction Surveys

Satisfaction Feedback Surveys are conducted regularly throughout the year so each resident, family, and staff is provided with a confidential opportunity to formally evaluate our services. The results of these surveys will be reported back to the residents and families and are used to make improvements. Suggestions made on the satisfaction surveys are also used during Operational Planning to improve the quality of life for residents.

## <u>Management of Concerns</u>

#### How to Deal with an Urgent Concern

There are processes for obtaining information, raising a concern, lodging complaints or recommending changes regarding the Home and it's services.

We encourage residents and/or families to voice any of the above issues in the following way:

- 1. Discuss with the Registered Staff in charge of the resident's care
- 2. Discuss with the Director of Care or Associate Director of Care
- 3. Discuss with the Administrator of the Home
- 4. Discuss with the Resident's Council or Family Council

If the above interventions have still not resolved your concerns, you may contact the Ministry of Health and Long-term Care. They will conduct an independent inquiry into any complaint or concern a resident or family member may have.

The Ministry of Health and Long-term Care action line phone number is 1-866-434-0144 seven (7) days a week 8:30AM - 7:00PM. You may also contact the local and/or provincial consumer advocacy groups. Advocacy Centre for the Elderly: (416) 598-2556. Office for Senior Citizens Affairs: (416) 963-1038

## <u>Response to Complaints</u>

Every written or verbal complaint made concerning the care of a resident or the operation of the home will be dealt with as follows:

- 1. The complaint shall be investigated and resolved where possible and a response shall be provided within ten (10) business days of the receipt of the complaint. Where the complaint alleges harm or risk to one or more residents, the investigation shall commence immediately.
- 2. For complaints that cannot be investigated and resolved within ten (10) business days, an acknowledgement of receipt of the complaint shall be provided within ten (10) business days of the receipt of the complaint, including the date by which the complainant can reasonably expect a resolution, and a follow-up response shall be provided as soon as possible in the circumstances.

## Complaints to the Director

Written or verbal complaints may be made directly to the Ministry of Health and Long Term Care Director Performance and Compliance Branch. 55 St. Clair Ave., West, 8th Floor, Toronto, Ontario, M4V 2Y7. Telephone (416) 327-7461



# <u>Mandatory Reporting to the</u> <u>MOHLTC</u>

A person who has reasonable grounds to suspect that any of the following has occurred or might occur shall immediately report the suspicion and the information upon which it is based to the Ministry of Health and Long term care:

- 1. Improper or incompetent treatment or care of a resident that resulted in harm or a risk of harm to the resident.
- 2. Abuse of a resident by anyone or neglect of a resident by the licensee or staff that resulted in harm or a risk of harm to a resident.
- 3. Unlawful conduct that resulted in harm or a risk of harm to a resident.
- 4. Misuse or misappropriation of a resident's money.
- 5. Misuse or misappropriation of funding provided to the Corporation under the Long Term Care Home's act. 2007.



# <u> Zero Tolerance of Abuse/Neglect</u>

The policy of Algoma Manor regarding abuse is zero tolerance and it applies to all staff, volunteers, family members, and visitors.

All staff members have an obligation to report any incident or suspected incident of resident abuse. Employees who fail to report any incident or concerns will be disciplined. Algoma Manor will investigate and respond to all such concerns and complaints.

Every resident will be treated with courtesy and respect and in a way that fully recognizes the resident's dignity and individuality and to be cared for free from mental and physical abuse.

The full policy is posted and available in your Admission package of materials.

# Whistle Blowing Protection

Provincial legislation now guarantees whistle blowing protection. No person shall retaliate against another person, whether by action or omission or threaten to do so because:

- Anything has been disclosed to an inspector
- Anything has been disclosed to the MOHLTC including, without limiting the generality of the foregoing;
  - a) A report has been made under section 24, or the MOHLTC has been advised of anything mentioned in paragraphs 1 to 5 of subsection 24(1)
  - b) the MOHLTC has been advised of a breach of a requirement under the LTC homes Act 2007, or
  - c) the MOHLTC has been advised of any other matter concerning the care of a resident or the operation of the long-term care home that the person advising believes ought to be reported to the MOHLTC or
  - d) Evidence has been or may be given in a proceeding, including a proceeding in respect of the enforcement of the LTC homes act, 2007 or regulations or in an inquest under the Coroner's Act, 2007.



