



# **Resident and Family Guide**

## **Long Term Care**



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CBLTCH*

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## **INTRODUCTION**

Welcome to Long Term Care. The purpose of this booklet is to share information about our services.

## **CONFIDENTIALITY**

Any information concerning residents is held in the strictest confidence by our staff of the Home. Information is only to be shared with the individual(s) identified as the “Next of Kin”, Substitute Decision-Maker or alternate contacts identified by the resident or the Next of Kin upon admission. The individual contacted by our staff is responsible for communicating the information to other family members.

## **MOVING INTO LONG TERM CARE**

### ***Relocating to LTC***

A tour will/can be offered when the client is placed on the Long Term Care wait list. The resident/family will be contacted in advance by the Social Worker/Care Coordinator regarding the vacancy. The time for admission is coordinated with the Home and the family. The resident and family will be met by the Social Worker/Care Coordinator and taken to their new living area, introduced to the nursing staff and to their roommate (if applicable) and shown to their room.



The nurse will spend some time with the resident and family to obtain needed information. The name of the Next of Kin, along with address, telephone number or any other contact information, will be verified at that time for purpose of contact by the Home if necessary. Resident’s families are asked to notify nursing staff of any changes to the Next of Kin’s address or telephone number. This information is very important when contact with the family is needed.

### ***Medications***

When you move into the Home, ensure you bring all your medications with you. These should include prescriptions, creams, ointments, vitamins, cough, cold, pain and herbal preparations, etc. Your medications will be checked to ensure the best possible medication history and that you receive the best and correct medication therapy.

### ***Family Involvement***

It is very important that a family representative come with the resident on moving in day for the purpose of providing information for care planning as well as to help the resident settle in his/her new home. The involvement of the family in the ongoing care planning as well as participation in resident's daily life is encouraged.

When a person moves into a Long Term Care Home, he/she may experience separation anxiety which is a feeling of loneliness and detachment from family and friends. Family involvement provides an opportunity to reduce this anxiety and to show the resident that he/she, though away from home, is still a very important part of the family and is still dearly loved and not forgotten.

Our staff understand that the responsibility for resident care remains with them, however family participation in the resident's day to day life is encouraged.

Some ways you can help include:

- Assist with grooming (hair, nails, shave, cosmetics, etc.)
- Assist with meals (with guidance)
- Tidy table/desk tops and shelves
- Walk or take for a ride in wheelchair (possibly outside if weather permits)
- Assist with exercises and recreational activities
- Assist to bathroom (with guidance)

- Get refreshments (i.e. juice/milk from kitchen) (with guidance)
- Read books, magazines, newspapers
- Keep resident abreast of family happenings (e.g. weddings, births)
- Take resident out for ice cream, ride, special events
- Bring pet for a visit
- Encourage children to visit

We ask that family members or visitors do not provide care to other unrelated residents without discussing this with nursing staff to ensure privacy and safety of all involved.

### ***Visiting***

Visitors are welcome at any time but should be aware that the early morning hours are used for personal care such as washing and bathing. When residents live in rooms with others, the need of the other residents must be respected, including the need for adequate rest. There are times when family members need privacy. Limited space is available for family and friends to use. Visitors must observe all fire, smoking and other regulations. The Nurse-in-Charge should be informed whenever the resident leaves the unit with a visitor for whatever reason. The entrances are locked after 9:00 p.m. There is either a door bell or a telephone available at the entrance for access. In order to decrease the spread of illness, visitors with cold and flu-like symptoms are asked not to visit the Home. Western Health reserves the right to restrict visitors. Under certain circumstances visiting may be restricted such as:

- Requests by the resident or the Next of Kin to restrict visitors,
- Situations when the well-being of the resident may be compromised,
- Circumstances when the rights of other residents may be compromised,

- When visitors display unacceptable behaviors,
- In the event of visitor precautions in the facility for infection prevention and control purposes, or
- Events in which visitation would impede our ability to provide care for the resident.

### ***Resident Identification***

A picture of each resident will be taken for identification purposes.

