

## Faith Manor



## Information

## Grace Manor



## Handbook

# For Residents and Families

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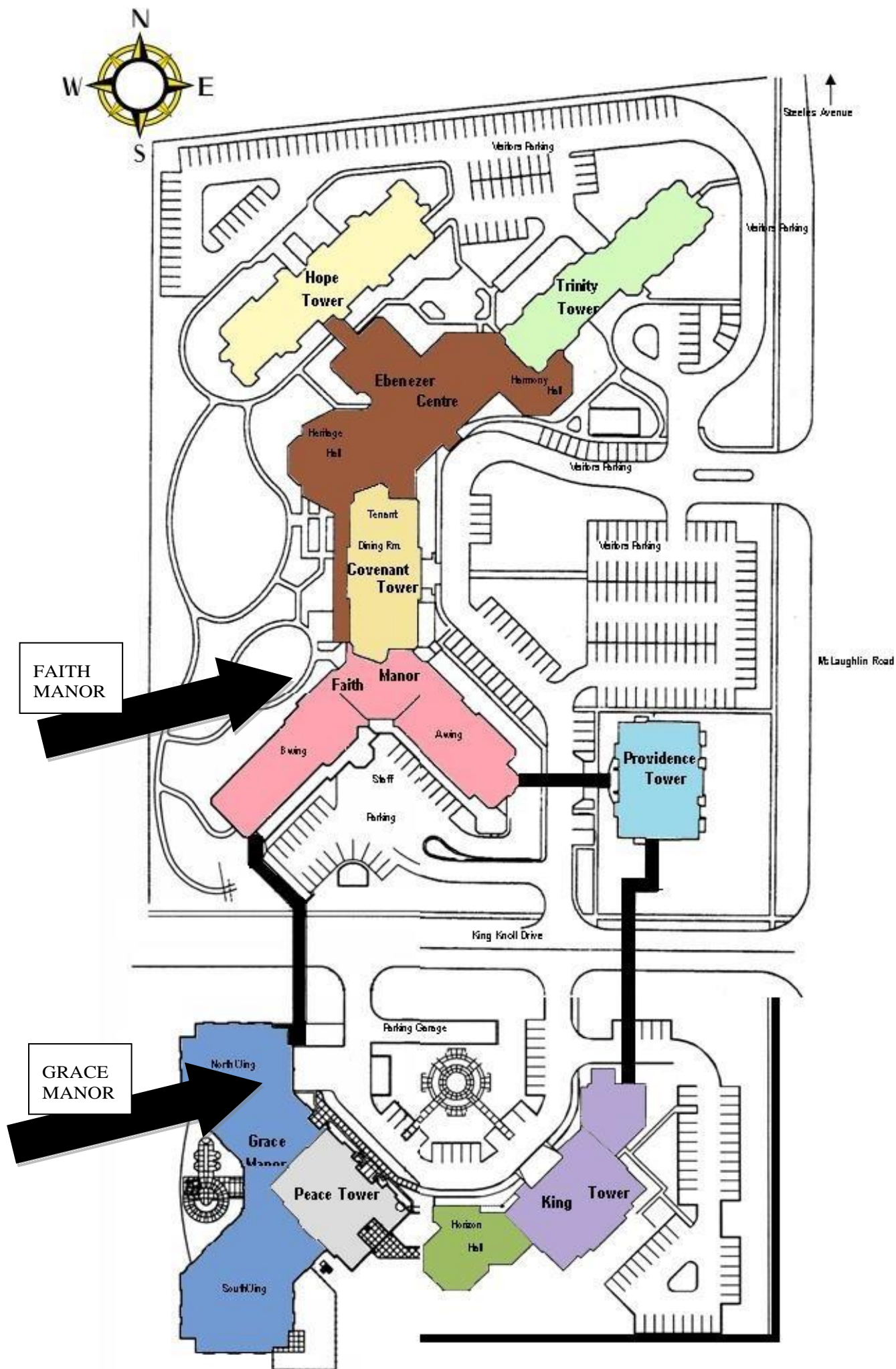
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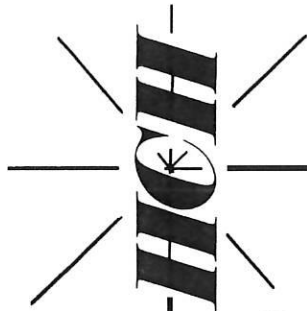
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# Holland Christian Homes Inc.

7900 McLaughlin Rd. S., Brampton, Ont. L6Y 5A7  
Telephone: (905) 463-7002 ♦ Fax: (905) 459-8667 ♦ web site: [www.hch.ca](http://www.hch.ca)

Dear Resident and Family Member(s):

All of the staff at Holland Christian Homes wish to welcome you to our long-term care facilities. We hope that you will consider this your home once you have made some adjustments to your new environment. You – as a resident ... are of vital importance to us – in ensuring that your general well-being is our priority at all times. Your family members and friends are invited to take part in Manor in which you reside – and we welcome them to visit and enjoy your home as well.

We understand that this is likely one of the biggest adjustments that you will have to make in your lifetime – especially as a result of having reached a time in your life when you need some extra assistance with your care. The process of admission to long-term care is complicated and can be very overwhelming for you and your family at this time. We have provided you with this ‘welcome handbook’ to help you with information about the Manors ... and hopefully will help to answer some of the many questions you may have.

There is so much new information to ‘take in’ at admissions time; therefore, we hope that you find this handbook helpful when you need to refer back to something that may have been discussed – either for reference purposes or to ask staff questions for further clarification.

Please assist us to help you to adjust to your new home. We want to come together as a team that works in your own best interests and to the greatest of our capabilities within this environment.

It is our privilege to welcome you to Holland Christian Homes and thank you for your trust by choosing our facility to help provide you with excellence in care.

*May our gracious God bless you during your stay with us ...*

From the Management

*Towers*

*Trinity*

*Hope*

*Covenant*

*Providence*

*King*

*Peace*

*Long Term*

*Care*

*Facilities*

*Faith*

*Manor*

*Grace*

*Manor*

## **Message from the Medical Staff**

Moving to a long term care home is a difficult decision for both the resident and the family as it is usually the result of a significant change in health status and a loss of the independent ability to perform the activities of daily living. It involves a major change in the way of life and it often takes a considerable time to adjust to the new environment. Residents are often fearful of the loss of independence that this involves and family members often feel that they have failed to provide care for a loved one.

Nursing homes exist to provide the 24 hour skilled nursing care that residents require that even the most dedicated families cannot provide. Nursing homes also provide physiotherapy, occupational therapy and other rehabilitation therapies along with the services of professional dietitians and social workers. However nursing homes do not provide many of the services of an acute care hospital. Physician visits are usually weekly unless an acute medical emergency occurs, and an on-call physician is always available. Laboratory tests are also scheduled weekly except in unusual circumstances. Access to X-rays is limited to portable X-ray equipment and more advanced imaging requires transfer to hospital.

Residents may be transferred to hospital if a major change in health status occurs and it is determined that this will be of benefit to the resident. It should be pointed out however that transfers to hospital can have negative implications. The unfamiliar caregivers and surroundings may result in increased confusion or delirium and the resident may be exposed to drug resistant organisms in the acute hospital setting. Due to overcrowding in emergency departments residents may develop bedsores from lying for prolonged periods on hard stretchers. Unfortunately survival rates for nursing home residents admitted to acute care hospitals are depressingly low and so careful consideration of the risks and benefits is necessary before transfer to hospital. On-site treatment is often appropriate for many conditions including lacerations, infections such as pneumonia and urinary tract infection, and most neurological conditions including stroke and head injury.

On admission to long term care residents are often taking many medications prescribed by their previous physicians along with over the counter medications and herbal products. Although these have often been used for years without apparent harm, they may no longer be appropriate or necessary. The risk of drug interactions increases with the number of medications used and the attending physician and pharmacist review all medications and recommend changes as necessary. As a general rule changes to medications are made slowly so that changes in the resident's physical or mental status can be monitored.

A post admission conference is held within a few weeks of admission so that any issues related to the residents care can be discussed by the family and the caregivers. Physicians attend these meetings if there are significant medical problems or at the request of residents or family members.

At Grace Manor and Faith Manor we strive to provide compassionate skilled nursing and medical care that is appropriate to each resident's condition and we welcome the help provided by families to achieve that goal.

### **Holland Christian Homes Ownership Information**

Legal Name: Holland Christian Homes Inc.

Ownership: Owned by the Members of the Corporation.

Operated by a Not-For-Profit Board of Directors.

Address: 7900 McLaughlin Road South,  
Brampton, Ontario L6Y 5A7

Telephone 905-459-3333 Fax: 905-459-8667

### **Introduction and Welcome**

Holland Christian Homes has two manors, Faith Manor and Grace Manor. Even though they are both at Holland Christian Homes, they are, by government standards, two separate and distinct nursing homes.

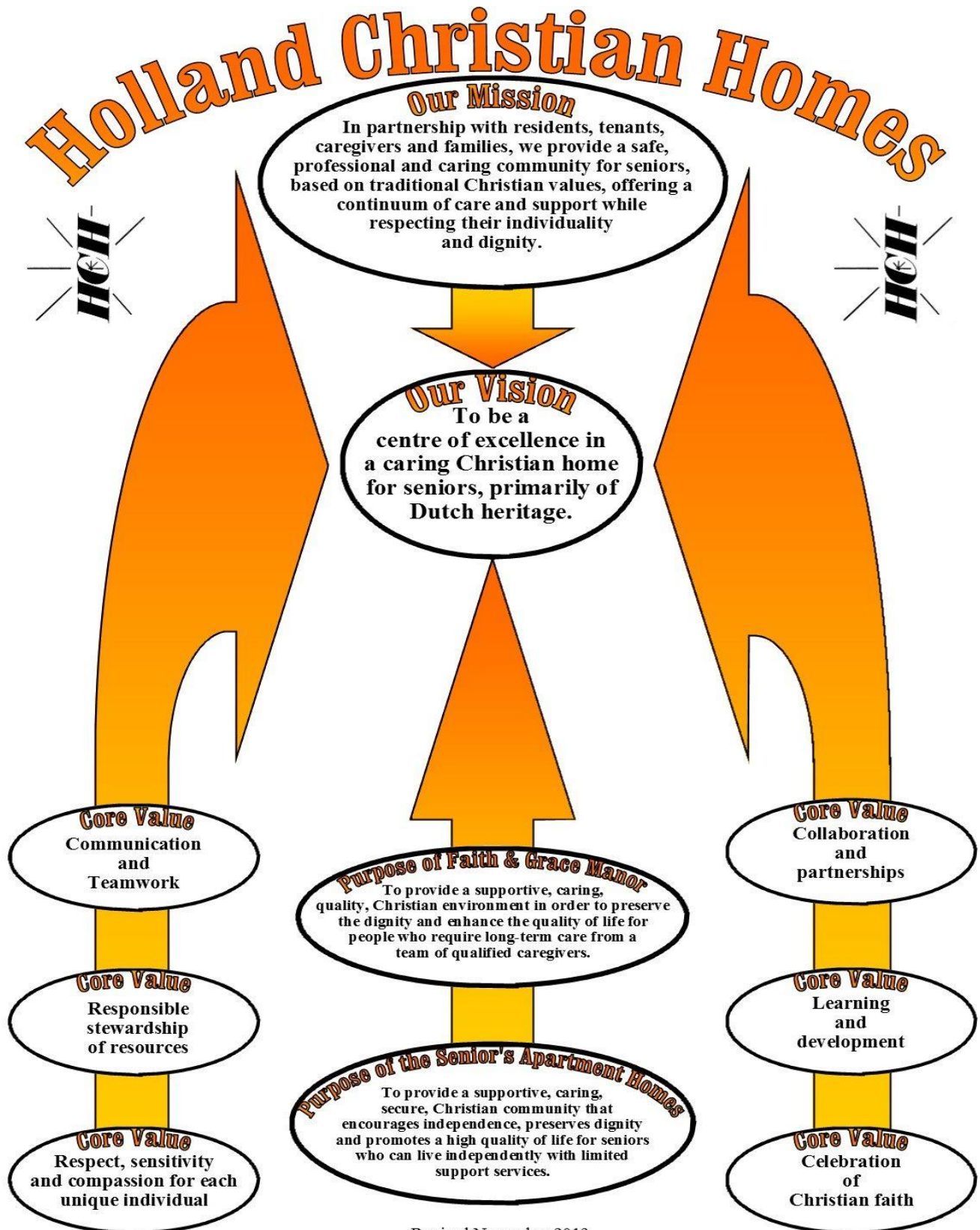
***Welkom in Holland Christian Homes! Indien U informatie in de nederlandse taal wenst, laat het ons weten. Hartelijk dank!***

***Bienvenue a Holland Christian Homes! Laissez-nous savoir si vous voulez qu'on parle en francais. Merci!***

### **History of the Manors**

Being sensitive to the needs of our members and the Christian community, in 1985 Holland Christian Homes' Board of Directors built Faith Manor and in 2002, Grace Manor opened its doors. Faith Manor and Grace Manor are fully accredited health care facilities serving 120 residents in each home. Admission for Faith and Grace Manor requires meeting the Ministry of Health qualifications. All funding for Faith Manor and Grace Manor is determined by the Ontario Ministry of Health with the cost of care being shared by the Ministry and the resident. Care is provided according to the assessed needs of the resident.

## Mission and Core Values



## **Scope of Service**

Holland Christian Homes is comprised of two Long Term Care Facilities (Faith Manor and Grace Manor) of 120 beds each and six senior's apartment towers totalling 656 apartments. More information about this continuum of care organization can be found on our website at [www.hch.ca](http://www.hch.ca).

We provide our seniors with care and services in accordance with the Long-Term Care Homes Act, 2007 and associated Regulation 79/10, as well as other applicable legislation.

We service the Brampton area in the Central West Local Health Integration Network; however admissions are not restricted to this area. Admissions are arranged through the Community Care Access Centre of Peel, 199 County Court Blvd., Brampton, Ont. L6W 4P3 Telephone: 905-796-0040.

Faith and Grace Manors provide long term care home services that include 24-hour personal and nursing care, meals, snacks, laundry, housekeeping, rehabilitation, medical care, social and recreational activities as well as the provision of a safe, comfortable, home-like environment.

The Homes do not provide special one-to-one nursing, except in unusual circumstances, and then only for a limited period of time. The Administrator and Director of Resident Care of the Home must be informed should the Resident or family choose to hire additional caregivers for private and individualized care of the Resident.