# Resident Handbook: Section III

Departmental Services

#### Dietary Services

Nutritious, attractive and appetizing meals are an essential part of the resident's wellbeing. Our four week seasonal menus, developed in consultation with Resident Food Committee members, are reviewed by our Dietitian to meet all Ministry of Health regulations.

All meals are served in our home-like dining rooms as we believe in the holistic benefits of socializing with others. For those who like to sleep in, they may choose a light snack from the family friendly area. The family friendly area is stocked 24 hours per day with snacks and beverages. Lunch and dinner include two entrée choices, offered verbally and visually. A variety of beverages and snacks are served midmorning, in the afternoon and evening.

Algoma Manor meal times are as follows (depending on resident area):

Breakfast: 8:30AM - 9:30AM Lunch: 12:00 - 12:15 NOON Dinner: 5:00PM - 5:15PM

Nutritional goals are developed by each home's Registered Dietician with input from the resident, family members, and the care team. For those requiring individualized therapeutic nutritional interventions, the Registered Dietician assess and develops a plan in partnership with the home's Physician.

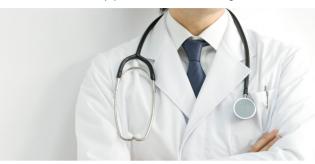
To maintain independence, an assistive device such as rimmed plates, special cups, and built-up utensils are available, where possible, for residents after being assessed by our Restorative Care aide and Occupational Therapist.

#### Bringing Food into The Home

Food and beverages are carefully handled in our home to prevent any possible foodborne illness or contamination. If you want to bring food and beverages into the home, please consult with the Director of Dietary Services prior to your visit. Some foods require refrigeration, special storage, or could be harmful for those on special diets or medications. We ask that no food be left in a resident's room unless discussed with the Registered nursing staff. Only non-perishable food should be brought in and must be stored in an airtight container and labelled with the resident's name and the date it was received.

#### Alcoholic Beverages

Families may provide alcohol if requested by the resident and authorized by the Physician. Responsible use of alcoholic beverages may be allowed with a Physician's written order. We ask that you cooperate with this policy as the mixing of alcohol with medications may produce severe allergic or adverse reactions.



#### Nurse Practitioner

Our Medical Director and Nurse Practitioners are available to serve the resident's medical needs. The home's Nurse Practitioners visits regularly and provides emergency coverage. Families wishing to connect directly with the home's Nurse Practitioners should speak with the Registered Nursing staff to make arrangements for appointments.

Residents can retain their own personal physician or registered nurse in the extended class, providing the physician or registered nurse in the extended class signs an agreement with the home. For further information contact the Director of Care.

#### <u>Nursing Services</u>

Registered Nurses, Registered Practical Nurses, and Personal Support Workers are available 24 hours a day, 7 days per week to provide care and assistance. A Registered staff member who is a Registered Nurse (RN) or a Registered Practical Nurse (RPN) oversees each resident home area. An RN or RPN is responsible for the day-to-day functioning of the home area as well as distributing medications and administering treatments. A Personal Support Worker provides direct care, such as bathing, grooming, toileting, mobility assistance and assistance with meals.

Our nursing services department uses a Primary Care model. This means that the resident will be assigned, as much as possible, a consistent primary caregiver for both the day shift and afternoon shift. The primary caregiver will provide consistency to the resident's daily routine. Research has shown that all residents benefit from a certain degree of predictability. A familiar face on a daily basis provides comfort to

someone who is experiencing various challenges of aging. The primary caregiver gets to know the resident in ways that allow us to individualize each resident's routines.

Contact the Director of Care during regular business hours if there are any questions about personal care.

#### Least Restraint Policy

Restraint is any device or action that interferes with a resident's ability to make a decision or which restricts their free movement. Restraint is a measure used to control a person's physical or behavioral activity or to control a portion of a person's body. A restraint may be physical, chemical, or environmental.

In every case, we view restraints as a last resort. If restraint is deemed necessary, our goal is to use the least restrictive form of restraint for the shortest period of time. The care team will try to determine the cause of the current situation and work with everyone to come up with alternatives. Consent to restrain is requested from the resident or substitute decision-maker. The decision to use any form of approved restraints is not taken lightly and is only used when other methods are ineffective. Our policy regarding restraint use can be obtained from the Director of Care.