### ***Concerns, Complaints and Compliments***

The goal of Long Term Care is to provide quality care to residents; however, there will be instances where residents and families may be unhappy with the quality of care and may wish to bring forward concerns about care and services. The first step is to discuss the matter with the Nurse-in-Charge, the Care Coordinator or the Social Worker. If the matter is not addressed satisfactorily, an appointment with the Manager/Director can be arranged. We encourage residents to address concerns directly through the designated family representative/Next of Kin. Concerns can be expressed verbally or in writing. When reviewing a concern, our staff will only share information with those involved on a need-to-know basis in order to thoroughly address the concern that is being raised. All concerns are reviewed and feedback provided.



Compliments and positive feedback can also be shared in writing, email or by calling the unit, Manager or Director. Positive comments and feedback are shared with the staff involved. We appreciate when residents and family share feedback on their experience.

### ***Resident and Family Experiences***

At different times, as part of our quality improvement activities, residents and families are asked to complete questionnaires or take part in group discussions to share their experience with the care and services provided. Your feedback is very important.

### ***Resident/Family Council***

Resident/Family Council meetings are held in most Long Term Care Homes. These meetings provide an opportunity for residents and families to be involved in new policies and changes taking place and to discuss any issues which may be of concern to most or all of our residents. The meetings take place on a regular basis. Residents and families are encouraged to attend. Further information is available from the Social Worker or Manager on site.



In addition, in the Fall of 2017 Western Health will be introducing a Regional Resident and Family Engagement Committee. The committee will be made up of selected resident/family representatives from each of the Long Term Care Homes, the Regional Director of Long Term Care and a Long Term Care Social Work representative. Resident/family representatives will serve a two year term. The purpose of this committee is to provide an opportunity for individuals with lived experiences and vested interest in Long Term Care to assist in planning, implementing and evaluating initiatives to improve the overall health and well-being of residents in Long Term Care.

### ***Furniture and Belongings***

In Long Term Care, we attempt to accommodate personal furniture and belongings as long as space is available for staff to safely work and fire regulations are maintained. All residents' rooms are furnished with single beds, over-bed tables, built in wall closets and chairs; however, we encourage residents to bring in some personal belongings as well. Although, we wish to create as warm and as comfortable environment as possible, it is equally important that we create a safe environment.



Please note the following requirements:

- The Care Coordinator or nurse must be consulted before personal furniture or equipment is brought to the Home.
- A refrigerator may be permitted, but it is the responsibility of the family/resident to clean and maintain it.
- Suitcases and other luggage must be taken home by families.
- Knick-knacks, plants and other items should be kept to a minimum.
- Rugs and mats are not allowed as they are potentially unsafe.
- Furniture should be upholstered with a material which can be wiped and disinfected (i.e. vinyl, leather). Furniture with cloth material is discouraged from being brought into the Home.

**PLEASE NOTE: If permission is not provided for furniture or belongings to be brought in, you will be asked to remove the items.**

### ***Electrical Appliances***

Appliances including but not limited to items such as computers, tablets, televisions, refrigerators, radios, electric razors and hair dryers may be brought to the Home but must be CSA approved. Certain electrical devices may not be

permitted for use in a resident's room, please check with the Care Coordinator before bringing items to the Home. An electrical check is required by maintenance staff before use. These appliances must be plugged directly into the wall outlet or an approved power bar; extension cords are not permitted. If a resident has a television or radio, headphones or earphones may be needed to avoid disturbing others. Kettles, toasters, microwave ovens and refrigerators are available for resident and family use in designated areas on each unit. If a food item is left in the refrigerator in the common living area, please ensure that it is labeled with the resident's name and date.

### ***Equipment***

If a resident has equipment such as a walker or wheelchair, or is considering the purchase of such equipment, please contact the Occupational Therapist or Physiotherapist for input into appropriate choices.



Residents and family members are required to have all personal walkers or wheelchairs clearly identified with the resident's name prior to admission.

### ***Clothing and Footwear***

All clothing is labeled with the resident's name by the Home. New clothing purchased must be labelled prior to wearing. It is suggested that residents bring clothing to the Home prior to relocating in order to have it labeled. Laundry services are provided free of charge. All clothing should be wash and wear, as routine ironing services are not available. As well, the Home cannot take responsibility for wool, silk, linen or other fine fabrics that require special care. We ask that residents and families restrict the amount of clothing brought to the Home due to the limited space available for storage. There is a 6-7 day turnover



from laundry in the Home. Families are asked to take off-season clothing home. We recognize that families may wish to continue with laundering their loved ones clothing. If this is the case, please have clothing labeled in order to minimize loss of such items.