There are secure-care Resident Home Areas controlled by keypad access to ensure the safety of those Residents living there. We ask that all visitors to the Home be careful when entering or exiting these areas and ask for staff assistance before assisting Residents in or out of these areas.

Social work services are available Monday through Friday through a fulltime staff shared between the two homes.

A fulltime Behavioral Support Nurse (BSO) is available in each Manor to support appropriate care-planning and care provision to residents with responsive behaviours. The BSO Nurse supports staff through the completion of psychogeriatric assessments and subsequent training for staff on best care approaches.

In order to provide comprehensive services, Faith and Grace Manors also access additional contracted services as necessary.

## **Accommodation**

Faith Manor is a two-storey structure consisting of one (1) 60-bed secure Resident Home Area (RHA) called Faith Manor 2, and one (1) 60-bed Resident Home Area called Faith Manor 1. 60% of Resident rooms are private with an ensuite washroom and 40% are basic (2-bed rooms) with an ensuite washroom.

Grace Manor is three-storey structure consisting of five Resident Home Areas (RHAs). 60% of Resident rooms are private with an ensuite washroom and 40% are basic (2-bed rooms) with an ensuite washroom.

Each Resident Home Area has its own dining room and server, activation, lounge, sunroom and staff support spaces.

The Manors attempt to make suitable placement when Residents are sharing accommodations with others, but cannot guarantee roommate compatibility.

Every effort is made to accommodate spouses who wish to share a room based on availability. All Resident rooms, washrooms and amenity spaces are equipped with a nurse call system. When the Resident pulls the cord, a signal sounds at the Nursing Station and a dome light comes on outside the Resident room. Staff must come to the room to cancel the call and the dome light. All exterior doors are on an alarm system that is connected to the nurse call system. Stairwell doors have key fob access only. Resident Home Areas provide a secure environment for cognitively impaired Residents who wander.

**All rooms are furnished with:**

- an electric hospital bed (regular or adjustable head and foot) and pillows
- comfortable mattress with waterproof cover
- adjustable bed rails (if required)
- lounge/guest chair
- night table
- garbage can
- The resident's name is posted outside their room
- All rooms have connections for telephone and cable TV.

**Goods and Services included with Accommodation**

The following list provides information about the goods and services included in basic or preferred accommodation:

1. Nursing and personal care on a 24-hour basis, the administration of medications, and assistance with activities of daily living (including two baths or showers per week).
2. Basic nail and foot care is provided by PSW's during bath-time and/or by one of our Registered Practical Nurses (RPNs). Should additional podiatry services be required beyond the scope of our RPN, we will refer residents to the Podiatrist or Chiropodist of your choice. The Resident is responsible for any fees incurred.
3. Medical care and restorative care as available in the home
4. Certain medical supplies and nursing equipment that are necessary for the care of the resident
5. Supplies and equipment for personal hygiene and grooming
6. Certain equipment for the short-term use of the resident
7. Meal service, hydration and meals (three meals daily, snacks between meals and at bedtime), special and therapeutic diets, dietary supplements and devices enabling residents to eat with minimum assistance
8. Social, recreational, spiritual and physical activities and programs
9. Laundry (linens: bedding and towels), including labelling of personal clothing

10. Bedroom furnishings, bedding and linen
11. Cleaning and upkeep of accommodations
12. Maintenance of a trust account on the resident's behalf
13. Information package for residents
14. Prescription pharmaceutical preparations listed in the Ontario Drug Benefit Formulary (the government requires residents to pay a small co-payment)
15. Special preparations or medical devices that may be obtained from the Ontario Drug Benefit Program as interim non-formulary benefits.
16. Insured devices, equipment, supplies and services that are available to the resident through certain programs, such as the Ontario Assistive Devices Program (the government covers part of this cost and residents must pay the rest)
17. Non-prescription drugs, medication and treatment products, and supplies obtained through Ontario Government Pharmaceutical and Medical Supply Services upon request

**Note:** The Resident (or Power of Attorney for Property/ Guardian/ Trustee on behalf of the Resident) may purchase additional goods and services from the Home under a signed agreement.

## **What to Bring with You**

### **Clothing / Laundry**

Residents supply all their own clothing. The staff will arrange to have the Resident's name marked on all items when they arrive. When purchasing new clothing, please place the clothing in a bag clearly marked with the name of the Resident and provide to staff who will have it labeled.

Laundry Services – Linens (bedding and towels) are provided and laundered daily. All personal clothing is laundered daily and delivered back to the home areas every second day. Clothing is laundered free of charge, but you are responsible for looking after any dry-cleaning needs. All clothing should be machine washable and permanent press. Wool clothing shrinks in our industrial machines and not recommended.

We do not provide an ironing service. If you require special adaptive clothing, we can provide you with a list of vendors. Various clothing companies host sales at the Home three to four (3-4) times a year for your convenience.

Residents and families frequently ask what types of and how much clothing to bring. The style of clothing is completely up to you, but as outlined above, your every day clothing must be of "wash and wear" material. You should bring at least seven (7) seasonal outfits of clothing. If the resident is incontinent, then an additional four (4) sets of seasonal clothing should be available. Storage at the Home is limited; therefore, families should be prepared to store off-season clothing and are responsible to keep the room free of clutter.



## **Lost Articles**

All Resident belongings should be marked. This includes pictures, photographs, furniture and equipment. Staff makes every effort to ensure that laundered articles are returned to the appropriate Resident, however, on occasion, items do go astray. This is usually because items are not marked, labels have come off, items have been placed on the wrong laundry cart in error or articles of clothing are returned to another resident in error.

If you are missing an item, please notify the nursing staff who will coordinate with laundry and housekeeping departments to look for the item. It sometimes takes a week or two to locate an item, but our experience has been that lost articles do eventually surface. We have a Lost & Found area which you could check in the event that the item was not marked or the label came off in laundering; please ask staff to assist you. If you find an item not belonging to you in your room, leave it with a note at the Nursing Station. Feel free to come to the laundry room at anytime to learn more about laundry services or to check for any lost items (located in the basement of Peace Tower).

## **Eyeglasses and Dentures**

Please arrange to have these marked with your name BEFORE admission. Arrangements can be made by the nursing staff for an Optometrist or Denturist to visit the Home to do minor adjustments and repairs for a nominal fee. Staff will always try their best to be careful and mindful of these items, however in the event that an item gets lost or broken; Holland Christian Homes cannot assume responsibility.

## **Medical Supplies and Nursing Equipment**

- Medical supplies and nursing equipment necessary for the care of residents is provided by the home, including supplies for the prevention or care of skin disorders, continence care products, infection control, and sterile procedures.
- Medical devices, such as catheters, colostomy and ileostomy devices.
- Supplies and equipment for personal hygiene and grooming, including skin care lotions and powders, shampoos, soap, deodorant, toothpaste, toothbrushes, denture cups and cleansers, toilet tissue, facial tissue, hair brushes, combs, razors/shavers, shaving cream, feminine hygiene and incontinence products.
- Equipment for the general use of residents such as toilet aids and other self-help aids for the activities of daily living.
- Non-prescription drugs, medication and treatment products, and supplies obtained through Ontario Government Pharmaceutical and Medical Supply Services upon requisition.

If you have any questions or concerns regarding the nursing care or service, please speak to the Charge Nurse.

## **Prevention of Needlestick Injuries**

Holland Christian Homes thrives to maintain the health and safety of all residents, staff and visitors to our home. Needlestick Injury Prevention is a serious concern for the employees of our home. When residents move into our Long Term Care Home, nursing staff will take on the responsibility of completing diabetic glucose testing along with insulin injections. Residents are NOT to self test themselves if they are diabetic. This practice allows the nursing staff to safely dispose the needles as required into the Yellow Disposable Needle Containers - in every circumstance.

### ***\*For safety reasons:***

- ***We would kindly ask that families / POA's please take any glucometer testing units / syringes home.***
- ***Please do not leave any of these items in the resident's room or by the bedside.***
- ***If any family member or visitor must test themselves while at HCH, please ensure that you speak with the nursing staff / RN / RPN on the unit so that you can safely discard any needles used into one of the Yellow Disposable Needle Containers available on the Resident Home Area units. Do not ever dispose of such items into the resident garbage.***

## **Furnishings**

Each resident is provided with a bed, a small bedside night table (top drawer can be locked\*), a chest of drawers and a chair.

Upon receipt of the key to the locked drawer, residents/family members are to ensure its safekeeping and return the key when the room is vacated.

We encourage our residents to help make their rooms look homey. If you wish to bring a few favourite items or small articles of furniture to personalize your room, you are most welcome to do so. Appropriate items include:

- a favourite comforter for your bed (do not bring feather comforters or down-filled duvets as they do not wash well)
- pictures for your walls
- a small easy chair - preferably vinyl or leather for ease of cleaning
- a small television, a radio, etc. (please provide ear phones)

Grace Manor only - outside each room, in the hallway, is a locked glass display box that can be used to help residents identify their room and display something special to them. This is shared by both residents in a standard room.

### ***\*For safety reasons:***

- ***We do limit the amount of furniture and other personal belongings that you may keep in your room. You, your roommate and staff must be able to move about the room safely. Resident room sizes do not accommodate love seats, dining room tables or large dressers. These also pose a housekeeping problem as staff cannot move them to clean properly.***

- *Carpets and area rugs are not permitted as they pose a risk to residents for falls and create an infection control issue. They also pose a safety issue when mechanical lifts are required for resident transfers.*
- *All electrical appliances (i.e. lamps) must first be inspected by our maintenance staff*
- *Residents are not permitted to have kitchen appliances (kettles, toasters, refrigerators, coffee machines, etc.) in their room (A fridge, microwave and kettle are available in the home in either the activity rooms and/or servery for resident use).*
- *Surfaces of all furnishings must be intact (free of cracks) and in a good state of repair. Arrangements for removal (and any associated costs) of furniture is the responsibility of the Resident.*
- *Placement of furniture must allow housekeeping and personal care staff the ability to perform their work safely. Families and Residents are responsible for keeping the room free of clutter.*

### **Heating / Cooling**

Grace Manor – All rooms are individually heated and cooled with individual heat pumps which can be controlled by the residents through their thermostat in the room.

Faith Manor - All rooms are heated through baseboard heating and cooled by a central air conditioning system.

*\*For safety reasons:*

- *Please keep furniture and all other items away from the baseboards due to fire safety.*

### **Wheelchairs/Walkers, etc**

Faith and Grace Manor have a supply of ‘short-term loaner’ wheelchairs and walkers that are available for use on an interim basis. If you require these articles on a permanent basis, they must be fitted to your specific requirements and staff will assist you with arranging the assessment and purchase of these items. There is also funding available through the Ministry of Health’s Assistive Devices Program (ADP) if you meet criteria. Holland Christian Homes assumes no responsibility for any injury that occurs due to the resident using a loaner chair or other such mobility device.

Equipment for the general use of residents, including wheelchairs, geriatric chairs, canes, walkers are provided **for short term use only** (maximum 3 – 4 weeks). Should a resident require equipment for longer than 3-4 weeks, the resident/ family/ substitute decision maker will be required to purchase/cover all costs for such items.

Insured devices, equipment, supplies and services available to residents through other programs such as the Home Care Program and Assistive Devices Program (ADP). Our physiotherapy provider will provide ADP Seating and Mobility Assessments at **NO COST** to the Residents at Holland Christian Homes.

## **Health Cards**

Health Card numbers are required for any hospital or specialist visits. To ensure that it is available when needed, we ask that you bring your Health Card in at the time of your admission and copies of it will be taken to keep on your chart. Please inform us immediately of any changes or version code updates to the card.

## **Personal Services Available**

### **Hairdresser/Barber**

On-site Hairdressing/Barber services are available in the home. Appointments should be made in advance at the Beauty Salon. Residents can pay the Hairdresser directly for these services or authorize payment deduction from their Accommodation or Trust Account. Hours of Operation are posted on the Beauty Salon doors.

### **Telephone**

Arrangements can be made with Holland Christian Homes to install a telephone in your room. The monthly rate for this service is the responsibility of the Resident. Just provide a phone and plug it in. Once you sign the telephone contract, HCH staff will begin to set up the telephone line for you. If you change rooms, charges may apply. If you choose not to have your own personal phone, you may use the phone at the Nursing Station. Please have a nursing staff member assist you.

Please note: if you are moving into the Manor from a house or apartment outside of Holland Christian Homes, you can arrange to keep your current telephone number and have it ported over to the Manor; however an additional fee will apply for this service. Please inform us as soon as possible or while the admission is being arranged.

### **Mail**

Magazines and newspapers are delivered to the resident directly. All other mail is redirected to the person listed as "Contact One" or "Billing Contact" on the admission sheet. We encourage all mail to go directly to the Power of Attorney whenever possible.

### **Cable**

Arrangements can be made with Holland Christian Homes to install cable in your room. The monthly rate for this service is the responsibility of the Resident. If you change rooms, charges may apply. If you choose not to have your own personal television, you may watch the television in the common lounge areas.

### **Newspapers**

If you would like to arrange for newspaper delivery, please speak with the Receptionist in the front Administration Office. Residents are responsible for subscription costs.

### **Internet**

Arrangements can be made with Holland Christian Homes to install internet in your room. The service charge for installation, plus the monthly rate is the responsibility of the Resident. If you change rooms, charges may apply.

Family / Visitor access to wi-fi/internet - there are a number of hotspots throughout Holland Christian Homes. The main spots are: the Grace Manor Restaurant, Grace Manor Atrium, Faith Manor snack bar area. In addition the area's near and in the Activity rooms in Faith and Grace Manors are also are hotspots. The hotspots are named **HCHGuests** (that is the SSID - broadcast name). When you connect to it, you will be directed to a warning about it privacy/vulnerability which you ignore and click on "proceed" anyways - then asks for a Login and Password. This is the same for all hotspot areas.

Login ID: "HCH"      Password: "hchvisitor"

## **Transportation**

Families are responsible for transporting Residents to outside appointments. If transportation by ambulance is required for non-emergency appointments, this can be arranged by registered staff in the Resident Home Area; costs are the responsibility of the Resident. Additionally, any transportation back to the Home from a trip to the hospital emergency department is the responsibility of the Resident.

## **Alternative Therapies**

Alternative Therapies such as massage and touch therapy are permitted within the Manors. Residents who would like alternative therapies are encouraged to discuss them with their physician prior to initiating treatment. Arrangements for alternative therapy are the responsibility of the Resident.

## **Parking / Resident Personal Vehicles**

Holland Christian Homes has limited parking.