Situations that may require the use of a restraint may include a resident harming themselves or others and causing damage to property. Strategies that have been found effective to decrease the use of restraint include increased family visiting during periods of instability, looking for cause of situation and addressing it, identifying pain or discomfort, providing rest during the day, adequate intake of food and fluids, frequent toileting, involving resident in activities.



#### Medications

All medications are administered by an RN or RPN, based on physician's order. Residents are not permitted to keep any medications in their rooms. This includes medicated skin preparations, eye or ear drops and non-prescription drugs. All of your medications, including herbal remedies and vitamin supplements, must be properly labelled in a standardized manner using the packaging system of the contracted PHARMACY. The pharmacist conducts medication reviews annually or when requested, for each resident.

#### Other Care Information

#### Laboratory Services

Laboratory Services are provided by LifeLabs, a contracted service provider. There is no charge to long-term care residents for these services.

#### Dentistry, Audiology and Optometry Clinics

The home will arrange for Dentistry, Audiology and Optometry clinics onsite. All fees and equipment costs are the responsibility of the resident when not covered by OHIP. If you are interested in any of these clinics, contact the Director of Care. Information about upcoming clinics will be posted in the Family Newsletter.

Staff can help arrange for appointments with community health care professionals in their community offices. Appointments with medical specialists can also be arranged through referrals from our physicians.

#### Toiletries, Creams and Lotions

For the safety of all residents we ask that you adhere to the following. Items for personal grooming that are acceptable in a long-term care home include:

- Alcohol free mouthwash
- Lotion
- Make-up
- Shaving Cream
- Shampoo and Conditioner
- Electric razors
- Non-aerosol underarm deodorant

Items that are **NOT** acceptable in a long-term care home include:

- All aerosol products like hairspray, deodorant, air fresheners (due to the sprinkler system)
- All products containing alcohol (mouthwash, aftershave)
- All types of powders as they cause a risk for falls and inhalation
- Disposable razors
- All cleaning products (Lysol, laundry detergents, fabric softeners, bleach, etc.)

Prior to bringing any items into our facility please speak with the RN or RPN on your home area; they will gladly discuss all alternatives.

#### Continence Care

For those residents who may require an absorbent product, the home provides a continence product at no additional cost. Algoma Manor provides TENA products, offering a wide range of absorbent pads and briefs to meet individual needs. Use of the proper fit and product will maintain better skin integrity, prevent leakage, promote comfort and prevent odor. TENA products are latex free. Care staff are trained to assess each person's individual need, assist with keeping a person as continent as possible along with appropriate toileting and choosing the most appropriate product to maintain comfort and dignity. Feel free to discuss individual needs with the RN or RPN on your home area.

#### Infection Control

Infection control programs are designed to prevent, identify and manage infections. The best method of preventing infections is by proper hand washing - "Just Clean your Hands". In order to protect residents from infections, staff wash their hands often, following the four opportunities for hand hygiene: before and after providing care to a resident, before meals and after using the washroom. We encourage residents and visitors to do the same. Hand sanitizing stations are placed at regular intervals in the hallways and in resident rooms. It is recommended that everyone use sanitizing gel prior to entering a resident room and upon exit as well.

#### Outbreaks and Immunizations

It is strongly recommended that family members and visitors do <u>NOT</u> visit during an outbreak when residents in the home are ill with respiratory or intestinal illnesses. The purpose of this is to protect the resident and families from illness and to prevent the spread of illness within the home.

Family members and visitors should not visit if they are exhibiting cold or flu like symptoms (i.e. runny nose, sneezing, fever, cough, vomiting or diarrhea). Similarly, children who have been exposed to chickenpox are also asked not to visit. Residents catch these infections easily, therefore annual flu shots are strongly recommended for all residents and for frequent visitors to the facility. Residents are also advised to have a pneumovax immunization.



### Recreation Therapy and Leisure Programs

The Recreation Department strives to provide high quality programs to meet the unique leisure needs of all residents. Recreation activities are offered seven days a week, at times convenient to residents.

Recreation activities come in many different forms, from individual visiting to large group programs, both within the facility and the community. Some examples of programs are picnics, barbecues, pet therapy, gardening, exercise, baking, current events, happy hour, musical entertainment, pub night, outings, theme dinners, movies, reminiscing, and mental gymnastics.

For details of each activities time and location, monthly calendars are posted in each home area on the resident information bulletin board.

Some of the events and activities have additional costs and the resident may be requested to help offset the cost involved (i.e. theatre tickets, wheelchair bus trip, etc.)