Due to the degree of frailty of some of our residents, specialized clothing may be beneficial. Families are encouraged to speak to the nursing staff prior to purchasing or altering clothing. There are catalogues available from clothing shops that offer clothing that is easy to wear and affordable. All residents should have comfortable, well fitted and appropriate footwear.

### ***Glasses, Hearing Aids and Dentures***

It is impossible to ensure that eyeglasses, hearing aids and dentures will never be damaged or misplaced. If these types of articles are lost, we will do a reasonable search. There may be a means of replacement if the resident qualifies for financial subsidy under the Advanced Education and Skills Program. If the resident does not qualify for subsidy under this program, the resident will have to pay the cost of having their dentures, eyeglasses or hearing aids replaced. Requests to purchase or repair eyeglasses, dentures or hearing aids are made through the Social Worker/Care Coordinator.



### ***Valuables***

Resident rooms cannot be locked; as a result, we are unable to protect valuables (e.g. money, jewelry, collector items, etc.), furnishings and personal belongings from breakage or loss. It is strongly recommended that residents not keep valuables in their rooms, especially those that, if lost or broken, would cause great distress to that resident or family.

Sometimes a resident living with dementia may accidentally damage or misplace items. The Home cannot replace or provide financial compensation for

any lost or damaged personal furnishings and belongings. If an item is damaged or missing, please let nursing staff know as soon as possible so that they can complete a reasonable search for the item. If warranted, a further investigation may be conducted by management and if required law enforcement may be contacted.

## **COMMUNICATION**

### ***Internet Access for Residents and Families***

Free wifi is available for residents. Residents can be provided with a user name and password to access the wifi. Please note that due to limitations with our network, we cannot always guarantee its availability and quality. Please feel free to bring forward any feedback on access.

### ***Information Bulletin Boards***

There are bulletin boards on each unit which are used to inform residents and families of meetings, recreation activities or other items of interest. Signs and posters may also be posted throughout the Home notifying residents and families of special events.

### ***Quality Monitoring***

Information is available about the quality of care provided in our Long Term Care Homes. Information is available on request and performance measures are posted occasionally. Families and residents are encouraged to access public indicators of quality of care in Long Term Care that are available from the Canadian Institute for Health Information. The website <http://yourhealthsystem.cihi.ca/hsp/indepth?lang=en#/> provides information about performance of the Long Term Care Homes within Canada and Western Health.

### ***Telephone and Cable***

Telephone and cable hookup is available. There are varying processes and cost throughout the region. Please contact the Social Worker/Care Coordinator at the applicable Home for options and cost.

### ***Mail and Newspapers***

Mail will be delivered to the residents. Residents and families are responsible for making arrangements for the delivery and payment of newspapers. Outgoing mail arrangements can be made at the Administration office, costs may apply.

### ***Room Assignments***

Room changes within the Home may be required or requested. This could occur due to resident need, emergency situations or resident/family requests. The Home reserves the right to make necessary room changes, but will make every effort to keep changes to a minimum and to notify families prior to the room change. If it is not possible to notify the family prior to the room change, every attempt will be made to notify the family as soon as possible after the change.

### ***Day/Overnight Pass***

Residents are encouraged to attend day outings, family functions and extended visits with family. If residents wish to go out for the day or overnight, the nursing staff must be notified in advance. This is documented in the resident record and an expected time of return must be given. Long Term Care costs are still continued while the resident is away from the Home.



### ***Interdisciplinary Care***

Staff from many departments work as a team to provide the best possible care for residents and this is called Interdisciplinary Care. After admission, the

resident is seen by various professionals who, with the resident and family assess the resident's needs. A team meeting is then held approximately two months after moving into Long Term Care to provide the opportunity for the family and resident to meet with the staff to discuss the care needs and develop an individual plan of care. Future meetings will be held approximately yearly or as needed.

### ***Discharge***

If a resident's care needs change, we will work with the resident and family to determine the appropriate plan of care. This may include relocation to another more appropriate environment. If a resident chooses to leave Long Term Care, staff will help with making plans for care in their new home.

### ***Death of a Resident***

The family is contacted by a member of the nursing staff when a resident passes away. It is expected that a family representative make funeral arrangements and contact the funeral home at the time of death. Details and costs of funerals are the responsibility of the resident and the family. Pre-planned funerals are encouraged. The Home has a policy related to the removal of belongings following death. Due to the high demand for Long Term Care beds, we ask that this task be completed within 24 hours of the death. Our staff will work with families to assist with removal of personal belongings and will provide safe storage for up to 30 days.