If a long term care resident needs parking, they must speak to the Maintenance Manager. Vehicles parked on our property must be driven regularly and not "stored". The vehicle must be registered to the resident, insured and driven by the resident (who must provide proof of a valid driver's license) and not the family. Should the Medical Director determine that a Resident is no longer capable of driving, the Resident must comply.

To ensure the health and safety of all Holland Christian Homes residents, we are asking the cooperation of all visitors by not parking or stopping their cars in our front entrance. These entrances must be kept clear at all times for emergency vehicles.

In the event you need to pick up someone who needs assistance in getting to and from the building, please call in advance and make arrangements with staff to have your family member ready and waiting at the front door. Also whenever possible, please call in advance of when you will drop off in order to have a staff member waiting to assist when you arrive.

## **Meals at Faith and Grace Manors**

### **General Meal Information**

The Dietary Department is managed under the direction of a Registered Dietitian and Dietary Manager and Food Services Supervisor. Meals are planned in accordance with Canada's Food Guide to meet the current recommended nutrient intake for the elderly

as published by Health and Welfare Canada and according to the legislative requirements of the Ministry of Health and Long Term Care.

### **Special Diets**

Some Residents may be on special therapeutic and / or modified texture diets ordered by their physician or Registered Dietitian to assist in the management or control of disease conditions. These diets are individualized for each Resident by the Dietitian who will provide ongoing support to Residents and their families in interpreting them.

### **Resident Food or Drink - Personal Requests**

If a resident has a food or drink preference that is outside of the home's regular menu and/or individualized resident care plan, then the resident/family is responsible to purchase such food / drink items, and staff will ensure that the residents receive these. Such items must be provided to the dietary staff as purchased – should not be opened and must contain a visible expiry date.

### **Food Not Prepared at Faith and Grace Manor**

In keeping with our objective for the provision of safe and nutritious foods to Residents, Residents and families should ensure that foods brought into the Manor are stored properly (refrigerated (in RHA fridge), if necessary) and used before spoilage or expiration dates.

#### ***\*For Safety Reasons:***

- ***It is important that foods & fluids brought in by you is in keeping with any therapeutic and/or modified texture diet that has been ordered. Any foods left in a resident room must be placed into a plastic container with a sealed-tight lid and placed into a drawer or cupboard in the resident room to avoid any potential bug or spoilage issues.***
- ***Any foods left in the RHA fridge should be a lid-tight container and must contain the name of the resident and room number, the date the food was prepared, and the date of expiry. Any food found in the fridge beyond an expiry date will be discarded.***
- ***Please avoid bringing food items that are high in “allergy properties” or could pose a choking hazard such as nuts, peanut butter, etc. In our dementia units, other residents could wander in the room and may try to consume the food. We suggest you provide such foods to your loved one while visiting and take any remaining food with you when you leave.***
- ***To avoid choking by other residents, please do not share food with other residents without nursing staff approval.***

### **Guest Meals (Grace Manor vs Faith Manor)**

Family and friends are welcome to dine with Residents on the resident home area (due to space, a maximum of 5 guests are permitted at any one meal.

Faith Manor: Please notify Reception at least two (2) hours before the meal so the dietary staff can make the necessary arrangements. Meal costs are posted on the information board at Reception. Guests dine with the Resident in the resident home area/lounge of the Home.

Grace Manor: Please notify Reception at least two (2) hours before the meal so the dietary staff can make the necessary arrangements. Meal costs are posted on the information board at Reception. Guests dine with the Resident in the resident home area/lounge of the Home.

### **Dining Room Committee**

Residents meet regularly with the Dietary Manager and/or Food Services Supervisor to discuss meal service issues - food preferences, special occasion menus, quality concerns, etc. Minutes of meetings are posted on the Resident/Family bulletin boards. New resident members are always welcome!

### **Meal Service and Snacks**

Three meals a day are provided. Dining rooms are located in each Resident Home Area. Residents are expected to eat meals in the dining rooms. Meal times are as follows:

#### **Faith Manor**

Breakfast	8:30 a.m. and a continental breakfast is available for early or late risers.
Lunch	12:30 p.m.
Dinner	5:15 p.m.
Snacks	10:30 a.m., 2:30 p.m. and 7:30 p.m.

#### **Grace Manor**

Breakfast	8:15 a.m. and 8:45 a.m. and a continental breakfast is available for early or late risers.
Lunch	12:15 p.m.
Dinner	5:00 p.m. and 5:30 p.m.
Snacks	10:00 a.m., 2:00 p.m. and 7:00 p.m.

There are two menu choices provided for lunch and supper daily for main course, vegetable and dessert. All the meals are served at one table before going to another table, regardless of the various types of diets and/or textures needed to be served. The table rotation list to be followed is posted on the wall at all times.

Daily menus are posted outside each RHA. Residents are encouraged to comment on the food and meal service.

Residents who are bedridden or unable to come to the dining room receive assistance with their meals in their rooms and will be served after the dining room service is completed. Snacks are specifically provided twice a day on each Resident Home Area; however snacks and beverages are available for our residents 24 hours per day. Special nourishments and supplements are also available if indicated, for residents.

There is a short devotion before every meal while the residents are in the dining room.



## **Resident Care**

### **Power of Attorney for Personal Care**

A Power of Attorney (POA) for Personal Care is a legal document defined by the Substitute Decisions Act of Ontario which permits a person to make personal care decisions on behalf of a person only if the person has become incapable of making such decisions. Therefore, the Resident is the primary decision-maker whenever possible about their care. Families must understand that Residents' wishes take precedence. In the absence of a Power of Attorney document, staff follows the Substitute Decisions Act to determine who has authority if the Resident is unable to make his or her own care decisions.

### **Notification of Next of Kin**

It is our policy to phone one (1) individual only, preferably the Power of Attorney for Personal Care or the appointed substitute decision-maker for care. This person should contact other family members as appropriate. On admission, please indicate who we should call and designate an alternate in the event that this person is unavailable. Staff will contact the Power of Attorney for Personal Care or the substitute decision-maker for care when:

- there is a sudden change in a resident's condition
- a Resident requires transfer to another health-care facility (hospital for example),
- a transfer to another room within Faith Manor is required
- care concerns arise
- a Resident requests it

### **Resident Care Conference**

The Care Team reviews each Resident's individual care requirements within six (6) weeks of admission, on an annual basis, and as needed, to evaluate care and programming. Residents and/or their Power of Attorney (POA) are invited to participate in this process and to discuss any problems or concerns they might have and to review the Plan of Care, actively participate in determining goals and specific routines of care, while meeting staff involved in the care of your loved one. Families are invited to attend at the discretion and consent of the competent Resident. The object is to provide optimal quality of life for each Resident. Special Care Conferences may be held anytime at the request of the family / resident or interdisciplinary team if a residents condition or any other situation arises which affects the residents status.

Due to the number of conferences held in a year, they are generally 30 minutes long, and held in either a boardroom or activity room located on the residents' home area/floor/unit. If the family / substitute decision maker is unable to attend in person, the option of a teleconference (over the telephone meeting) is available as an option to being there in person. The conference may also be held at the bedside of a bedridden resident as requested by the resident and/or substitute decision maker.

Residents and family are reminded not to wait for this annual meeting to express any concerns or issues you have. Express concerns at the time they occur directly with any one of the interdisciplinary team as it relates to any department or inform the Charge Nurse who can redirect them as appropriate.

## **Medical Care**

Each attending physician ensures his or her Residents have medical on-call coverage at all times, should an emergency arise. You may choose to have a physician or Nurse Practitioner (NP) of your choice to manage your care; however your attending physician or Nurse Practitioner must agree to abide by the policies and procedures of the Home and the requirements of the Ministry of Health and Long Term Care, including entering into a written agreement with the Home.

Each home has a Medical Director, as well as being one of our Attending Physicians, and provides medical guidance and support to the Home.

Residents and family members should be aware that the primary contact for medical care or medical concerns is the Registered Nursing staff. Attending Physicians do not have offices within the home and are not in the facility each day. Attending Physicians complete regular visits to their residents and on an as needed basis.

Attending Physicians do not normally contact family members to provide updates on the resident's condition. Residents and family members are always welcome to contact the Attending Physician at their private practice. The office number can be obtained from the Registered Nursing staff.

Due to privacy issues, Registered Nursing staff will only provide general health information about a resident to the Power of Attorney for Care (POA). Information about or changes to a resident's medical diagnosis is given by the Attending Physician and not the Registered Nursing Staff.

## **Nursing and Personal Care**

Nursing care and personal care is provided on a 24-hour basis. This includes care given by or under the supervision of a Registered Nurse or a Registered Practical Nurse. All Registered Nursing staff is licensed by the College of Nurses of Ontario. Assistance with activities of daily living (personal care) is provided by Personal Support Workers (PSW's). Daily medication is administered by the Registered Nursing staff. Newly admitted residents must give all of their medication from home or hospital to the Registered Nurse on duty on the day of admission. A picture is taken of all new residents on the day of admission and posted on their Medication Administration Record (MAR) and in the residents chart. This is done to prevent medication and treatment errors.

Nursing and personal care is completed through an individualized personal care approach. Nursing staff complete ongoing assessments and care plans which detail each resident's individual care needs.

Nursing staff can be reached by pressing the call-bells for assistance. These are located in the resident bedroom, bathrooms, tub/shower rooms and lounge/activity areas. Call bells summon staff and are responded to as quickly as possible day or night.

Resident Home Areas are managed by a full-time Director of Resident Care as well as a Nursing Supervisor. They are responsible for coordinating your care. Please feel free to direct any questions, concerns or suggestions to them.

## **Restorative Care**

Restorative Care is a philosophy of care that focuses on preserving and enhancing the quality of life of our residents. A resident is often admitted to a long-term care facility for various reasons; mainly due to a decline in physical and/or mental health and abilities. Residents experience some degree of loss of independence before and sometimes as a result of the transition. The act of providing Restorative Care to residents is an approach to care that intends to 'restore' them to their maximum functional potential within their given situation. Restorative Care is not just about functional potential within their given situation. Restorative Care is not just about restoring the resident physically but emotionally as well. By focusing on what a resident CAN DO, we can give residents back that sense of independence no matter how small the task may be. All departments at HCH play a part in Restorative Care through their approach to their job tasks - working towards ensuring maximum quality of life for the residents.

**Nursing Rehabilitation** is a formalized program that is driven by the Nursing Department and staff. The program has specific criteria and Ministry of Health and Long-Term Care requirements. All residents have the opportunity to receive physiotherapy, however; not all residents will be on a Nursing Rehab program. Residents cannot be completely independent or completely dependent in a particular activity of daily living in order to qualify for Nursing Rehab. When residents are on a Nursing Rehabilitation program, they must participate for 15 minutes per day, 6 days out of 7 days of the week. Nursing Rehab allows residents to practice their skills in the areas of walking, dressing/grooming, eating, transferring, active range of motion and toileting. Staff will provide interventions that enable the residents to do their 'activities of daily living' for themselves. As an example - in the dressing/grooming program, a resident may be able to brush their own teeth providing a PSW puts the toothpaste on the brush and hands it to the resident. This simple intervention means that the resident can do something they otherwise could not do on their own.

For more information and to learn how you can participate in the Restorative Care and the Nursing Rehab program - contact our Restorative Care Nurse.

## **End of Life Care Program**

The End of Life Care Program at Holland Christian Homes has the primary mission of ensuring our residents do not die alone in a sterile, impersonal surrounding. No one wants to be reliant on life sustaining equipment, and cut off from their family, friends, and loved ones, and things that are familiar. Our mission is to ensure, if possible, that residents spend their final phase of life 'pain-free and alert as possible' surrounded by the people and things they love.

Services of the Holland Christian Homes End of Life Care Program are available to all residents living in the Long Term Care Division of Holland Christian Homes and who have severe chronic or terminal illness and have been given a diagnosis of "less than 6 months to live".

A doctor's order is needed to consult the End of Life Care Program Team.

The resident and family are very much a part of the team, and are made aware of the terminal or chronic nature of the illness, and must agree with the plan for supportive or end of life care.

## **Guest Rooms**

There are guest rooms within Holland Christian Homes which may be available if family from out-of-town wish to rent them to remain close by. These rooms are booked through the Admissions Coordinator (see Room Bookings for more information). A 'chair bed' is also provided in the resident's room where family may stay 24 hours/day through end-stage of life.

Advanced Medical Directives are reviewed with management at admission that provides instructions to the unit charge nurse on how to proceed in an emergency. This may involve discussions around funeral arrangements and directives for care at end-stage of life.

## **Celebration of Life**

There is a 'Celebration of Life' memorial service held for family members/friends who have had a loved one pass away in Faith or Grace Manor. An invitation will be sent out to family and friends when a Service date is arranged. We welcome you to attend - and to participate if you wish - in honouring the lives of our seniors.

Please refer to the purple brochure called, 'Special Care Needs'. You will find helpful information to assist you through this difficult process.

## **Medications**

Holland Christian Homes utilizes a pharmacy specializing in long term care for all of its medication/pharmaceutical requirements. At no time should residents or families bring in medications not approved by the medical /nursing staff.

Prescription pharmaceutical preparations listed in the Ontario Drug Benefit Formulary are provided to Residents. Residents are responsible for the cost of pharmaceuticals not listed in the formulary.

### ***\*For safety reasons:***

- ***Residents are not permitted to keep any medications in their rooms unless ordered by their attending physician. This includes prescription, over-the-counter, and topical medications.***
- ***Medications are generally provided before each meal and before bed (7am to 8pm; 11:00am to 12 noon; 4:00pm to 5:00p; and 7:00 to 8:00pm). In an effort to avoid medication errors and to keep our residents safe, we would ask that you please do not disturb or ask questions to the nurses when they are providing residents with medications. If you see the nurse with the medication cart, this means they should not be interrupted. Likewise, we would appreciate it if you call the nursing station outside of these scheduled times for questions or concerns.***

## **Dentist & Denturist**

Dental services are available on-site at Faith and Grace Manor through a mobile Dental Services company. Consent forms are available from the Nursing Administration Office. This service then coordinates appointments for Faith and Grace Manor Residents. Residents are responsible for all fees.

Alternatively, Residents requiring professional dental services may choose to do so with the practitioner of their choice, and are responsible for all transportation to and from appointments and associated transportation and dental fees.

Holland Christian Homes is not responsible for lost or damaged dentures.

### **Hearing Aids**

A hearing aid firm visits the Manors. If you would like your hearing aid serviced, please inform the Nursing Staff. Please ensure your hearing aid is labeled with your name.

Holland Christian Homes is not responsible for lost or damaged hearing aids.