All residents are encouraged to participate in recreation activities of their choosing and to help plan future events. Family members are always welcome.

## Spiritual and Religious Care

We support each resident's right to celebrate his or her faith and will attempt to meet the spiritual needs of our residents, their families and staff members within their religious affiliation.

Church services are held weekly and for major religious holidays, with additional Bible study and hymn sings planned according to resident wishes. Pastoral visitors are available during times of illness, grief or palliative care.

Memorial services are held for the benefit of other residents, families and staff. The Pastoral Care Committee is made up of local clergy and resident representatives along with our Spiritual Care Coordinator, who plans our Pastoral Care program.



#### Volunteer Services

Our volunteer's contribution in enriching the lives of the residents at Algoma Manor cannot be overemphasized. Volunteers are here to enhance the quality of life and to support services to the residents. Besides giving individual attention to residents, volunteers help create a pleasant atmosphere and assist residents in a variety of ways. Families and friends are welcome and are encouraged to become a registered volunteer. For more information on these exciting opportunities to be involved in creating a community of caring, contact the Recreation Staff.

## Community Involvement

We encourage community involvement and attempt to strengthen associations between residents and the surrounding community. Relatives and friends are encouraged to visit and children are especially welcome, as well as family pets. Pets must be on a leash and proof of annual vaccination is required. Contact the Director of Care.

Efforts are made to involve residents in local community events by inviting community groups to visit the home, and planned community outlings.

### Physiotherapy

The home provides physiotherapy services at no charge to the resident, if the resident is eligible for physiotherapy services. All residents receive an assessment upon admission and will have a referral for physiotherapy if the resident meets the criteria of requirements for physiotherapy services. Physiotherapy helps to strengthen muscles, keep joints flexible and maintain physical wellbeing. The physiotherapist is required to follow the practice guidelines of their regulatory college and MOHLTC guidelines. Assessments for wheelchairs, seating, walkers, etc., can be arranged at a cost to the resident, should they choose to use the in-house consultant therapist, or they may choose a free assessment through the CCAC. If you have questions about physiotherapy services, please contact the Director of Care.

#### Restorative Care

The restorative care program strives to restore a person's functional status to their maximum potential. This may include programs such as ambulation, restorative dining, sensory stimulation, physiotherapy and occupational therapy programs developed on an individual basis by qualified personnel. Nursing, recreation and restorative care staff all work together to ensure that a resident is achieving their maximum benefit. Examples of restorative rehabilitation programs are ambulation, toileting, active and passive range of motion, dressing and communication.



#### Social Work

Social workers aim to help people cope with the challenges they may be experiencing as a result of a change in living situations, lifestyle and health status. Social workers help by assessing needs, identifying causes of stress, improving communication, enhancing coping skills, providing counselling, finding resources and advocating for people unable to advocate for themselves. If you are interested in social work services, contact the Director of Care

## Other Therapy Services

Additional Therapy services such as Occupational Therapy and Speech Language Pathology can be arranged by the home at the resident/family's request through the Community Care Access Centre, or arranged at a minimal cost to the resident should they choose to use the consultant therapist.

#### Foot Care

Algoma Manor contracts foot care services, a health professional with additional training in advanced foot care techniques. This service is available at a fee, which will be added to the monthly billing statement. Residents/families are required to sign a Foot Care consent authorization form for services to be initiated. A referral can be made on admission or by notifying the Director of Care, who will make the necessary arrangements.

### Hairdressing

Our hairdresser visits Algoma Manor at least weekly and more often if necessary to help residents' look and feel their best. Hairstyling and barber services are available at a reasonable fee, which will be added to the monthly billing statement. Hairdressing prices are located on the Family Information board. Contact the Office Manager for hair services. A signed authorization for Hair Services form is required to initiate the service.



#### Telephones

Telephone jacks are available in each resident's room. A dedicated phone number will be assigned. Outgoing calls will require dialing "8" first, followed by the number.

There is a charge for initial hook-up, a flat fee per month and long distance charges as incurred by each resident. These charges will be included on the monthly invoice. Hook up an installation procedures as well as fees can be discussed with the Office Manager. You are still required to bring in your own telephone.

#### Television/Cable/Radio/CD Player

Televisions are provided with full cable service in each home area lounge for resident's use. If a resident wishes to have a television with cable services in their room, the resident will be responsible for the cost of connection and cable fees. You are required to supply your own television. Contact the Business Office to arrange cable services. These charges will be included on the monthly invoice.