## **OUR SERVICES**

### ***Clinical Nutrition and Meal Services***

Food Services are pleased to provide a 3-week menu cycle offering many traditional Newfoundland foods cooked on site. Residents are offered three nutritious and appetizing meals a day and an evening snack. All residents are encouraged to provide input into the menu and to enjoy their meals in the beautiful



common dining area. In the event that your loved one has any special requests that cannot be accommodated in-house, families are welcome to bring special items in as long as they check with the Dietitian or nursing staff before giving these items to the resident. There is a kitchen in the resident living space that is equipped with foods like tea, juice, milk, bread, biscuits, yogurt, puddings and other nutritious snacks for between meals if desired.

The Dietitians in Long Term Care work with residents, families and staff to develop individualized care plans designed to meet resident needs. An initial nutrition assessment is completed within 8 weeks of admission. Yearly monitoring is also provided as well as consultative services as required. Our philosophy is food first and it might be helpful to know, when appropriate, we use a liberal approach to diet recommendations in the Long Term Care setting. In addition to assessing resident swallowing ability and modifying food and/or fluid texture to ensure safe nutritious foods are provided to the resident while also meeting nutrition needs, the Dietitians also provide education to residents, families and staff on proper feeding techniques, improving nutrition/hydration status, diabetes management, bowel care, wound management, weight loss and oral nutrition supplementation.

### ***Medical Services***

All residents must have a primary care provider. Residents are seen on a regular basis by their primary care provider, either a Family Physician or a Nurse Practitioner. As deemed necessary, residents will be provided with access to other services such as acute care and specialist services.

### ***Telehealth***

Telehealth uses video to connect residents to a health care provider who is located at a different site. A telehealth appointment is very similar to a face to face appointment but the resident is able to remain in their Long Term Care Home for the appointment. Through Telehealth, the resident is able to see, hear and talk to their provider, without having to leave their home.

### ***Nursing***

Nursing care is provided by Registered Nurses (RNs), Licensed Practical Nurses (LPNs) and Personal Care Attendants (PCAs) on a 24-hour basis.

### ***Occupational Therapy***

Occupational Therapists support everything that people do in their lives that has meaning and value for them. This includes activities such as looking after themselves (self-care), enjoying life (leisure) and contributing to work, purpose and productivity.

Occupational Therapists work with residents to help them break down the barriers to meeting their everyday activities. For example, the Occupational Therapist may help a resident to become more independent with eating by suggesting special utensils; or may help a resident move around the Home by recommending special seating or a wheelchair. The Occupational Therapist assesses each resident's needs when they move into Long Term Care and contributes to the individual care plan for each new resident.



### ***Pharmacy***

Medications required by residents in Long Term Care are provided by the Pharmacy, there may be a cost associated with medications. Medications are reviewed every three months. If you have questions regarding cost associated with medications, this can be discussed with the Social Worker/Care Coordinator.

### ***Physiotherapy***

Physiotherapy assists residents in maximizing their functional capabilities. Emphasis is placed on the resident's range of motion, strength, balance, ability to transfer and independence. All residents who move into Long Term Care are assessed by the Physiotherapist within 8 weeks. Physiotherapy treatment may be provided by a Physiotherapist or a Physiotherapy Support Worker.



### ***Social Work***

The role of the Social Worker is to support residents and families in the transition from the community to Long Term Care. Interdisciplinary Care conferences are coordinated by the Social Worker, which include the resident, family members and Interdisciplinary Team members. The Social Work staff and Care Coordinator are also available to review financial information and to discuss eligibility for programs in Long Term Care as required. The Social Worker is also available to provide individual counselling for residents and families.



### ***Therapeutic Recreation***

Therapeutic Recreation provides leisure opportunities and therapeutic programs for all residents for the purpose of promoting quality of life and enhancing normalization. The Recreation Specialist assesses the individual needs of the resident and develops a care plan that is followed by the recreation worker at the site. A number of volunteers assist the recreation workers with programs. Planned activities include bus outings, bowling, entertainment, physical exercise, baking and cooking. As



well, there are many one-on-one therapeutic approaches like reminiscing, storytelling and sensory stimulation. The activity schedule is posted monthly. At times, families will receive invitations to attend some of the special events that are planned. Photos are regularly taken and they can be shared with residents and their families upon request.