### **Physiotherapy, Speech or Occupational Therapy**

Physiotherapist and Occupational Therapist services are provided through a contracted provider on-site at Holland Christian Homes. Speech Therapy is available through the Community Care Access Centre referral process. If you require any of these services, it will be ordered by your physician and the Registered Nursing Staff will make the necessary arrangements.

### **Specialist**

If your physician or Nurse Practitioner feels that an appointment with a specialist outside of the Manor is required, the Registered Nursing Staff will assist in making those appointments. Families are responsible for providing transportation and any personal assistance required.

### **Activities for our Residents**

Daily social, recreational and physical activities are provided. Our activities staff plan a number of activities designed to satisfy your needs and interests. These activities include such things as bingo, conversation groups, shuffleboard, painting, rhythm band, daily exercise groups, horticultural therapy, music therapy, sensory stimulation plus a whole lot more! These programs change regularly as Resident interests and abilities change. The time and place of these activities is posted on the bulletin board on each Resident Home Area and each resident receives a copy of the activity calendar in their room.

### **Entertainment**

Local organizations and community groups provide entertainment for your enjoyment. Such events are advertised in the monthly Activities Calendar. Family and friends are welcome on all occasions.

### **Outings**

Our Activities and recreation staff plan regular outings for community events, picnics, tours of the countryside, etc. We hire a wheelchair accessible bus available for such excursions. Families who wish to attend outings with Residents may be asked to take their own vehicle in order to ensure bus space is allocated for Residents as the numbers of participants is limited by the number of seats on the bus. There may be costs associated with outings, such as shopping trips, restaurants or admission fees which will be communicated in advance of the outing.

## **Church Services / Pastoral Care**

Pastoral Care is under the direction of the Activities Manager. The pastors/chaplains at Holland Christian Homes belong to the Heritage Fellowship Christian Reformed Church, a congregation of people who are residents in the Towers and the Manors of Holland Christian Homes. They also serve as chaplains to all residents of Holland Christian Homes, including Grace and Faith Manors. We also encourage the personal visits which your own pastors and priests may wish to bring to you. For Roman Catholic Residents, Mass is also provided (see attachment).

## **Community Involvement/Volunteers**

We are indebted to the many organizations, groups and individuals who add the community dimension to the lives of our Residents. Volunteers of all age groups contribute regularly to our community at Faith and Grace Manor. They are involved in a variety of activities: meal service, crafts, friendly visiting, pastoral care, palliative care, office routines, shopping trips, bingo, birthday parties, entertainment, church services, and fundraising. The Activities staff co-ordinates the volunteer program. Family members who are interested in helping out are encouraged to contact the Activities staff. Local Schools, Guides and Scout Groups, Churches and Service Clubs also volunteer their time to provide special intergenerational and spiritual programs.

## **Visiting / Visiting Hours / Going Out**

### **Visiting Hours**

Visiting (by family member, relatives and friends) is an important part of creating an atmosphere conducive to quality of life for all residents living at Holland Christian Homes (see Visitor Guidelines attachment).

There are no set visiting hours and we are open 24 hours a day / 7 days a week, however, the visiting of residents during reasonable hours is always encouraged. We suggest that visitors visit between the hours of 8:00am – 9:00pm. Visitors are expected to conduct themselves in a considerate manner at all times having regard for the safety and well-being of all the residents and staff while in the building.

If you wish to see your visitors other than in your room, there are several sitting rooms where you may find privacy throughout the complex.

### **Visiting with Children**

Family and visitors are encouraged to bring their children and younger family members to visit, as children always provide much laughter and joy to residents.

### **Visiting with Pets**

Pet visitation is always encouraged, but to protect staff and residents and to comply with laws and regulations regarding pets, Holland Christian Homes requires that all visiting pets be registered with our home through the Activities Department.

#### ***\*For Safety Reasons:***

- ***All visitors wishing to bring their pets into the home must provide Holland Christian Homes Activities Department with a current valid pet license and up to date immunization record prior to the pet coming.***

## Colds & Flu Season

Colds and flu in our Home can have a significant impact on the health status of our Residents. Occasionally, visiting may be restricted due to infectious outbreaks of respiratory or gastrointestinal illness. Family and friends who are feeling unwell should refrain from visiting until their symptoms subside.

Remember, hand hygiene is the single most important means of preventing the spread of germs. Alcohol-based hand sanitizer stations are strategically located throughout the Home, including entrances, exits, elevators, and dining rooms.

### *\*For Safety Reasons:*

- *Please remember to clean your hands with alcohol-based hand sanitizer when entering or exiting the Home or Resident Home Areas.*



## Going Out

As this is your Home, you are free to come and go as you wish. If you are going out, sign out in the Resident Leave Book located at the Nursing Station and let the registered nursing staff in your Resident Home Area know where you are going and when you will return. When you return, please sign back into the Resident Leave Book and let us know that you are back. If you are going out overnight or for a holiday, notify the Nursing staff at least 24 hours in advance so that medication can be provided for you as necessary.



**\* For Safety Reasons:**

- ***Residents living on the Secure Resident Home Areas must be supervised and accompanied by a responsible person before leaving the area.***
- ***Exterior doors at Faith Manor are locked at 9:00 p.m. Should you return when the doors have been secured, please use the doorbell provided.***
- ***You are cautioned on going out of the Home in extreme hot or cold weather. Please speak to a member of the staff for details on any current weather warnings.***

**Twelve helpful Tips for Visiting Residents with Dementia**

The following are tips to help make your visit more meaningful:

1. One of the eventual symptoms of dementia is that people who have this disease can no longer learn new information. Every action, place and person a resident with dementia encounters is new to him or her. Each time the resident sees a close friend or family member, it is like a "first time" meeting. The resident should be greeted as a close friend, or a person that you know well. Tell the resident who you are and why you are there.
2. What kind of message is being relayed to the resident with the color of the clothes you are wearing, your body language and your feelings? The person with dementia sometimes has trouble understanding words; as such, they tend to depend upon what they see and feel. They will reflect back to you whatever emotions you are feeling. People with dementia are like a mirror- they will reflect back what you are expressing.
3. Watch for cues emanating from the person with dementia. Determine if he/she is upset and if it is advisable to continue the visit. Behavioural cues to look for are tight fists, walking away, ignoring you, and telling you to go away. It is difficult for you not to take these actions personally, but the resident is trying to tell you that they are tired and need to rest.
4. If you have trouble leaving because the resident won't let you go, get the staff's attention so they can distract the resident while you make your exit. Sometimes it is best not to tell the resident you are going home, as they will want to go with you. Because of memory loss, the person with dementia feels like a visitor in Holland Christian Homes, and if you are going to that wonderful place called 'home', they would like to go there too. Instead, tell the resident you are going to see someone else and that you will come back soon. Be reassuring.
5. Sometimes, things will happen before the visit and the resident with dementia will be upset. The resident is not upset with you, even though he/she may say harsh things. It is advisable to leave the resident alone for a time and visit another time. Even ten minutes can make a difference, or another day.
6. If the resident with dementia can tell stories, encourage this activity by providing a topic, a picture, or point something out in the environment to discuss.

7. The resident with dementia is "living in the moment". That is, people with dementia can only talk about things they see, hear, feel, right now. Clearly it is often easier to go for a walk together rather than sit in a room.
8. Watch for fatigue. Signs of tiredness could include repeating conversations, irritability, or walking away from you or asking you to leave. A short visit is usually better than a long one because it is tiring for the resident to visit or behave like a host or hostess.
9. Silence can be a shared experience. Merely sitting and watching is good. Ask the resident if you can read to him/her, pray together, or sit together.
10. Distraction is a technique to draw the resident's attention away from one thing to something different. If the resident becomes upset, get him/her to pay attention to something else. This action may relax the resident.
11. Remember that these residents are doing the best they can. People with dementia will have moments of "reality". The goal of Holland Christian Homes is to make the surroundings as pleasant and comfortable as possible. You should be able to enjoy these surroundings with the resident as well. After, you can even share these moments with others. This is one of the "gifts" or "joys" of being with people with dementia.
12. The resident with dementia is unable to entertain; so, come with something, like a book, flowers, candy (with staff permission), or take the resident for a walk.

***A short visit, with a good feeling at the end for both you and the resident, is the goal. For the resident with dementia, the value is in the feeling he/she gets from you, not the length of time spent visiting. For Holland Christian Homes, effective visiting, regardless of the physical or mental state of the resident, is realizing that the true source of caring is "to give of ourselves and know that we do so by just being there."***

We hope that you find these tips helpful. Any feedback or comments you may have on the success of these tips would be very much appreciated.

## **Ministry Policy on Resident Leaves**

### **Casual Leave**

You are entitled to a casual leave of up to 48 hours per week. Casual leaves are permitted throughout the year in addition to vacation or medical/psychiatric leaves.

### **Vacation Leave**

A vacation leave of 21 days per year is available to all Residents. Vacation leave can be used only in the calendar year in which it is granted and is not cumulative.

#### **\* For Safety Reasons:**

- ***Your representative must accept responsibility for your care and must notify the Home of any changes in your condition while away from the Manor or if you are admitted to a hospital during the leave.***

## **Medical Leave**

Medical leave for purposes of hospitalization is available to all Residents for up to 30 days at a time. The use of medical leave does not reduce your available vacation or casual leave.

## **Psychiatric Leave**

Psychiatric leave of up to 60 days is available to Residents for the purposes of assessment, treatment and stabilization.

## **Resident Charges While on Leave**

During a leave of absence, you are responsible for the standard charges. This includes accommodation (basic or preferred) and any authorized purchase of other services. If your condition or care needs require absence from the Home beyond the available medical or psychiatric leaves, then you shall be discharged from the Home. To re-enter the Home, you or your representative must contact the Community Care Access Centre (1-888-470-2222).

## **Payment for First and Last Day in the Home**

**A long-stay resident** shall pay the amount charged for accommodation for a full day: for the day the CCAC placement coordinator authorizes the resident's admission to the home; and for the day the resident is discharged from the home.

**A long-stay resident** shall not pay the amount charged for accommodation for a full day for the day the resident is discharged from the home if the resident is admitted to another long-term care home on the same day.

## **Internal Transfers**

Internal transfers will only be allowed under exceptional circumstances and/or by approval of the Home's Administrator or DRC in accordance with Holland Christian Home's policy.

## **Discharge from Long Term Care**

Holland Christian Homes may discharge a resident if:

- The resident's requirements for care have changed and that, as a result, Holland Christian Homes cannot provide a sufficiently secure environment to ensure the safety of the resident or the safety of persons who come into contact with the resident
- The resident decides to leave the home and signs a request to be discharged
- The resident leaves the home and informs the Director of Resident Care that he or she will not be returning to the home
- The resident is absent from the home for a period exceeding seven days and the resident has not informed the Director of Resident Care of his or her whereabouts, and the Director of Resident Care has been unable to locate the resident
- The resident is on medical absence that exceeds 30 days

- The resident is on psychiatric absence that exceeds 60 days
- The total length of the resident's vacation absences during the calendar year exceeds 21 days
- The long-term care home is being closed

### **Removing Items from Room after Discharge / Death**

All personal belongings must be removed from the room within one day (24 hours) following death or transfer of "the resident". Any items not removed within this specified time will be itemized, placed in boxes, and stored at the discretion of Holland Christian Homes without responsibility for loss or damage of same, for a maximum of 60 days at which time if unclaimed will be disposed of by Holland Christian Homes in any way it sees fit.

In the past, Holland Christian Homes was able to hold the room of a deceased resident in Long Term Care until the next-of-kin was able to clear it, however, new regulations require that the room of a resident be vacated within one day following death or transfer. This decision is based on an attempt to free up more long term care beds for persons on their lengthy Long Term Care Waiting list. By sharing this information in advance, family/next-of-kin will be better prepared for this change rather than at a time of grieving.

### **Safety Regulations**

#### **Smoking**

Holland Christian Homes is a smoke-free facility. Those residents who wish to smoke must be assessed on their ability to safely smoke by the Registered Nursing Staff. Smoking is only permitted at least 9 metres from the building, according to bylaws.

Long Term Care Residents must be able to get to/from the smoking area independently and smoke safely. In the event that a resident is non-compliant with the homes non-smoking policy, Holland Christian Homes will make the necessary arrangements to transfer the resident out of the home to another Long Term Care Home.

Holland Christian Homes offers information on smoking cessation; please ask staff if you are interested in learning more about this program.

#### **\* For Safety Reasons:**

- ***Residents are not permitted to keep cigarettes, matches or lighters in their room; the nursing staff will secure them for you.***

#### **Electrical Appliances**

All electrical appliances must be Canadian Standards Association (CSA) approved and checked by our maintenance staff to ensure that they are safe before you are allowed using them in your room. Kitchen appliances (kettles, coffee machines, refrigerators, etc.) are not permitted in Resident rooms. Electrical outlets are provided in all Resident rooms. Please do not use extension cords, octopus plugs, etc. Television and phone cables should not prevent safe movement in your room. If you need to have a longer cable to ideally position your television or phone, arrange to have maintenance secure it to the baseboard or wall.

## Fire and Other Emergencies

During any emergency situation, it is important to remain calm as Holland Christian Homes staff are there to help you and have been trained to respond in such situations.

In all emergency situations, 911 is always called and emergency services (fire, police and ambulance) would be on site to help and guide our staff and residents in responding to any emergency situation.

### Fire Procedures

Holland Christian Homes' staff practices three fire drills every month in order to be prepared in the event of a fire. Our fire emergency systems are checked regularly by a certified contractor to ensure that it is in good working order. Our fire systems are very sensitive and in the event of smoke or fire, the fire alarm will sound alerting staff and residents of a potential fire situation. In case you smell smoke, or see a fire before an alarm has sounded, you should push your emergency call button in your room, and/or pull the fire alarm and/or yell "fire" or "help" to get attention from staff. If possible, move away from the fire or smoke until help arrives.

When the fire alarm sounds, an announcement will be made over the public address system notifying staff and residents that there is a "Code Red". The announcement will also identify the location of the fire and any other instructions required to be followed. It is important for you to listen and follow the instructions given until the situation is resolved and you hear an announcement that "everything is all clear".

On every Resident Home Area, there is a staff assigned to act as a Fire Captain during a fire alarm. These people will take charge on the unit and give direction to staff and residents. The Fire Captain can be easily identified as they will be the one who is wearing a bright yellow/orange vest. In the event of a real fire, residents will be evacuated to a safe area either horizontally or vertically within the building depending on the fire location. On every resident door, there is a red and white evacuation sign that is used by staff to verify that a resident has been evacuated from their room.