We ask that you respect the rights of other residents when using radios and televisions. earphones can be used to avoid disturbing roommates. Any electrical equipment brought into the home, including radios and CD players, must be checked by our Maintenance Department to ensure that it is CSA approved before using.

### Transportation and Escort Services

Residents who require medical appointments outside of the home will have to arrange for transportation and assistance as required. Families are requested to assist with transportation as much as possible. If this is not possible, transportation and an escort may be arranged by the home for an additional fee. The RN or RPN will review these expenses with the resident/family when arranging services. These extra costs will be added to the residents monthly billing statement. Residents/family must sign an authorization for this service in the Unfunded Services Agreement.

### Private Caregiver and Companion

Should you wish to hire a private caregiver or companion, please contact the Associate Director of Care to discuss our policy and procedure.



### <u>Housekeeping</u>

Regular housekeeping is important to ensure that the environment is clean, pleasant and safe. This includes daily cleaning of washrooms, emptying of garbage, general light cleaning and tidying of rooms. A more thorough cleaning is scheduled at regular intervals. If able, residents are encouraged to assist with routine housekeeping tasks. It is beneficial for physical conditioning and social interaction.

## Laundry

Laundry services are available seven days a week. All clothing articles should be machine-washable, able to be dried in commercial style dryers and clearly labelled with the resident's name. Please bring any new or unlabeled clothing to the nursing station and the RN or RPN will ensure that the items are permanently labelled. Some families

choose to launder the resident's personal clothing items themselves. This can be easily arranged but we continue to request proper labelling to prevent mix-ups. If families choose to launder clothing, we request that a covered laundry hamper be brought in and placed in the resident's bathroom.

Types of fabrics not suitable for our central laundry include:

- Wool and wool blends
- Silk
- Satin
- Suede
- Leather
- Fur
- Rayon
- Acetate
- Lace and lace edging with loose weaves

Any clothing with laundering instructions that state "No bleach" "air dry" "flat dry" or "dry clean only" are also not suitable. Should you choose to bring these items in, Algoma Manor, will not be responsible for any damages that may occur. Dry-cleaning services can be arranged by the home and the resident will be responsible for all costs.

#### Lost and Found

Clothing articles can occasionally be misplaced. If this occurs, we urge you to check the designated "LOST & FOUND" area. If articles are not found, please notify the RN or RPN immediately so we may search the home more thoroughly for the misplaced items.



#### <u> Maintenance Services</u>

Each nursing station has maintenance work order requisitions for repairs needed. All repairs will be attended to promptly. Residents are responsible for the costs of repairs to their own appliances and equipment.

# Resident Handbook: Section IV

Other Important Information

### Gifts for Staff

Our staff work very hard to provide caring attention and it is our pleasure to serve. It is nice to be thanked for extra effort; however, it is prohibited to give valuable gifts or monies to individual staff members as per our company policies. If you wish to show gratitude, may we suggest Thank You cards, donations to our staff fund or Christmas party or small gifts suitable for a group of staff (flowers, fruit, cookies, etc., are always appreciated).

### <u>Gifts for a Resident</u>

Suggested gifts for residents include:

- Toiletries
- Greeting Cards
- Costume Jewelry
- Washable housecoat or sweater
- Slippers
- Jogging suits
- Framed photos
- Large calendars
- Washable comforter
- Television
- Radio
- Lap Blanket
- Candies
- Cookies (if allowed)

The best gift of all is a visit from friends and family.

### <u> Mail/Newspapers</u>

Mail is an important way to keep in touch with family and the community. Personalized mail/newspapers will be delivered on a daily basis. Outgoing mail should be given to the Business Office located at reception by the front entrance. Newspaper delivery and billing should be arranged directly with the newspaper company.

# Tuck Shop

The tuck shop is located in the main-lobby. The hours of operation are posted at the tuck shop.

#### **Visitors**

Visitors are encouraged to sign in at the front entrance during every visit. This is to ensure safety in the event of a fire and to ensure resident privacy for those who do not wish or cannot have visitors due to illness. etc.

There are no set visiting hours. You are welcome to visit when you please. The outside doors lock for security reasons at 10:00PM. If you would like to visit after this time please press the nurse call button on the wall. If a resident's health condition becomes unstable or requires palliative care, loved ones are welcome to extend these hours after notifying the RN or RPN. Overnight accommodation is available on-site for family members who may wish to stay with a critically ill resident.