### ***Pastoral Care***

Pastoral Care services are available to assist with pastoral care and spiritual needs. This service is made available through denominational chaplains, parish



clergy and trained lay pastoral volunteers. Inform the nurse if you wish to see someone from Pastoral Care Services. These services include individual visits, weekly worship services and special events. The Pastoral Care Committee schedules church services. There are

interdenominational worship services and the schedules for the same are posted throughout the Home.

### ***Gift Shop***

Most Homes have gift shops on site. Money raised by the gift shops is used to provide supplies and equipment needed by the residents.

### ***Hairdresser and Barber Services***

Hair care services are provided at each Home at a cost to residents. Information regarding costs and requests for hair services may be directed to recreation or nursing staff.

### ***Volunteer***

Volunteers play an important role in Long Term Care. Volunteers help to promote self-esteem and a sense of well-being of residents and help to enable residents to participate in activities reflective of their values, strengths, needs, interests and abilities. Volunteers enhance the quality of life for residents by

complementing services provided by staff. Inquiries may be directed to the Volunteer Coordinator/Volunteer Liaisons at each site or contact the Regional Volunteer Resources department at 709-637-5369 or via email at: [beverlytetford@westernhealth.nl.ca](mailto:beverlytetford@westernhealth.nl.ca) for more information.



## **GENERAL INFORMATION**

### ***Visitor Parking***

Parking is available for family and visitors. Each location has one parking spot designated for seniors. Western Health recognizes that creating senior friendly spaces is important to support healthy and active living for older adults. Creating an age friendly environment enables seniors to age actively and stay involved in their communities. These parking spaces are intended to support older adults who may have mobility issues.

### ***Restraints***

Western Health promotes a philosophy of least restraint and supports an individual's right for freedom, dignity, respect and choice. Restraints, such as medications or devices that restrict movement, can pose a safety risk to the well-being of individuals. Chemical and/or physical restraints are only used in extenuating circumstances for brief periods after team assessment and after discussion with the resident or family.

Specialized seating and other devices, when used to assist with positioning, mobility or quality of life, would not be considered a restraint.

### ***Advance Health Care Planning***

A **Power of Attorney** is a legal document which gives one or more persons the power to act on behalf of another person in their financial affairs. A Power of Attorney is not valid in the event that a person becomes legally incapacitated.

An **Enduring Power of Attorney** is a special kind of Power of Attorney that continues to be valid if the donor becomes legally incapacitated. For this reason an Enduring Power of Attorney is useful as it allows a person to determine, prior to any incapacity, how he or she wishes to have his or her financial affairs handled should mental incapacity occur.

A **Living will** is a document, similar to an Advance Health Care Directive, that gives instructions for an individual's future health care. Living Wills are not recognized by Newfoundland and Labrador law.

A **Substitute Decision-Maker** is a person named to make health care decisions for someone else when that person is no longer able.

It is recommended that each person entering Long Term Care have an **Advance Health Care Directive (AHCD)**. An AHCD is a written copy of a person's health care wishes which is used when an illness or injury leaves a person unable to make their health wishes known to others. Residents and families may want to discuss this with their Doctor/Nurse Practitioner in advance. This should reduce problems over deciding what treatments a person would want.

There is no cost to make an AHCD and anybody can write one. For further information or help with making an AHCD, you may contact your Primary Care Provider, Community Health Nurse or Social Worker before you enter Long Term Care or a member of the Interdisciplinary Team once you have moved into Long Term Care.

Each resident/Substitute Decision-Maker must review and sign the "Move-In Agreement" upon admission to any Long Term Care facility or the Protective Community Residence. These documents discuss topics such as:

- General care and treatment
- Transfer and discharge
- Personal property

- Personal and health information
- Advance Health Care Directives, Advance Care Planning and other court approved documents
- Feedback process
- General living in Long Term Care

### ***Resuscitation***

On admission, a Registered Nurse, Nurse Practitioner, Social Worker, or Physician will talk to you about your resuscitation wishes. People have the right to be involved in decisions about their care. The right to decide about treatment also includes the right to decide about Cardiopulmonary Resuscitation (CPR). CPR is done to restart the heart and lungs when they suddenly stop functioning. Some people choose not to have CPR. This does not mean that all medical treatment will stop. We will continue to provide care, comfort and support to people and their families. When death is near, our aim is to allow people to die with peace and respect.