#### **\* For Safety Reasons:**

- ***It is important that once evacuated you DO NOT return to your room. You must stay in the location where staff takes you until you are instructed by the Fire Captain (or nursing staff) that you can return to your floor/room.***
- ***Never use the elevators during a fire alarm and do not enter a stairwell unless it is safe to do so and free from smoke.***

### Evacuation Procedures

Holland Christian Homes staff practice and complete a building evacuation drill once every three years in order to be prepared in the event of a building evacuation. In the event that an emergency situation requires an evacuation from the building, an announcement is made over the public address system announcing a "Code Green". This announcement will also inform residents and staff as to which order the floors will be evacuated (according to the emergency situation).

Once the Code Green announcement is made, staff will immediately bring all residents to a common area on their respective floor. Each resident has a wrist band containing

pertinent information identifying each resident helping to account for all residents. Our designated evacuation locations are:

Heritage Hall, Covenant Tower or another location as directed by the Charge Nurse and/or Emergency Services.

Medications, food, medical equipment, nursing supplies, and emergency telephone lists (for both families and staff) have all been prepared in advance and will also be brought to the evacuation location. Once evacuated and in a safe place, families will be notified of the evacuation situation and our location. The Ministry of Health and LHIN is notified in order to address any long term evacuation measures as required.

If you have any questions and/or require further information on any of our emergency procedures, please feel free to contact our Disaster Coordinator at Ext. 5256.

### **Alcohol**

Residents may consume alcohol in moderation with their physician's approval and order. If a Resident abuses the use of alcohol, privileges may be limited or revoked.

#### **\* For Safety Reasons:**

- *Residents are not permitted to keep alcohol in their room; the nursing staff will secure it for you.*
- *Additionally, our policy does not permit alcohol to be consumed by family or visitors on Faith or Grace Manor premises for safety reasons.*

### **Building Security**

All doors to the exterior are secured and accessible by keypad or fob entry or exit only. Visitors are reminded to check with staff before assisting any Residents out of the unit/building as the Resident may be at risk of injury if outside unsupervised.

Please do not allow residents to follow you out – make sure doors are closed/secure before exiting.

We have staff available at reception 12 hours a day, 7 days a week. We have several cameras strategically placed in outdoor areas to monitor the outdoor activity.

**SECURITY IS EVERYONE'S RESPONSIBILITY.** *Residents/Families are asked not to open the entry doors to persons they do not know. Do not allow strangers to follow you into the building. Report strangers in the building to the Receptionist or the Charge Nurse on the Care floor immediately.*

- Key pads **to be used with fobs** are located at all stairwell exit doors and are for the use of **staff only**. Key pads and buttons are also located by the door entering the secured units for resident safety.

### **Balconies / Windows**

Balcony doors must be locked at all times unless residents are supervised by staff or families (or resident is competent to be there alone).

Families and residents using this space are told before allowing access to ensure they close the door after themselves and ensure it is locked.

As per Ministry of Health Standards all windows can open but only 4 inches wide at all times. Residents/families/volunteers are not allowed to tamper with the window locking mechanisms.

Keeping your windows closed during the humid summer days will help to keep your room at a comfortable temperature.

## **Money Matters**

### **Valuables**

The Home cannot be responsible for the loss of personal valuables.

#### **\* For Safety Reasons:**

- ***Residents are advised to keep only small amounts of money on their person.***
- ***Residents are also advised to not bring (or wear) gold jewelry (rings, necklaces etc), family heirlooms, small collectables or breakable items, or other such valuable items into the home.***

### **Power of Attorney for Property**

Residents remain responsible for their own financial affairs unless delegated to a responsible third party. A Power of Attorney for Property is a legal document that allows a person or persons (the attorney) to make decisions on behalf of the person signing the document (the grantor), but only when the person is incapable of making their own decisions.

### **Witnessing a POA or WILL**

Under no circumstances are any employees and/or volunteers of Holland Christian Homes allowed to witness signatures to any legal documents (ie. wills and/ or P.O.A, banking documents, cheque endorsements etc) for any Holland Christian Homes resident, or family.

### **Accommodation Charges**

Holland Christian Homes has different classes of accommodation that have different rates. The Ministry adjusts accommodation rates from time to time. These adjustments will result in changes to the Accommodation Fees. Holland Christian Homes will provide the Resident with thirty (30) days written notice in advance of any increase in Accommodation Fees. The notice will include the amount of the increase and the current Accommodation Fees that the Resident must pay. All Residents are required to pay at least basic accommodation. There are three (3) rates as follows:

- a. Basic Accommodation
- b. Preferred Accommodation - Semi Private Room Rate
- c. Preferred Accommodation - Private Room Rate

Depending on your income, you may qualify for a rate reduction for basic accommodation. There are no rate reductions available for preferred accommodation. If you are in preferred accommodation and would like to be transferred to basic accommodation, notify the Nursing Administration Office and arrangements will be made for a transfer when a bed becomes available.

- ***See the accommodation rate sheet at end of this package of information.***



## **Bed Holding Fee**

Regulations under the LTCHA require the Resident to agree to move into the Home before noon of the fifth day following the day on which the Resident receives notice that accommodation is available in the Home (unless the Home agrees to a later time on the fifth day). The Resident must pay the Home Accommodation Fees for each of the five days, whether or not the Resident moves into the Home.

If the Resident moves into the Home on the day he or she receives notice that accommodation is available in the Home, the Resident must pay the Home the Accommodation Fees for that day.

## **How to Apply for a Rate Reduction**

Persons applying for a rate reduction must submit a Notice of Assessment for the current year from Canada Customs and Revenue Agency CCRA (formerly Revenue Canada) to the Accounting Department (and any other supporting documentation).

A rate reduction form will be completed and must be signed. If the income is below the threshold set by the Ministry of Health, then the resident will receive a rate reduction.

Rate reduction forms are available through the Accounting Office and the Ministry of Health.

Please speak to our accounting department if you have any questions or need assistance with the rate reduction application process.

## **Trust Account**

Holland Christian Homes will, on request, establish a Trust Account for a Resident on admission. You may authorize the Administration staff to automatically pay bills (hairdressing, activation outings, transportation, etc.) on your behalf through your Trust Account. Trust accounts are managed by the Home according to Section 241 of the Regulation 79/10.

## **Financial Assistance / Comfort Allowance**

There are a number of government financial programs available to citizens aged 60 years and over. The Administration office will be pleased to provide you with information regarding these. Residents in receipt of the Guaranteed Income Supplement are guaranteed a legislated amount of comfort allowance monthly.

Comfort Allowance is available to persons in Basic Accommodation rooms only. There is no Comfort Allowance for persons in Preferred Accommodation.

*See a list of programs at end of this package of information.*

## **Accounting / Billing / Payments**

### **Our Accounting Office is open:**

Monday 1:30 p.m. - 4:00 p.m.

Wednesday 9:00 a.m. - 12:30 p.m.

Last Friday of the month 9:00 a.m. - 12:30 p.m.

Closed - Tuesday, Thursday and Friday.

Other times are by appointment, please call ext. # 5211.

There is a mail box/slot located in the Main Office (just outside the CEO's office) for dropping off payments/information during regular business hours when the accounting office is closed.

Our preferred method of payment is pre-authorized payments (PAP). Please be advised that cash transactions are discouraged for payments at Holland Christian Homes. If you are paying by personal cheque, then such payments must be received by our accounting department by the 20<sup>th</sup> of each month in order that the necessary accounting procedures can be done before the end of the month. Cheques may be post-dated to month-end. Do not ever leave payments with nursing or other staff in either of the Manors.

If you are completing a cash transaction at reception, you must obtain a receipt. For your own protection, please ensure you ask the receptionist for a receipt before you leave reception.

Monthly statements are provided to the POA for Finances as per the LTCHA.

**Monies owing after discharge** - Monies owing to the resident/lawfully authorized substitute are returned one month after discharge. Holland Christian Homes does not require a resident to pay a penalty in lieu of a specific notice period prior to discharge. Any monies owing will be made out to "the estate of" the resident upon death.

### **Banking**

Banking is the responsibility of the resident and/or POA for Finance. For your banking convenience, there is a DUCA bank located on site at Holland Christian Homes, and a Toronto Dominion (TD) Bank at the plaza next door to HCH.

### **Giving money or gifts to staff is not permitted**

Employees of Holland Christian Homes are paid for providing the care and services to our residents, and are not permitted to accept money or gifts from residents for any services rendered.

There is a staff fund which families and residents can donate to at anytime throughout the year to thank staff for their efforts. The fund helps to pay the cost of a staff Christmas party to recognize the efforts of all staff who works in Holland Christian Homes. The donation can be left at reception or dropped off at the Accounting office.

### **Resident / Family Information Board**

- Grace and Faith Manor each have a Resident/Family Information Board located on the main floor of the Manor. You will find such information as: the Residents Bill of Rights, our Mission Statement, policies (such as abuse, restraints and privacy), emergency procedures, inspection results, how to get involved, complaint procedure (concern forms are available here), LTC Action line, how to make a complaint to the Director, minutes of resident and family councils and much more useful information.
- Residents are encouraged to check the bulletin boards frequently for new postings.

## **H.C.H. Website**

A related area is our developing web site ([www.hch.ca](http://www.hch.ca)) which will be providing more and more information regarding our services and programs for the general public and is used to communicate important information to our families and friends through a restricted area. Keep checking back to this site as we are constantly changing and enhancing its effectiveness. We ask that all residents, family members or friends feel free to make suggestions on how we might be able to use technology and IT to improve our facility.

## **Resident Rights and Responsibilities**

### **Posting of the Residents' Bill of Rights**

The Residents Bill of Rights is posted in English and French by the main elevators on the Resident / Family Information Boards. The fundamental operation of the Home is guided by these Rights.

### **THE FUNDAMENTAL PRINCIPLE AND HOLLAND CHRISTIAN HOMES RESIDENTS' BILL OF RIGHTS UNDER THE LONG-TERM CARE HOMES ACT, 2007**

#### **The Fundamental Principle**

The fundamental principle to be applied in the interpretation of this Act and anything required or permitted under this Act is that a long-term care home is primarily the home of its residents and is to be operated so that it is a place where they may live with dignity and in security, safety and comfort and have their physical, psychological, social, spiritual and cultural needs adequately met. 2007, c. 8, s. 1.

#### **Residents' Bill of Rights**

Holland Christian Homes shall ensure that the following rights of residents are fully respected and promoted:

1. **Every resident has the right** to be treated with courtesy and respect and in a way that fully recognizes the resident's individuality and respects the resident's dignity.
2. **Every resident has the right** to be protected from abuse.
3. **Every resident has the right** not to be neglected by Holland Christian Homes or staff.
4. **Every resident has the right** to be properly sheltered, fed, clothed, groomed and cared for in a manner consistent with his or her needs.
5. **Every resident has the right** to live in a safe and clean environment.
6. **Every resident has the right** to exercise the rights of a citizen.
7. **Every resident has the right** to be told who is responsible for and who is providing the resident's direct care.

8. **Every resident has the right** to be afforded privacy in treatment and in caring for his or her personal needs.
9. **Every resident has the right** to have his or her participation in decision-making respected.
10. **Every resident has the right** to keep and display personal possessions, pictures and furnishings in his or her room subject to safety requirements and the rights of other residents.
11. Every resident has the right to,
  - i. participate fully in the development, implementation, review and revision of his or her plan of care,
  - ii. give or refuse consent to any treatment, care or services for which his or her 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 his or her care, including any decision concerning his or her admission, discharge or transfer to or from a long-term care home or a secure unit and to obtain an independent opinion with regard to any of those matters, and
  - iv. have his or her 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 his or her records of personal health information, including his or her plan of care, in accordance with that Act.
12. **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.
13. **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.
14. **Every resident has the right** to communicate in confidence, receive visitors of his or her choice and consult in private with any person without interference.
15. **Every resident** who is dying or who is very ill **has the right** to have family and friends present 24 hours per day.
16. **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.
17. **Every resident has the right** to raise concerns or recommend changes in policies and services on behalf of himself or herself 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,
  - i. the Residents' Council,
  - ii. the Family Council,

- iii. Holland Christian Homes, the directors and officers of Holland Christian Homes
  - iv. staff members,
  - v. government officials,
  - vi. any other person inside or outside Holland Christian Homes.
18. **Every resident has the right** to form friendships and relationships and to participate in the life at Holland Christian Homes.
  19. **Every resident has the right** to have his or her lifestyle and choices respected.
  20. **Every resident has the right** to participate in the Residents' Council.
  21. **Every resident has the right** to meet privately with his or her spouse or another person in a room that assures privacy.
  22. **Every resident has the right** to share a room with another resident according to their mutual wishes, if appropriate accommodation is available.
  23. **Every resident has the right** to pursue social, cultural, religious, spiritual and other interests, to develop his or her potential and to be given reasonable assistance by Holland Christian Homes to pursue these interests and to develop his or her potential.
  24. **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.
  25. **Every resident has the right** to manage his or her own financial affairs unless the resident lacks the legal capacity to do so.
  26. **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.
  27. **Every resident has the right** to have any friend, family member, or other person of importance to the resident attend any meeting with the licensee or the staff of the home.

### **Further guide to interpretation**

Without restricting the generality of the fundamental principle, the following are to be interpreted so as to advance the objective that a resident's rights set out in subsection (1) are respected:

1. This Act and the regulations.
2. Any agreement entered into between Holland Christian Homes and the Crown or an agent of the Crown.
3. Any agreement entered into between Holland Christian Homes and as resident or the resident's substitute decision maker.

## Enforcement by the Resident

(3) A resident may enforce the Residents' Bill of Rights against Holland Christian Homes as though the resident and Holland Christian Homes had entered into a contract under which Holland Christian Homes had agreed to fully respect and promote all the rights set out in the Residents' Bill of Rights. 2007, c. 8, s. 3 (3)

## Regulations

(4) The Lieutenant Governor in Council may make regulations governing how rights set out in the Residents' Bill of Rights shall be respected and promoted by Holland Christian Homes. 2007, c. 8, s. 3 (4)

## Resident Responsibilities

As in all human societies, individuals have not only Rights, but also obligations and responsibilities to one's fellow Residents and to the Management and Staff of the Manor. Resident responsibilities at Holland Christian Homes are:

- a. to observe the rules and regulations of the Home.
- b. to treat fellow Residents and Staff with courtesy and consideration, and to bear in mind their rights at all times.
- c. to observe at all times the no-smoking regulations.
- d. to participate in fire and disaster drills.
- e. to give the Home Management Staff an opportunity to correct a concern, complaint or grievance.