Friends and family are welcome to share a meal with the residents. Please notify the Kitchen 24 hours in advance. A reasonable fee will be charged per person per meal.



### Tips for Visiting in a LTC Home

- 1. Keep visits short and visit at a time when your loved one is functioning best. Several short visits tend to be better than one long visit.
  - 2. Bring in juice or tea and some cookies or fruit and have a "picnic" in a quiet place such as the lounge, den, café area or courtyard.
  - 3. Keep the conversation light. The stimulation of a few funny stories and a smile goes a long way to making a visit enjoyable.
  - 4. Reminisce about the early years and bring in photographs of family and friends. If the resident only wants to talk about home, find out what he or she remembers of home and continue the conversation based on these memories. Your loved one may feel better once they are reassured that home did exist and that their remaining memories are valid.
  - 5. They may be feeling insecure, lonely, sad, frightened or cold. Giving them a hug, a blanket or a cup of tea/coffee and just sitting with them may make them feel better.
  - 6. When visiting with a resident who is cognitively impaired, speak to them using short, simple sentences, slowly and clearly. Be patient and repeat your words, if necessary. Pets and children are great visitors.
  - 7. Read recent letters, cards, and newspapers to the resident or help the resident write letters or notes.
  - 8. Giving the resident a manicure, hand massage or back rub provides touch therapy and can be very effective in making them feel comfortable and safe.
  - 9. If the home has spa services, spend an hour with your loved on getting a manicure, pedicure, or facial together. This makes for a great gift as well.

#### <u>Outings with Family and Friends</u>

Family and friends are welcome to arrange outings with the residents. We do require that before leaving the building, the resident registers his/her name in the sign-out book located at the nursing station in their home area.

# Resident Handbook: Section V

Our Philosophy of Care

#### <u>The vision - Creating Communities</u> <u>of Care</u>

The Algoma Manor vision is to create communities of caring. The Algoma Manor Nursing Home is an integral part of the local community. We work with our community partners to create a vibrant and home like environment for residents and families.

The physical environment as well as the social ambiance of the home is structured to reflect a community setting with which residents can easily identify.

## Customer Service

We strive to meet and exceed resident, family, staff, volunteers and all other customers' expectations for service excellence. Residents and families are considered partners in care. We encourage your suggestions for improvement. We believe in continually strengthening a personal connection with every resident and family member. By getting to know more about your interests and wishes, we build connections that help you to feel "at home".

#### <u>Wellness</u>

Wellness is an underlying approach and philosophy that focuses on the whole person; a healthy balance of mind, body, and spirit. The Enabling Choices approach to wellness includes specific programs that promote the health and wellbeing of residents and family.

### The Care Team

Staff, families, and volunteers work together as a team to meet the needs of every resident. All residents have a consistent primary care provider on every shift that is responsible for meeting personal care requirements. Each home area has a Registered Practical Nurse or a Registered Nurse who coordinates the are for residents in that home area. Program and recreation staff offer and coordinate a choice of daily meaningful activities. Physicians visit regularly and are contacted as required. Other members of the health care team such as physiotherapists, dietitians and pharmacists also play a significant role in meeting the ongoing needs of every resident. Algoma Manor seeks opportunities to strengthen ties with the local community and encourages volunteers to participate in the daily activities of the residence.

#### <u>GentleCare</u>

Gentle Care emphasizes human values, connections and abilities that support a person's independence and dignity. The Gentle Care model focuses on resident choices, abilities, meaningful activities and relationships; it includes the resident and/or substitute decision maker in decisions about their care.

With our approach to care, we strive to assist residents to:

- -Improve participation in self-care activities
- -Maintain or improve the level of physical independence
- -Improve natural interactions with others
- -Reduce wandering and episodes of agitation
- -Improve resident & family comfort and peace of mind over care issues
- -Improve nutrition and hydration
- -Promote sleep and rest patterns that support individual needs
- -Create a home-like environment that residents can identify with
- -Increase and promote volunteer and community involvement

The basic premise of Gentle Care is that people, programs and the environment form the plan of care. People consist of everyone who is involved in the resident's life.