### ***Foot Care***

All nursing staff are able to complete foot care, but advanced foot care is provided by specially trained nurses.

### ***About Me***

Residents and families will be asked to complete the “*About Me*” life history profile with a member of the Interdisciplinary Team.

“*About Me*” enables our staff to learn about the resident’s past work, hobbies, talents and experiences. It is important to know about the resident to develop a care plan unique to each resident.



### ***Family Involvement***

Sometimes during a resident's stay in Long Term Care, he/she may require additional support. For example, a resident could be having problems settling in, require a medical procedure or be experiencing difficulty with meals. As part of our care team, there will be times when we will ask families to assist staff by participating in a resident's care. This family support will be a tremendous help to your loved one.

### ***Specialized Care for Dementia***

Some residents may need specialized care. Examples include:

- A risk of harm or injury to self,
- A risk of elopement (leaving the building), or
- A risk of harm or injury to other residents due to an inability to manage behavior and psychological symptoms (BPSD).

Depending upon the risk, a resident may be transferred to a more secure unit or provided with a wander alert device as supplied by the Home. The decision regarding an appropriate unit within the Western Region is made by the Interdisciplinary Team in collaboration with the family. Residents are reviewed regularly to determine if the risks associated with BPSD have changed to determine if the current unit/facility is appropriate for the resident's care needs.

### ***Gifts***

If family are looking for suggestions for appropriate gifts for a loved one, please check with nursing staff. The team can provide a list of gift suggestions based on the resident's need. This is important to ensure that gifts are on certain units with respect to safety. For example, artificial plants instead of real plants, the need to avoid sharp or breakable objects, and so on.

Assistance can be provided for residents to purchase gifts. Although we recognize that families and residents may like to thank staff with gifts, Western

Health employees are not able to accept any gifts, other than one of limited value. Under no circumstance is an employee able to accept monetary gifts from residents or their families.

### ***Scent Free Policy***

Western Health has a *Scent Free (No Scent/Low Scent) Environment Policy*. Some residents and staff have allergic reactions to scented products. Family and visitors are asked not to wear scented products or bring in scented items for residents i.e.: powders, perfumes, aftershaves, certain flowers, etc.



### ***Fire Drills and Security***

The Fire Alarm System is activated on a regular basis for the purpose of testing our fire procedures. The alarm is sounded and the residents and visitors are given directions by staff on the unit. If visiting when the fire alarm sounds, please remain calm and take direction from staff.

### ***Allergies***

Allergies are identified on admission. Some residents may have allergies to certain foods or products. This does not mean that residents cannot have these items, however, you must check with nursing staff prior to bringing them in to ensure the safety of others.

### ***Swallowing Difficulties***

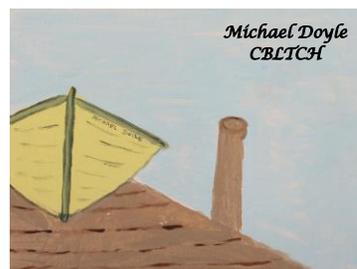
Some residents may experience difficulty with swallowing. As a result, some residents may have an increased risk of choking. Please do not offer any food or beverage to a resident who may not be able to tell you of his/her situation. Please check with the nursing staff first.

Long Term Care has introduced safety measures to reduce choking risks for residents such as:

- A Screening Tool to determine choking risk – this screening tool is completed upon admission and/or if any change is noted in your loved one’s feeding pattern,
- Supervision is provided during meal times,
- Residents are encouraged to have their meals in the common dining area,
- Staff are trained in Foreign Body Obstruction techniques.

***Alcoholic Beverages***

Alcoholic beverages can be purchased by the family or resident for personal consumption. To ensure the safety of all residents, alcohol must be stored in a locked area. Alcohol can interact with medications. It is requested that alcohol not be shared with other residents unless discussed with the nursing staff. Alcohol may be provided to residents at recreation functions.



***Smoking***



Smoking in any form is not permitted in or on any Western Health owned or operated facilities including inside the building, outside the building and in the parking lots.