## The Role of Social Work in Long-Term Care

Social Work is based upon the understanding of the individual and the environment. The main purpose of social work services is to promote the best possible quality of life for each resident based on their own unique needs. Social Work assists family members and friends with their own adjustment(s) when placing a relative/friend into long-term care - through emotional support, counselling, education and advocacy with various other disciplines within this setting. The primary mandate of Social Work is to advocate on behalf of residents and their families - with a focus on the social and emotional impact of physical and mental impairment while adapting to many losses and changes that occur at this time in a resident's life.

## Your Voice Counts

At Holland Christian Homes, we are committed to operating our long term care home with transparency and accountability. We support and encourage ways that provide opportunities for residents to stay engaged in all aspects of the Home.

The following programs and committees are opportunities for you to maintain a degree of control in your care, share in the management of our Home, and create a voice for all residents at Faith Manor:

## Residents' Council

Both Faith and Grace Manors have a Residents' Council which meets on a regular basis to discuss problems, suggestions, plans for special functions and to review administration proposals for changes and improvements to the Manors.

As Residents of the Manors, you are automatically members of the Council, so feel welcome to attend all Council meetings.

- Every resident in our long term care home is invited to join the Residents' Council.
- Residents' Council meets throughout the year and is for residents only. It provides you with an opportunity to discuss concerns and suggest improvements.
- Residents' Council provides a way for residents to use their talents working as a group, and to speak with one common voice.
- Minutes of meetings are posted on the Resident / Family Information bulletin boards.

### **Dining Room Committee**

- Every resident in our long term care home is invited to attend the Dining Room Committee.
- Committee members advocate for all residents by offering suggestions to management on how to improve menu items including providing feedback on the quality, quantity and variety of the food/meals provided. The committee also plans holiday and special event menus.

### **Care Conferences**

- Care Conferences are held six weeks after moving into Faith or Grace Manor and every year thereafter. Meetings are scheduled in advance to provide you and your family with the opportunity to meet with staff from each area.
- These meetings not only provide you and your family with up-to-date information about the care being provided, but allow an opportunity to make suggestions to the care team on how care can be improved or enhanced.

### **Care Plan Development**

- Your individualized care plan is created based on evidence-based assessments and best practices. Staff from all departments review and discuss your care needs with you to create or modify the care provided.

### **Resident Satisfaction Survey**

- An annual satisfaction survey allows residents the opportunity to provide feedback on care and services offered.
- An action plan is created based on survey results to address areas of concern. Residents Council has input into the ideas and implementation of this action plan.

### **Concern and Feedback Forms**

- Concern Forms are accessible throughout the Manor on the Family / Resident Information Boards and provide an additional chance for you and your family to offer feedback and make recommendations on services provided. All concerns are reviewed and acted upon by the appropriate department and reviewed as part of our overall quality improvement program.

## Continuous Quality Improvement

- The **Quality Improvement Committee of Holland Christian Homes** is an inter-disciplinary team consisting of representatives from every department within our home who meet regularly to plan, review, and audit and implement changes to improve Resident Quality of Life! We also send out the Annual Resident and Family Satisfaction Surveys and follow up on all results. **WE WANT TO HEAR FROM YOU!** All staff, residents, families and volunteers are encouraged to bring concerns to our attention, share an idea or suggestion on how to improve the quality of life for our Residents. **YOUR VOICE DOES MATTER!**

Contact our Quality Improvement Program Coordinator or speak with any Department Manager or Supervisor. Additionally, “Speak your mind” forms are available on the CQI Bulletin Boards (next to the Resident/Family Board).

## Resident’s Family

### Role of Families

### **FAMILIES ARE AN IMPORTANT PART OF THE HOLLAND CHRISTIAN HOMES TEAM!**

Holland Christian Homes recognizes family as a fundamental unit of society. When family is no longer able to care for a relative in the community, it is necessary to seek placement for alternate care.

We are sensitive to the fact that placement creates a major social, emotional and physical dislocation in the life of the individual and his/her family. In order to maintain the integrity of the resident and family, Holland Christian Homes strives to establish a good working relationship with the family with the best interest of the resident in mind.

The resident is the primary decision maker whenever possible. Families need to understand that the resident's wishes take precedence.

Holland Christian Homes strives to recognize the special needs of the family as they relate to residents by providing respectful, considerate and timely communication.

Holland Christian Homes ensures that next-of-kin or representative are notified immediately of any injury, hospitalization or change in the resident’s health status.

Holland Christian Homes will make every effort to inform families of new rules and regulations affecting residents and families.

### **Families can assist our staff in meeting the needs of our residents by:**

- Participating in the planning and evaluation of programs and services through surveys, care conferences, family meetings and informal discussions.
- Cooperating with staff in addressing the needs of the residents.
- Identifying one key family member (and one alternate) to be contacted in the event of an emergency, whose responsibility it is to keep all other family members informed.



- Informing staff when family contact will be out of town and whom to call in the event of an emergency.
- Speaking to appropriate care team staff members about matters of concern immediately at the time they arise, so that they can be understood and resolved as soon as possible. To ask for intervention by supervisors only if issues cannot be handled without additional consultation.
- Informing staff of important changes in family status.
  - Moves - new addresses and telephone numbers.
  - Death of family members.
  - Special events: Marriages, Graduations, Baptisms and other similar occasions.
- To adhere to the Long Term Care policy of Holland Christian Homes regarding the family's involvement in the resident's care. This means that, **ONLY** the Nursing Staff, as ordered by the Attending Physician carries out **ALL** treatments, procedures and administration of medications. Family is **NOT** to perform any of these functions while the resident is under the care of Holland Christian Homes.
- To accept financial responsibility for the resident's spending money, bills and other commitments in accordance with the agreement drawn by Holland Christian Homes and to pay bills in a timely fashion.

**Families can also enhance the resident's experience in long term care by:**

- Communicating with the resident by frequent visits, phone calls, notes, or any other means that have been customarily used.
- Remembering significant events: birthdays, anniversaries, and holidays.
- Encouraging visits of extended family: grandchildren, nieces, nephews, and friends.
- Participating in programmed events with the resident.
- Delivering personal items and adequate clothing when required.
- Providing special personal items not provided by Holland Christian Homes.
- Personalizing the relative's room and Memory Box with family pictures and knick knacks that have meaning for the resident.
- Assisting in eating if the resident requires such support.

**Quote:** *“Your presence” is the best “present”!*

### **Family Council**

Both Faith and Grace Manors have a Family Council whose mission is to serve as a support group to promote understanding, sensitivity and caring of the Residents. The liaison between residents' families, staff and management shall strive to enhance the quality of life, safety and care for all Residents of Faith and Grace Manor. All family members are welcome to attend.

### **Family Information Nights**

These are very informal sessions and are designed to provide an opportunity for family members to hear about the latest developments pertaining to Long Term Care within Holland Christian Homes as well as in the Manor. Everyone is encouraged to attend. Notices of meetings are posted at the entrance and on the lobby Resident/Family Information Board.

## **Policies**

### **Bill 168 – Prevention of Workplace Violence**

Holland Christian Homes investigates and takes action on all workplace violence and harassment complaints.

Workplace Violence and Workplace Harassment is recognized in the Occupational Health and Safety Act (OHSA or the Act).

**“Workplace harassment”** means engaging in a course of vexatious comment or conduct against a worker in a workplace that is known or ought reasonably to be known to be unwelcome.

**“Workplace Violence”** means,

- (a) the exercise of physical force by a person against a worker, in a workplace, that causes or could cause physical injury to the worker,
- (b) an attempt to exercise physical force against a worker, in a workplace, that could cause physical injury to the worker,
- (c) a statement or behaviour that it is reasonable for a worker to interpret as a threat to exercise physical force against the worker, in a workplace, that could cause physical injury to the worker.

To meet our obligations under this legislation, Holland Christian Homes has:

- Prepared and developed a program on workplace violence including policies on: workplace violence, workplace harassment, bullying, domestic violence and resident behaviour management;
- Performed an assessment of the risks of workplace violence to workers;
- Implemented measures to control risks identified in the risk assessments, and
- Educated staff.

### **Private Caregiver/Companion Services**

Holland Christian Homes employees are not permitted to be employed as Private/Caregivers/Companion.

The overall responsibility for the care of a resident rests with Holland Christian Homes. If the resident/substitute decision maker wishes to contact privately for a private Caregiver/Companion for the resident, this will be the sole responsibility of the resident/family.

The family must inform the Charge Nurse and/or Director of Resident Care prior to arranging such services so they can be informed about the established Holland Christian Homes private caregiver/companion policies. The arrangement of and reimbursement for the private caregiver/companion is the sole responsibility of the family/friends.

### **Privacy of Resident Health Information**

Holland Christian Homes exists to provide you with a broad variety of care services. To meet your needs and serve you well, Holland Christian Homes needs to know personal information about you. You, as an individual, have a right to know how we collect, use and disclose personal information. You have a right to expect that, to the best of our

ability, your personal information held by us remains accurate, confidential and secure. Holland Christian Homes is proud of its commitment to maintaining the confidentiality and security of personal information and we've provided this write-up to explain how we protect the privacy of individual resident's information in Holland Christian Homes. Holland Christian Homes' privacy policies comply with the Personal Health Information Protection Act.

It is important that a trust relationship be established between you and Holland Christian Homes. To this end, we are pleased to share information with you. The more you know about us, the more confident you can feel about receiving our services. Similarly, the more we know about you, the better we can serve you. Holland Christian Homes collects and uses information about you for the following purposes only:

- To make decisions about the types services you need,
- To serve as a means to communicate with service providers,
- To monitor the provision of services and evaluate your response to services provided,
- As a legal document made in the normal course of business,
- To serve as a record of services provided,
- As proof of what was done, by whom and when during a resident's encounter with a provider,
- To be used as evidence against or for the organizations, the service providers or the resident,
- To verify our accountability,
- For strategic planning, decision making, allocating of resources, and
- To meet legal and regulatory requirements.

## **Consent**

Because it is important that we keep your trust, we will only ask for information which we need and when we ask you for information, we'll let you know why we need it. To the best of our ability, we will seek your consent to verify and supplement information collected from external sources such as Community Care Access Center's (CCAC), Physicians, Social Services, the Local Health Integrated Networks (LHINS), the Ministry of Health and Long Term Care (MOHLTC) and other community service providers for whom you may need service from. Subject to legal or contractual requirements, you can refuse to consent to our collection, use or disclosure of information at any time provided the consent does not relate to certain information required for care provisions such as disclosure of information to the LHIN or MOHLTC. If you refuse or withdraw your consent to the collection, use or disclosure of information about you, we may not be able to continue to provide you with some services you require. With your consent and where laws allow this, we may share your information with other service providers such as a hospital, pharmacy, medical specialist, social worker; and others who provide community services. If you do not want to be contacted by these other service providers, we will withhold information from them. Disclosure means providing specific information about you from our records to a third party. Depending on your consent, disclosure can happen over the telephone, by fax, by computer and/or be electronic data sharing. Under normal circumstance, we won't collect, use or disclose your personal information without your consent. The only

exceptions to this rule are when the disclosure is permitted by law or when it is impossible or impractical to get your consent.

Some examples of situations where we will not seek your consent for disclosure are:

- For emergency or life threatening events,
- Where there is legal obligation to disclose under a court or government order, for instance to police,
- Where personal information is given to our agents and service providers for services such as laboratory and pharmacy services, and
- Where personal information must be given to insurers in connection with insurance services.

### **Reviewing & Making Corrections**

Except as outlined below, a record is kept each time personal information is disclosed, noting the nature of the disclosure that was made. Individual records of disclosure are not maintained for regular and routine actions such as prescriptions sent to the pharmacy. We attempt to ensure that the information we hold about you is accurate, complete and up-to-date. If there are changes to your information, e.g. a new Substitute Decision Maker (SDM) has been named, please notify us immediately. If you believe that information in your records may be inaccurate, we make it easy for you to access, verify and update it. If information has been provided to third parties, we will convey the corrected information to them if necessary. If we do not agree to change your personal information, you may challenge our decision. We will make a record of this challenge and, if necessary disclose the challenge to third parties who also process your information. To review your personal information simply ask a staff person for assistance. The staff person will provide you with instructions about accessing your information. There may be a charge for retrieving your information in which case you will be notified in advance and may if you like, withdraw your consent. You may also challenge the reasonableness of the charge. Access to information may be more meaningful to you if such access is provided in the presence of a service provider who can explain terminology and the organization's policies. We encourage you to invite a care provider from Holland Christian Homes to assist you in your review of your personal information. Sometimes a staff person will not provide you with information about you that is within its control. This can occur if your right of access is constrained pursuant to the provisions of PHIPA.

For example, the staff person will not provide you with personal information if:

- It would reveal personal information about another party and your personal information cannot be separated,
- The information is subject to solicitor-client or litigation privilege, and/or if
- The information is used for the detection and prevention of a criminal activity and dealings in the proceeds of crime.

If a staff person refuses your request for access to personal information, you will be told why, unless prohibited by law. You may challenge the decision.

Once you have the information, all you have to do is check for its accuracy and let us know if there are any corrections required. We will correct our records or make a note

of differences. If information has been provided to third parties, we will convey the corrected information or note any differences to them, if necessary.

## **Complaints & Responsibility**

Ultimately Department Managers and Supervisors are responsible for protecting resident information. They delegate day-to-day responsibilities to others, such as privacy officers within Holland Christian Homes. Every staff person must take responsibility for protecting resident privacy, confidentiality and security. Our suppliers sign contracts that oblige them to contractually adhere to our privacy practices thus protecting the information of residents when in the possession of third parties. These suppliers or third party include lab, pharmacy, physicians etc. There are controls over the use of computers, electronic data sharing, paper documents, faxing activities, access to personal information.

If you or your family has concerns or questions about the management of personal information in Holland Christian Homes or about our compliance with privacy codes and laws, we invite you to direct your questions and concerns to a staff person who is providing service to you. If that person is unable to effectively respond to your questions and concerns, we encourage you to contact our Privacy Officer.