The includes but is not limited to:

- -Staff (housekeeping, dietary, maintenance, recreation, laundry, administration, and nursing)
- -Families and friends
- -Other residents
- -Volunteers
- -Students
- -Community organizations

In short, everyone in the residence has a part to play in each person's care and service, even if their contact is only a few minutes during the day.

Programs include all activities that the resident enjoys in a day, such as nutrition, hydration, rest, home life skills, music, exercise, outdoor programs, gardening, bird watching, etc. Something as simple as drinking frequent glasses of water is incorporated into a program to ensure that all aspects of care are provided.

## The 24-hour Nutritional Clock

Staff provides assistance as needed with activities of daily living (bathing, eating, dressing, grooming, etc.) at the convenience of each individual resident. Wake up times and breakfast times are flexible; a continental breakfast can be provided for early and late risers. A hot breakfast is provided at the traditional breakfast time.

Throughout the day, snacks and nourishments are available in family friendly kitchens on every home area. The provision of nutritional intake is available to the residents 24 hours a day. Adequate nutritional boosts are spaced regularly throughout the day and evening. Night time snacks are also available for residents who wish to have a late snack.

#### <u>Hush no Rush</u>

Algoma Manor encourages all staff and visitors to use a calm and gentle approach when interacting with residents. We try as much as possible to eliminate noise, rush, glare and confusion to create a quiet, gentle atmosphere for all residents to enjoy. There are no loud call bells ringing and no overhead paging. Some home areas have doors that are secure to keep each home area quiet and private. Staff and families use a key code to enter and exit, eliminating unnecessary alarms. Staff carry pagers that are connected directly to the call bell system. Registered Staff carry portable phones. All these systems were put into place specifically to reduce noise and confusion in the home areas.

# <u>Reminiscing - Joining their Journey</u>

Everyone loves to reminisce about past memories. However, for the resident with dementia, the present can be a confusing place. Memory loss can diminish the ability to look forward to the future and past memories may only be accessed with help. Seasons can become meaningless, the normal cycle of the day becomes confused, and the individual may not remember personal history accurately but may retain remnants of the past. The resident may also have deceased knowledge of current events.

Staff and family members are encouraged to travel back to the period in time that the resident wants to remember. Conversations can center on pleasant news, events, and happenings in that time frame.

Relating to pleasant memories can help make a connection between the resident and

family member. Using photos and talking about pleasant memories, the person with memory loss can be drawn into a conversation in which he can participate. The unhappy subjects are subsequently avoided minimizing frustration and promoting wellbeing.

### GentleCare Programs

Daily care is designed to assist each resident to perform normal activities of daily living such as, eating, dressing, grooming, toileting and bathing on the resident's schedule, rather than the staff's schedule. For example, if the resident prefers to bathe in the evening, this request will be accommodated.

The busy routines of the day may leave some residents feeling tired, so short frequent rest periods throughout the day may be helpful. Not only do short naps replenish depleted energy reserves, but they also decrease episodes of agitation and aggression. We all cope better when we are well rested.

Residents are invited to join in a variety of activities that are suited to their interests and abilities. Even simple activities can provide incredible meaning to the resident who may be gradually losing their ability to relate to the larger community.

These activities may include:

- -Talking
- -Laughing
- -Reminiscing
- -Walking
- -Dancing
- -Singing
- -Working
- -Praying

Families can assist in these simple activities to the extent they feel comfortable. Reading to your family member, having them watch you perform a craft, play a musical instrument, singing family favourites, going for a stroll outside, giving them a manicure or a foot massage, assisting them to make their bed or fold some towels, sharing a glass of water with them; all have therapeutic value.

Residents often enjoy performing home-like routines and chores and may assist with cleaning off tables in the dining room, folding sheets or towels, sweeping the floor, washing some dishes, and helping with a baking activity or even making their own bed. Activities are incorporated into the daily living of the residents with a focus on self-care

activities. communication, family intimacy, relaxation, stress reduction and recognition of former life roles. Fun and entertaining activities are also provided in a group setting enhancing social interaction.

For more information on the Gentle Care model you may find Moyra Jones' book of value. Gentle Care: Changing the Experience of Alzheimer's Disease in a Positive Way. Richmond, B.C., Chelsea Printers (Available at Chapters Bookstores).