Long Term Care staff will provide a supportive environment to residents who smoke including referral to smoking cessation programs and access to nicotine replacement therapies (NRTs) where appropriate and medically safe (in the form of nicotine patch or gum).

***Donations***

Monetary donations in remembrance of a loved one may be accepted, please contact the Administration office of your Long Term Care Home for assistance. If

other types of donations are being considered, please contact the Director of Health Services or Manager of the Long Term Care Home before purchasing any item.

### ***Memorial Services***

To remember residents who have passed away, a service of remembrance is held. Refreshments and fellowship are provided following the service. All denominations are represented and all residents and family members are welcome. For further information please contact the Recreation department.

### ***Celebrations***

If families wish to have a birthday party or family gathering for a resident, please contact the Recreation Therapy department to make arrangements for a time and space.

### ***Pets***

Western Health recognizes the benefits of pet visitation and has a policy that supports and provides direction on pet visitation. If you are considering bringing your pet to visit Long Term Care, a copy of the policy is available from nursing staff.



Animals are permitted to visit residents in Long Term Care Homes as long as there is consideration for staff and residents who have allergies. Staff, residents and visitors who have contact with the animal must use good hand hygiene at all times and must use an alcohol based hand sanitizer and/or wash their hands at the end of the visit.

### ***Website***

Western Health's website ([www.westernhealth.nl.ca](http://www.westernhealth.nl.ca)) offers comprehensive information about all of our programs and services.

## **FREQUENTLY ASKED QUESTIONS ON FINANCES**

A financial assessment is completed to determine an individual's eligibility/level of subsidized Long Term Care. Assessments are conducted in accordance with the Department of Health and Community Services Guidelines.

### ***Who Do I Contact?***

Prior to admission to Long Term Care, you will need to contact a Community Support Nurse or Social Worker in your area to have the Continuing Care Assessment Tool completed. Once the Continuing Care Assessment Tool has been completed, a Social Assistance Worker will complete the financial assessment as part of your application. Once a resident has moved into Long Term Care, a yearly financial reassessment is initiated by staff in Long Term Care.

### ***What is the Cost of LTC Per Month?***

The rate for Long Term Care is \$2990.00 per month. The financial assessment will be completed in order to determine eligibility for a subsidy.

### ***What is Needed to Complete the Financial Assessment?***

Financial assessments are based upon the income and liquid assets of the applicant and spouse. Verification of income and liquid assets will be required. Some common living expenses/debts can be used in the financial assessment to determine the subsidy for Long Term Care. Proof of all expenses should be forwarded to the Social Assistance Worker to determine if they are eligible expenses/debts.

### ***How is Payment Made?***

If you are receiving a subsidy, it is recommended that you change the address of all income sources to that of the Home's Business office. Private paying individuals can make payments at the cash offices in the Long Term Care Home and Western Memorial Regional Hospital.

### ***How Much Money Will I Have Each Month?***

Subsidized residents receive \$150.00 comfort allowance from their income which will be held in trust at the Home's Business office. The comfort allowance is used to cover the cost of medications not covered by the Newfoundland and Labrador Drug Prescription Program, as well as personal items needed by that resident. The resident can access this money as well as the Power of Attorney. The Next of kin can access the comfort allowance held in trust when receipts are presented.



## TIPS FOR SUCCESSFUL VISITING

Visiting is encouraged by family, including children, friends and pets. Visitors are the resident's link to the community. They provide continuity of the resident's previous life to the present one. Visits often add to the resident's quality of life and provide reassurance that they are still loved and remembered. Please consider the following Tips for Successful Visiting in the Nursing Home:

- Visit at a “good time of day” for the resident. To preserve the dignity and respect of residents, please check with nursing staff to determine the best time to visit. If the resident's door is closed, please knock before entering.
- Consider reviewing the activity schedule and plan your visits to be able to accompany the resident.
- Try to coordinate visits with others if possible so the resident benefits from receiving several visits rather than everyone visiting at the same time. Residents may respond better when one or two visitors come at a time.
- Set realistic expectations for yourself in terms of visitation. Don't set yourself up for feelings of guilt because you are unable to visit as often as you think you should.
- Try to include the resident in conversation with others, including other residents and staff.
- Find an area in the Home where you feel most comfortable to visit with the resident such as the chapel, lounge, dining room or activity area.
- Feel free to bring along something to read or work with, i.e. knitting, in case the resident is sleeping but you wish to keep him/her company.