We trust that we will be able to resolve any issues that you have regarding the protection of personal information. If our Privacy Officer, is unable to satisfy your inquiries, you may contact the Office of the Privacy Commissioner of Ontario: Information and Privacy Commissioner of Ontario,

2 Bloor Street West, Suite #1400, Toronto, Ontario, M4W 1A8. Tel: 1-416-326-3333.

## **Restraint Use at Holland Christian Homes**

Holland Christian Homes uses the Least Restraint practice which means that the least restrictive measure is used for the shortest duration possible. This allows for the maximum freedom of movement and/or resident's control. The types of restraints currently used within Holland Christian Homes are as follows:

- a) Chemical Restraints - a pharmaceutical agent given with the specific purpose of inhibiting or controlling behaviour or movement.
- b) Physical Restraints/Devices - any appliance /device / apparatus or equipment attached or adjacent to a resident's body that the individual cannot remove easily and which restricts movement.  
The Physical Restraints currently used at Holland Christian Homes are:  
Seatbelts, Table Tops, Geri-Chairs, and Tilt Wheelchairs.
- c) Environmental Restraints - A barrier to free personal movement which serves to confine a resident to a specific, geographic area (ie. residents with exit-seeking behaviours).

**Note:** Under no circumstances, can two restraints be applied at the same time (for example a lap tray cannot be used at the same time as a seatbelt).

The following devices **are prohibited and not permitted** to be used in Holland Christian Homes:

- 1. Roller bars on wheelchairs and commodes or toilets.
- 2. Vest or jacket restraints.

3. Any device with locks that can only be released by a separate device, such as a key or magnet.
4. Four point extremity restraints.
5. Any device used to restrain a resident to a commode or toilet.
6. Any device that cannot be immediately released by staff.
7. Sheets, wraps, tensors or other types of strips or bandages used other than for a therapeutic purpose.

Holland Christian Homes' Restraint Policy involves an interdisciplinary approach to restraint use and we document all steps of the restraining process.

Our Restraint Policy includes the following requirements:

1. Staff only applies a physical device that has been ordered and approved by the Attending Physician; and where there is a signed consent by the resident (if competent) and/or Substitute Decision Maker/POA and an understanding of the reason for the use of the device.
2. Staff considers alternatives to the use of physical devices, including how these alternatives are planned, developed and implemented (ie. one way-gliders assist to prevent residents from sliding as does the tilt mechanism on many wheelchairs).
3. That the need for the restraint is clearly documented in the resident plan of care.
4. Staff applies the physical device only in accordance with any manufacturer's instructions and the instructions of the Attending Physician.
5. Staff ensures that the physical device is well maintained.
6. Staff ensures that the physical device is not altered except for routine adjustments in accordance with any manufacturer's instructions.
7. Registered staff and PSW staff monitors the resident while restrained at least every hour.
8. Staff ensures that the resident is released from the physical device and repositioned at least once every two hours (this requirement does not apply when bed rails are being used if the resident is able to reposition himself or herself).
9. Staff ensures that the resident is released and repositioned any other time when necessary based on the resident's condition or circumstances.
10. The resident's condition is reassessed and the effectiveness of the restraining is evaluated by the Registered Nurse every eight hours, and at any other time when necessary based on the resident's condition or circumstances;
11. Upon removal of a physical device, post-restraining care is provided to ensure the safety and comfort of the resident.  
Holland Christian Homes also reserves the right to restrain a resident by physical means when immediate action is necessary to prevent serious bodily harm to the resident or to others. In the event such action is required:

12. The resident is monitored or supervised on an ongoing basis and released from the physical device and repositioned when necessary based on the resident's condition or circumstances.
13. Ongoing assessment of the resident's condition is reassessed by the registered nursing staff.
14. The restraint is discontinued when the immediate action is no longer necessary.
15. When the application of a physical restraint is required for to prevent serious injury to a resident or others, the reason for the use of the physical device will be explained to the resident or the resident's substitute decision maker/POA where the resident is incapable.

### **Environmental Restraints**

The only environmental restraint at Holland Christian Homes is in the Dementia Unit. This relates to the fact that the doors of this unit are equipped with special codes to enter and exit the unit. In such cases, where it is identified for the safety of a resident, a resident may be restrained by the use of barriers, locks or other devices or controls if the restraining of the resident is included in the resident's plan of care.

Prior to an internal transfer from another unit within our home to the Dementia Unit, Holland Christian Homes advises the resident and/or substitute decision-maker/POA in writing, of the need for the transfer and why.

**Please note:** Due to the restraining issue, once the care plan identifies that the resident no longer needs this type of intervention, a resident will be transferred off this unit to another unit where this restraint is no longer applied.

### **Bed Entrapment**

According to Health Canada, bed entrapment is defined as an event involving a resident being caught, trapped or entangled in the bed rails, mattress or bed frame of a hospital bed. Several health conditions and resident characteristics have been associated with an increased risk of resident entrapment in hospital beds. These include, but are not limited to, cognitive and communication impairments, small and frail residents, agitation, pain, uncontrolled body movements and bladder and/or bowel dysfunctions.

Although limited information is available about the circumstances and factors leading to the specific cases of resident entrapment, all reported cases of death indicated the involvement of the bed rails in the entrapment.

The use of bed rails in hospitals, nursing homes and home healthcare can help keep residents safe, however, in some situations; bed rails may also pose risks. One risk is entrapment, which involves a resident being caught, trapped or entangled in the bed rails, mattress or bed frame of a hospital bed. Bed system components have also been found to contribute to resident entrapment incidents.

Bed entrapment does not happen often, but when it does, it can result in serious injuries. In some instances, someone's head, neck or chest can get trapped. This can lead to trouble breathing and may even cause death.

Bed entrapment can happen to anyone in any healthcare setting. The risk is greater for seniors, especially if they are frail, confused, restless or unable to control their body movements.

Most specifically, bedrails have been proven to be a risk to seniors, causing broken bones and even death due to bedrail entrapment issues. For this reason, bedrails in our homes will not be used or put up unless the care-plan clearly identifies a need for them to be used.

Residents come to our home from the community and have slept in beds all their lives without bedrails, so unless there is a clinical reason for a resident to have the bedrails, we will not permit the bedrails to be raised on the bed.

The safety and well being of our residents has been and will continue to be our primary concern. This will be a learning process for Faith and Grace Manor staff, as well as the residents and their families. We will all have to work together to make this happen.

We are committed to a minimal or least restraint policy as this allows for the maximum freedom of movement and/or resident's control.

### **Evaluation**

Through our continuous quality improvement efforts, Holland Christian Homes annually evaluates the effectiveness of our restraint policy and identifies what changes and improvements are required to minimize restraining and to ensure that any restraining that is necessary is done in accordance with legislative requirements. Any changes or improvements are to be promptly implemented.

Although there will always be residents who require or feel more secure with restraints, we hope that everyone will work with us to try to keep our home as RESTRAINT FREE AS POSSIBLE.

### **Prevention of Resident Abuse and Neglect**

Holland Christian Homes promotes in its standards and practices the philosophy of care that all residents are treated with dignity, respect and courtesy. **HCH views, most seriously, any type of abuse or neglect of a resident by any staff, volunteer, family, substitute decision-maker, visitor or any other persons who enter the premises at Holland Christian Homes.**

### **Definitions of Abuse:**

Holland Christian Homes defines "abuse" (in accordance with our policy and subsection 2 (1) of the Long Term Care Homes Act) as the following:

#### ***Emotional Abuse***

- a) any threatening, insulting, intimidating or humiliating gestures, actions, behaviour or remarks, including imposed social isolation shunning, ignoring, lack of acknowledgement or infantilization that are performed by anyone other than a resident, or
- b) any threatening or intimidating gestures, actions, behaviour or remarks by a resident that causes alarm or fear to another resident where the resident



performing the gestures, actions, behaviour or remarks understands and appreciates their consequences.

### *Financial Abuse*

- a) any misappropriation or misuse of a resident's money or property.

### *Physical Abuse*

- (a) the use of physical force by anyone other than a resident that causes physical injury or pain,
- (b) administering or withholding a drug for an inappropriate purpose, or
- (c) the use of physical force by a resident that causes physical injury to another resident.

**(Note:** Physical Abuse does not include the use of force that is appropriate to the provision of care or assisting a resident with activities of daily living, unless the force used is excessive in the circumstance.)

### *Sexual Abuse*

- (a) subject to subsection (3), any consensual or non-consensual touching, behaviour or remarks of a sexual nature or sexual exploitation that is directed towards a resident by a licensee or staff member, or
- (b) any non-consensual touching, behaviour or remarks of a sexual nature or sexual exploitation directed towards a resident by a person other than a licensee or staff member.

**(Note:** Sexual Abuse does not include,

- (a) touching, behaviour or remarks of a clinical nature that are appropriate to the provision of care or assisting a resident with activities of daily living, or
- (b) consensual touching, behaviour or remarks of a sexual nature between a resident and a licensee or staff member that is in the course of a sexual relationship that began before the resident was admitted to the long-term care home or before the licensee or staff member became a licensee or staff member.)

### *Verbal Abuse*

- (a) any form of verbal communication of a threatening or intimidating nature or any form of verbal communication of a belittling or degrading nature which diminishes a resident's sense of well-being, dignity or self-worth, that is made by anyone other than a resident, or
- (b) any form of verbal communication of a threatening or intimidating nature made by a resident that leads another resident to fear for his or her safety where the resident making the communication understands and appreciates its consequences.

## *Neglect*

- (a) the failure to provide a resident with the treatment, care, services or assistance required for health, safety or well-being, and includes inaction or a pattern of inaction that jeopardizes the health, safety or well-being of one or more residents.

Holland Christian Home's established Resident Abuse Policy and Procedure encompasses:

- Definitions of what constitutes Resident Abuse and Neglect;
- A Resident Abuse Incident Reporting System;
- A Resident Abuse Incident Investigation System;
- Support for the person abused;
- Education/Training that supports prevention of resident abuse and neglect; and
- Evaluation of our zero tolerance program.

Holland Christian Homes maintains a **Zero Tolerance** for **any** type of abuse of a resident, family, substitute decision-maker, management, staff, volunteer, visitor or any other persons at Holland Christian Homes.

Having a "zero-tolerance" policy means that Holland Christian Homes shall:

1. Uphold the rights of all of our residents to be treated with dignity and respect and to live free from abuse and neglect;
2. Neither abuse, nor allow the abuse of any resident by staff or volunteers, nor condone the abuse of any resident by any other person(s) at the home;
3. Provide information and education regarding resident abuse and neglect and the prevention of resident abuse and neglect;
4. Requirement of all staff and volunteers to report **any and all** suspected, alleged, witnessed or actual incidents of resident abuse **immediately**
5. Treat **every** allegation of abuse and neglect of a resident as a serious matter;
6. Investigate **every** allegation of abuse and neglect of a resident;
7. Take corrective action, including sanctions or penalties against those who have committed abuse against a resident;
8. Administrator and/or DRC and/or HR will refer to the **Decision Trees** as provided by the Ministry of Health Long Term Care when assessing the allegation in determination for reporting to the Ministry as required by the LTC Homes Act.
9. Ensure that the resident's substitute decision-maker, if any, and any other person specified by the resident,
  - i. are notified immediately upon the licensee becoming aware of an alleged, suspected or witnessed incident of abuse or neglect of the resident that has resulted in a physical injury or pain to the resident or that causes distress to the resident that could potentially be detrimental to the resident's health or well-being; and

- ii. are notified within 12 hours upon the licensee becoming aware of any other alleged, suspected or witnessed incident of abuse or neglect of the resident
- 10. Ensure that the appropriate police force is immediately notified of any alleged, suspected or witnessed incident of abuse or neglect of a resident that the licensee suspects may constitute a criminal offence
- 11. Ensure that the resident and the resident's substitute decision-maker, if any, are immediately notified of the results of the investigation immediately upon completion of the investigation, as required by law;
- 12. **Please note:** Holland Christian Homes is not required to notify a substitute decision maker of any incidents of abuse and results of investigations of abuse if the substitute decision maker is the alleged abuser.
- 13. Take action against any person who in any way discourages a person from reporting an incident of abuse and/or who threatens, retaliates or mistreats a person reporting the abuse, even if the abuse is proven to be false; and
- 14. Make every effort to eliminate abuse and neglect of a resident through the in-house quality and risk management programs, including an annual evaluation of the effectiveness of our policy to promote zero tolerance of abuse and neglect of residents. Any changes and improvements which are required to prevent further occurrences are implemented immediately.

Under no circumstances will abuse or neglect of residents by any staff member, volunteer, family or visitor be tolerated. If any staff member abuses a resident, disciplinary action will be taken up to and/or including termination of employment. If any volunteer abuses or neglects a resident, the volunteer will no longer be permitted to volunteer. If any family or substitute decision-maker abuses a resident, they will be issued a no trespass order preventing them from coming onto our property and having contact with the resident.

### **Resident to Resident Incidents**

Holland Christian Homes has clear guidelines and processes in place as it relates to resident abuse and neglect. If a resident to resident incident occurs as a result of resident behaviours / responsive behaviours then the affected resident / Substitute Decision Maker will be contacted and will work together with Holland Christian Homes Management to determine what actions will be taken. ie. Contact Police. **NOTE:** *Holland Christian Homes will supercede this action depending on the circumstances, type of incident and the resulting resident outcome as necessary.*

To prevent abuse and neglect, Holland Christian Homes requires all prospective employees and volunteers to have a Police Check completed prior to hiring. Holland Christian Homes also provides information to staff/volunteers at time of hire/volunteering and annually thereafter on our Resident Abuse and Neglect Policy, aimed at prevention, reporting and eradication of abuse. Employees and volunteers are given a copy of the Resident Abuse & Neglect Policy. In addition, Holland Christian Homes provides annual mandatory educational in-services to staff and volunteers regarding abuse and neglect.

This includes training and retraining of all Holland Christian Homes staff, including:

- a) training on the relationship between power imbalances between staff and residents and the potential for abuse and neglect by those in a position of trust, power and responsibility for resident care, and
- b) situations that may lead to abuse and neglect and how to avoid such situations.

The Resident Abuse and Neglect policy is reviewed annually with Resident and Family Councils.

All staff and volunteers are expected to fulfill their moral and legal obligation to report any witnessed incident or suspected incident of resident abuse or neglect. **Any person failing to report any such incidents and any person who intimidates/coerces another person into not reporting an incident** would be guilty of an offence. Such action(s) would be construed as abuse or neglect, a breach of policy and is liable to appropriate criminal/legal action and/or disciplinary action, up to and including dismissal.

### **Whistle Blower Protection**

“Whistle Blower Protection” ensures that no person shall retaliate against another person, whether by action or omission, or threaten to do so because of information disclosed to an Inspector, to the Director or evidence given in a proceeding in respect to the Long Term Care Act or an inquest under the Coroners Act.