#### <u>Wellness</u>

Our wellness approach supports residents and their families to:

- Adopt or maintain healthy choices to optimize abilities, personal growth and a sense of overall wellbeing.
- 2. Celebrate and respect individual cultures, values and experiences.
- 3. Nurture the mind, body, and spirit

Wellness is promoted through the following initiatives:

Optimizing Existing Abilities: Families are invited to work in partnership with staff from all disciplines to be involved in care conferences and care planning to ensure that each individual plan is not only based on the resident's physical needs, but includes their psychosocial, spiritual, emotional, environmental, and intellectual needs as well. We need your help to understand personal preferences, lifestyle choices and past history.

Professional consultation and therapy intervention is available to promote independence and minimal sense of helplessness. Wherever possible, staff assist residents to actively participate in activities of daily living such as walking, eating, brushing their teeth, dressing, and exercising as long as they can continue to do so.

# <u>Meaningful Activities</u>

Families and residents are encouraged to fill out the Getting to Know You Form so the staff gain knowledge about the resident's past occupation, hobbies, awards, talents, volunteer work, etc. Through our Resident Ambassador Program, staff encourage residents to continue to use talents within the home. This may involve serving on the resident welcoming committee, teaching skills to others, or helping out so that a sense of community is created. For example, a person may be able to assist in minor repairs within the home, provide friendly visit to others, or assist with recreation programs. The more staff know about the resident, the better chance they have at finding activities that will be of interest to them.

# Resident Handbook: Section VI

Safety and Emergency Procedures

### <u>Building Security</u>

For the safety and security of our residents, specific resident home area doors and the elevators are alarmed to prevent unauthorized entry or exit. Please use the main entrance doors to enter or exit the facility and be mindful of confused residents who may try to exit with you. In an emergency, staff will provide direction to use alternative exits and/or stairways.

### <u>Location and Operation of Call</u> <u>Bells</u>

Each resident's room is equipped with a call bell located at the head of the bed. Each bathroom has a call bell and every common space has a call bell. To use the call bell push the red PUSH button and a signal will go off at the nurses' station/staff pagers/telephone. A staff member will respond as guickly as possible.

#### Fire Regulations

Please take a moment to get familiar with our fire safety procedures. The home's Emergency Plan is tested on a regular basis. Fire drills are conducted on each shift each month for the safety of residents and staff. Fire exists are clearly indicated within the facility. Please cooperate with the requests of staff members during emergencies. There may be several important reasons why a request is made of you immediately, with little time for a full explanation.

The external Fire Access route is a NO PARKING zone. Signs are posted clearly posted and the routes must be kept free to allow access by emergency vehicles.

#### Emergency Preparedness Plan

In conjunction with local and provincial authorities, the home has prepared and maintains an Emergency Preparedness Plan, which would be implemented in the event of a major crisis. The plan is tested regularly and staff are trained in emergency preparedness.

#### <u> Emergency Response - Residents & Visitors</u>

#### Upon Hearing the Fire Alarm

#### Residents

- If you are in your room, remain there
- If you are in the hallway near your room, go to your room and remain there
- If you are in a community room and it is safe to do so, remain there or move to a safe area
- Close doors to the area you are in to help keep smoke and fire out
- Await instructions for evacuations

#### Visitors

- Stay with the resident you are visiting
- Close doors to the area you are in to help keep smoke and fire out
- Follow alarm instructions for residents
- Await further instructions from staff

#### If You Discover a Fire

#### Residents

- Leave fire immediately
- Close all doors behind you to confine smoke and fire
- Sound alarm and/or alert staff
- Await instructions for evaluation

#### Visitors

- Assist anyone in immediate danger to move to safe area and remain there
- Close all doors behind you to confine smoke and fire
- Await instructions from staff
- If instructed assist with evacuation

# DO NOT USE ELEVATORS CAUTION

If you encounter smoke in the corridor or stairway, use an alternative exit of if all stairways are affected, it may be safer to stay in your area.

REMEMBER: ALWAYS REMAIN CALM

Thank you for the opportunity to share information and care philosophies with you regarding Algoma Manor. We hope that this information will help you to understand the specific strategies and signature programs that we enact to create our communities of caring.

It is because of your involvement as a family member/caregiver as well as our compassionate staff that we are able to be successful in ensuring respect for individual needs and preferences of residents and families make our home a true community of caring. Our Enabling CHOICES philosophy of care provides choices for daily living, while ensuring that the quality and level of care is consistent.

We hope that you will have a better understanding of the care your loved one will receive through the information provided in this Resident Handbook. Please do not hesitate to contact any of the members of our leadership/care team should you have any further questions.





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