- Ask for guidance and information on how to interact with the resident if there is a physical or memory change and you are uncertain about approach.
- Remember that moving into a nursing home means an adjustment for family as well as the resident. Help is available for families experiencing difficulty with this transition. Please contact a member of the Interdisciplinary Team for assistance.
- Reminisce with the resident. You can show appreciation of the resident's life by looking at photo albums together, sharing stories and memories, comparing how things used to be and how they are now.
- Make a list of activities you can do with the resident, such as reading together, listening to music, changing room decorations according to the season and enjoying time spent together.
- Place yourself at eye level when talking with the resident.
- Don't feel you have to talk the whole time you visit. You might want to sit quietly and hold the resident's hand.
- Allow residents to do whatever they can for themselves as long as possible. Acknowledge and reinforce this during visits. Accent the positive, always being mindful of the resident's abilities and limitations.
- Lend support to other family and friends who may be visiting.
- Remember to check with nursing staff, before providing any care, such as feeding.



## **RIGHTS AND RESPONSIBILITIES AS A RESIDENT OF LONG TERM CARE**

When a person enters a Long Term Care facility it becomes their home. Each resident has his or her own wants and needs and has rights and responsibilities that always need to be considered.

1. Residents have the right to be treated with politeness, respect and free from abuse and also have the responsibility to treat others in the same manner.
2. Residents have the right to have their own belongings as long as it is safe for them and others, including managing their own money when they are able.
3. Residents have the right to privacy in all aspects of their life including their personal health information.
4. Residents have the right to direct their own care.
5. Residents have the right to take part in social activities that they enjoy and are able to do, including outdoor activities.
6. Residents have the right to visit others in private, including their spouse.
7. Residents have the right to die at the Home in the presence of their families and friends if they so choose.
8. Residents have the right to know about any guidelines at the Home which may impact them.
9. Residents can offer any complaints, concerns, compliments and suggestions.

## EMERGENCY RESPONSE – RESIDENTS AND VISITORS

### IN CASE OF FIRE ALARM SIGNAL:

Upon Hearing Fire Alarm	
RESIDENTS	VISITORS
<ul style="list-style-type: none"> <li>• If you are in your room, remain there.</li> </ul>	<ul style="list-style-type: none"> <li>• Stay with the resident you are visiting.</li> </ul>
<ul style="list-style-type: none"> <li>• If you are in the hallway near your room, go to your room and remain there.</li> </ul>	<ul style="list-style-type: none"> <li>• Close doors to the area you are in to help keep smoke and fire out.</li> </ul>
<ul style="list-style-type: none"> <li>• If you are in a common room such as lounge, dining room or Town Hall and it is safe to do so, remain there or move to a safe area.</li> </ul>	<ul style="list-style-type: none"> <li>• Follow alarm instructions for residents.</li> </ul>
<ul style="list-style-type: none"> <li>• Close doors to the area you are in to help keep smoke and fire out.</li> </ul>	<ul style="list-style-type: none"> <li>• Await further instructions from staff.</li> </ul>
<ul style="list-style-type: none"> <li>• Await instructions for evacuation.</li> </ul>	

### IN CASE OF FIRE:

If You Discover a Fire	
RESIDENTS	VISITORS
<ul style="list-style-type: none"> <li>• Leave fire immediately.</li> </ul>	<ul style="list-style-type: none"> <li>• Assist anyone in immediate danger to move to a safe area and remain there.</li> </ul>
<ul style="list-style-type: none"> <li>• Close all doors behind you to confine smoke and fire.</li> </ul>	<ul style="list-style-type: none"> <li>• Close all doors behind you to confine smoke and fire.</li> </ul>
<ul style="list-style-type: none"> <li>• Sound alarm and/or alert staff.</li> </ul>	<ul style="list-style-type: none"> <li>• Await instructions from staff.</li> </ul>
<ul style="list-style-type: none"> <li>• Await instructions for evacuation.</li> </ul>	<ul style="list-style-type: none"> <li>• If instructed, assist with evacuation.</li> </ul>

### **DO NOT USE ELEVATORS (if applicable) WITHOUT PERMISSION:**

In Homes that have elevators the Incident Commander in discussion with the Fire and/or Police Officials will decide if the Home's elevators can be used to assist with the evacuation.

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

**REMAIN CALM**