Any person who has reasonable grounds to suspect abuse, neglect, improper or incompetent treatment, unlawful conduct or misuse or misappropriation of funds, must immediately report the suspicion and the information upon which it is based. No person may discourage reporting of any abuse, neglect, improper or incompetent treatment, unlawful conduct or misuse or misappropriation of funds.

Holland Christian Homes protects any resident, staff, volunteer or family who reports incidents of abuse or neglect from any retaliation by others while that person is on the premises of Holland Christian Homes.

### **Mandatory and Immediate Reporting to the Director of the Ministry of Health**

Holland Christian Homes immediately investigates, responds and acts on every alleged, suspected or witnessed incident of abuse and /or neglect of a resident by anyone that Holland Christian Homes knows of, or that is reported to Holland Christian Homes. The Administrator and/or DRC will refer to the Resident Abuse & Neglect Decision Trees as provided by the Ministry of Health Long Term Care when assessing the allegation to determine reporting requirements to the Ministry as required by the LTCH Act.

Holland Christian Homes reports all such incidents to the Director (or designate) of the Ministry of Health, including the results of every investigation and every action taken to such incidents.

### **Reporting to the Director**

Holland Christian Homes or any other person who has reasonable grounds to suspect that any of the following has occurred or may occur will immediately report the suspicion and the information upon which it is based to the Director:

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 Holland Christian Homes or staff that resulted in harm or a risk of harm to the 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 Holland Christian Homes under the Long Term Care Homes Act or the *Local Health System Integration Act, 2006*.

### **False information**

Any person reporting information to the Director they know to be false, will be guilty of an offence.

### **Exceptions for residents**

A resident may make a report, but is not required to, and the issue in regards to reporting false information as an offence does not apply to residents who are incapable.

### **Duty on practitioners and others**

Even if the information on which a report may be based is confidential or privileged, no action or other proceeding for making the report shall be commenced against a person (i.e. Physician, Social Worker, Pharmacist etc) who acts in accordance with reporting unless that person acts maliciously or without reasonable grounds for the suspicion.

### **Offence of failure to report**

Holland Christian Homes, Holland Christian Homes staff, any person who provides professional services to our residents in the areas of health, social work or social services work and any person who provides professional services to Holland Christian Homes in the areas of health, social work or social services work would be guilty of an offence if they fail to make a report under this policy.

### **Offences re suppressing reports**

Every person who coerces or intimidates a person not to make a report, and/or discourages a person from making a report and/or authorizes, permits or concurs in a contravention of the duty to make a report is guilty of an offence.

All Mandatory reports are made to:

The Director, Ministry of Health and Long Term Care  
Performance Improvement and Compliance Branch  
1075 Bay Street, 11<sup>th</sup> Floor  
Toronto, ON M5S 2B1  
1-866-434-0144

## **Accessibility for Ontarians with Disabilities Act**

This legislation is aimed at ensuring that we identify, remove and prevent barriers for people with disabilities in areas of daily living.

This law requires us to:

- Communicate with a person with a disability in a manner that takes into account their disability
- Let people with disabilities bring their service animals onto the premises
- Let people with disabilities be accompanied by their support persons while on the property
- Train staff to know these standards and help all staff to understand the need to follow these standards

### **Principles**

- Dignity – service is provided in a way that allows the person with a disability to maintain self-respect and the respect of other people.
- Independence – Allowing a person with a disability to do things on their own without unnecessary help, or interferences from others.
- Integration – Service is provided in a way that allows the person with a disability to benefit from the same services, in the same place, and in the same or similar way as other customers, unless an alternate measure is necessary to enable the person to access the building or the services.
- Equal Opportunity – People with disabilities have an opportunity equal to that given to others to access the goods or services.

## **Our Commitment**

In fulfilling our mission, Holland Christian Homes strives at all times to provide our services in a way that respects the dignity and independence of people with disabilities. Holland Christian Homes is committed to giving people with disabilities the same opportunity to access our services and allowing them to benefit from the same services, in the same place and in a similar way as seniors who qualify for our services.

## **How HCH Complies with the AODA Standards**

Holland Christian Homes complies with the 14 requirements summarized below:

1. Holland Christian Homes has established policies, practices and procedures on providing services to people with disabilities.
2. Policies, practices and procedures are consistent with the core principles of independence, dignity, integration and equality of opportunity.
3. People accessing our services have the right to use their own personal assistive devices to access services and about any other measures we offer (assistive devices, services, or methods) to enable them to access our services.
4. Holland Christian Homes staff and volunteers are trained to communicate with a person with a disability in a manner that takes into account his or her disability.

5. Holland Christian Homes permits people with disabilities to be accompanied by their guide dog or service animal in any area of our home.
6. Holland Christian Homes permits people with disabilities who use a support person to bring that person with them while accessing any services in our home.
7. Where admission fees are charged, Holland Christian Homes provides notice ahead of time on what admission, if any, would be charged for a support person of a person with a disability.
8. Holland Christian Homes provides notice when our facilities or services that people with disabilities rely on to access or use our services are temporarily disrupted. Such notices would be posted throughout the building.
9. Holland Christian Homes provides annual training to staff, volunteers, contractors and any other people who interact with the public or other third parties on our behalf.
10. Holland Christian Homes trains staff, volunteers, contractors and any other people who are involved in developing our policies, practices and procedures on the provision of goods or services.
11. Holland Christian Homes has established a feedback form (located at reception) for people to provide feedback on how we provide services to people with disabilities and how we respond to any feedback and take action on any complaints. Holland Christian Homes makes the information about our feedback process readily available to the public.
12. Holland Christian Homes documents in writing all our policies, practices and procedures for providing accessible customer service.
13. Holland Christian Homes posts a copy of this policy notifying customers that our policies are available upon request on our website.
14. When giving documents required under the customer service standard to a person with a disability, Holland Christian Homes provides the information in a format that takes into account the person's disability (ie. a CD disc and/or hard copy sheets).

### **Scent Policy**

Holland Christian Homes encourages all residents, staff, volunteers and visitors of the Home to be “environmentally friendly” and reduce the use and/or presence of allergens/aromas while in the Home. Staff is encouraged to limit the amount of scented products they use on a daily basis when coming to work. This would include hairspray, perfumes, colognes, lotions and scented deodorant to help prevent adverse reactions from other staff or residents. Residents will be encouraged to reduce their use of strong scents within the Home to help prevent allergic reactions of other residents. Visitors to the Home will be encouraged to reduce the allergens they wear and bring in for their loved ones. Reasonable effort will be made to accommodate individual restrictions when possible.

When a resident is assessed or diagnosed as being allergic or sensitive to fragrances, nursing staff post one small square purple “Allergy Alert” sign/notice on the resident door where all staff and visitors can see. Please abide by the posted notice at all times.

**Allergy Alert!**



**Fragrance Free Zone**

Thanks for helping to keep our residents and staff healthy.

### **Taking of Photos/Videotaping**

Residents/families are asked upon admission if they consent to the taking of photos while living in Holland Christian Homes. We will often post pictures or use on our website or publish in newsletters. To respect the wishes of our residents and their families for whom they do not want such pictures used, VISITORS ARE NOT PERMITTED TO RECORD VOICE, VIDEOS OR TAKE PICTURES OF RESIDENTS, STAFF OR VOLUNTEERS WITHOUT THE CONSENT OF MANAGEMENT.

### **Room Rentals / Other Building Services**

Available for rent by family and other members of the community are various rooms within Holland Christian Homes. A nominal fee is charged for all rooms to cover housekeeping-related costs. You may book any of these rooms through the main Administration Office (see attachment for more details).

### **Concerns, Compliments & Questions**

Please relay your compliments, issues and concerns to us. If you have a question, problem or suggestion - we want to know. All concerns are taken seriously and action is taken to attempt to resolve the concern to everyone's satisfaction. You can approach the Registered Nursing Staff, the appropriate Department Manager or the Administrator. Additionally, “Concern” forms are available on the Resident and Family Bulletin Board across from the elevator in the front lobby.

### **Communication**

There is a Resident and Family bulletin board in the Front Lobby near the elevator. Most general communication is posted there. Additionally, there is a brochure display next to this board that holds information from Faith and Grace Manor, the Ministry of Health and Long Term Care as well as other organizations that may be of interest to Residents or families.

A quarterly Resident & Family newsletter provides information about the Home on an ongoing basis. We are happy to email this newsletter and other information to you. Help us stay green by providing the Administration Office with your email address. It will not be shared with others.



The Registered Nurse (RN) and Registered Practical Nurse (RPN) is in charge of each Resident Home Area and guides the overall care of the Residents and communicates with the Care Team. Please speak to the RN or RPN about as they are the link to all members of the Care Team and family. The Registered Nurse (RN) is in charge of the Home 24 hours per day, 7 days per week, and always available to discuss any matter in the absence of a manager and will communicate any issues to the appropriate member of the Care Team. Please don't hesitate to contact anyone on the management team for any issues, concerns, or compliments.

### **Lines of Communication**

**It is the policy of Holland Christian Homes, that the following steps are taken when raising concerns, lodging complaints or recommending changes:**

- STEP 1:** Speak directly to the staff member involved and/or Charge Nurse on the unit. If you are not satisfied with their response or the issue is not resolved, move onto step 2. (Complete a "concern" form or "speak your mind" form)
- STEP 2:** Speak to the Manager of the Department involved. If you are not satisfied with their response, move onto step 3.
- STEP 3:** Speak to the Administrator. If you are still not satisfied with the response given, move onto step 4.
- STEP 4:** Speak to the CEO. If you are still not satisfied with the response given, move onto step 5.
- STEP 5:** Submit your complaint/concern in writing to the Board of Directors. If you are still not satisfied with the response given, move onto step 6.
- STEP 6:** For issues related to long-term care, contact the Ministry of Health Long Term Care Action Line:

### **LONG TERM CARE ACTION LINE**

Quality care matters.

If you want more information,  
have a concern or want to register a complaint about a  
Long-Term Care Facility, call this toll-free number:

**1-866-434-0144**

7 days a week, 8:30AM – 7:00PM

OR

Send a written letter; by mail, to the responsible Director at the Ministry of Long Term Care at the following address:

Director, Performance Improvement and Compliance Branch

Ministry of Health and Long Term Care

1075 Bay Street, 11<sup>th</sup> Floor

Toronto, ON M5S 2B1

You will receive a letter or phone call to let you know that the ministry has received your complaint. The Director will refer your complaint to an Inspector who will look into your matter.

## **Volunteers**

Holland Christian Homes values the important contributions that volunteers make to enhance the quality of life for our residents.

All prospective volunteers will be interviewed and screened thereby providing an opportunity to learn about the facility, its mission and available volunteer positions. Individuals who fail our screening process will not be accepted as volunteer. New volunteers attend an orientation conducted by the Volunteer Coordinator prior to starting as a volunteer at Holland Christian Homes. Volunteers are responsible for maintaining the confidentiality of all proprietary or privileged information to which they are exposed while serving as a volunteer, whether this information involves a staff member, volunteer, resident or other person or involves business practices of Holland Christian Homes.

The Volunteer Services Department is committed to providing support for all volunteers. As family members you may consider joining as a volunteer or benefiting from some of the training that we provide for our volunteers. Examples of training include meal time assistant and understanding dementia.

The Volunteer Services Department strives to promote the talents and contributions of our volunteers. To show the Homes' appreciation, both group and individual recognition events are planned on a regular basis.

If you are interested in making a difference in the lives of our residents, please do not hesitate to contact our Volunteer Coordinator.

## **Behavioural Management Program**

Holland Christian Homes maintains an interdisciplinary Behavioural Management Team who works to identify Risk levels for those residents who exhibit behaviours and attempt to find solutions to effectively manage behavioural issues. There is a Fulltime Behaviour Support Nurse available to support the team and complete Behavioural Care Plans for all Residents. The team strives to find ways to enable the individual resident to reach his/her optimal level of mental, physical, cognitive and/or social functioning. Education and involvement of families/representative is an integral component of this program.

## **Secured / Locked Dementia Units (FM1 and GM1)**

Care is provided, designed and organized to meet the spatial and care needs of cognitively impaired residents. Ambulatory residents with Alzheimer's who wander or are exit-seeking are provided with a safe environment. The environment specifically designed for dementia care also benefits residents with physical and other psychological impairments. The whole approach is holistic to meet the assessed needs and goals of each individual resident identified on the care plan. Staff is specially trained to equip them with the necessary skills to manage dysfunctional behaviours. For the safety of the residents living in this unit, we would ask everyone's cooperation to ensure that the doors to these units are kept locked/closed at all times!

The only environmental restraint at Holland Christian Homes exists because of our Dementia Units. This relates to the fact that the doors of this unit are equipped with an alarm alerting staff when a resident approaches the doors and tries to exit and/or by keypads to prevent a resident from exiting where this could be a risk to their safety. This restraining by the doors is noted in the resident care plan.

Prior to an internal transfer from another unit within our home to the Dementia Unit, Holland Christian Homes advises the resident and/or substitute decision-maker in writing, of the need for the transfer and why.

**Please note:** Due to the restraining issue, once the care plan identifies that the resident no longer needs this type of intervention, a resident will be transferred off this unit to another unit where this restraint is no longer applied.

## **Donations**

### **Clothing and Furniture**

We thank you for your consideration; however Holland Christian Homes does not accept donations of furniture, lamps, clothing or appliances etc. You must remove all items when you vacate the room. We will accept specialized clothing (specialized open back clothing with easy to use straps and buttons which can be shared with other residents who do not have the financial means to purchase such clothing) and wheelchairs in good condition with footrests. Please speak to the Charge Nurse, Administrator or DRC or Nursing Supervisor before leaving any item for donation.

### **How can you help? Make a Donation!**

Holland Christian Homes has continually provided the highest quality of care to its community. Holland Christian Homes is continually growing to enlarge its facilities and services in order to best serve our residents and community. However, your support is vital. There are many ways that we as individuals can make a difference. Making a financial commitment to help enhance the lives of our seniors is a wonderful way to share your good fortune both today, and in the future to ensure the long-term development and growth of Holland Christian Homes.

Holland Christian Homes needs your support. Each donation, whatever the amount, can make a real difference. Gifts of cash are welcomed in the form of cheques. As well, gifts-in-kind including gifts of stock are greatly appreciated.

### **Gifts of Insurance and Bequests**

Planned gifts of Insurance, bequests, and the proceeds from RRSP's and RRIF's, as well as gifts of marketable securities, provide some of the most tax effective ways for donors to support Holland Christian Homes.

**You will receive a charitable tax receipt for all donations made. Donations may be made at our reception area.**

*Thank you in advance for your support!*