

MANITOULIN CENTENNIAL MANOR

70 Robinson Street, Postal Bag 460, Little Current, Ontario POP 1T0
Telephone: 705-3682710 FAX: 705-368-2694



Resident Family Handbook

(revised July 2011)

Resident: _____

WELCOME TO MANITOULIN CENTENNIAL MANOR

This handbook was written to assist you in learning more about the care and services provided at Centennial Manor.

There are also many people that you will meet that will be able to answer your questions.

- Your Nurse in Charge on your floor _____(Your first contact)
- Your Primary Caregiver on day shift _____
- Your Primary Caregiver on evening shift _____
- Your Doctor _____

Assistant Director of Care - Terri Buck-Orr
Support Service Manger - William Proulx
Office Manager - Michelle Bond
Activity Supervisor - Nina Coates

Your first six weeks are set up to assist all of us to get to know one another. An admission meeting (care conference) will be arranged within this six-week period to formally discuss how things are going.

Once again, welcome to Manitoulin Centennial Manor, and if I can be of any assistance, please see me.

Sincerely,

Carol McIlveen
Administrator

QUICK FACTS TO KNOW

Here are some important "Quick Facts to Know"; however we do encourage you to read the handbook for more details on care and services.

- **INFORMATION ABOUT THE LICENSEE**

A licence to operate the Manor has been issued pursuant to the "Long-Term Care Homes Act, 2007 to the following licensee: Manitoulin Centennial Manor, 1-705-368-2710

- **NURSING ASSESSMENT**

The Charge Nurse will begin completing a Nursing History and Assessment form on meeting with you for the first time.

The questions and information are to help us become very familiar with your needs and abilities. It will help us get to know you better, and allow us to provide you with individualized service.

- **MEDICATIONS**

All medications are administered by the Home.

Medications are not allowed at the bedside, including medications that are purchased without a prescription such as antacids, aspirins and creams.

If you have any concerns regarding your medications, please discuss these concerns with the Charge Nurse.

- **PHYSICIAN ASSESSMENT**

- A resident or the resident's substitute decision-maker may retain a physician or registered nurse in the extended class to perform the following services:

- i) A physical examination of the resident upon admission and an annual physical examination thereafter, and to produce a written report of the findings of the examination.
- ii) Attend regularly at the Manor to provide services, including assessments
- iii) Participate in the provision of after-hour coverage and on-call coverage
- iv)

The doctor or RNEC will examine you within seven days of your admission date.

Following your initial examination, the doctor or RNEC will see you on request or when the Charge Nurse determines a need for you to see the doctor.

If an emergency arises a doctor can be here immediately and/or a transfer to the hospital can be arranged. The doctor/RNEC visits up to twice weekly.

- **FACILITY TOUR**

You may not have toured the Home prior to your admission. The Activity Supervisor will introduce them to you shortly after admission. She will explain to you her role, and invite you on a tour of the Home

- BATHING

The nursing staff assists you daily with a sponge bath. There are two-scheduled baths (or showers, depending on your preference) during the week. The Charge Nurse will assist you in organizing a bath time.

- WHERE DO YOU EAT?

Your meal times are scheduled for 0:830 am- Breakfast, 12:00 pm Lunch, and 5:00 pm Supper.

The nursing staff will direct you to the dining room and to your table.

The nursing staff also delivers refreshment and snacks directly to your room, three times a day between meals and at bedtime.

- NOTIFICATION OF NEXT OF KIN

A family member/responsible person is asked to sign forms identifying themselves as the person to contact, if the Home requires direction or needs to communicate with the family.

The family member/responsible person is contacted in the case of an emergency or upon a change in condition of the resident; if the resident has an incident (i.e. a fall); if the nursing staff require information and/or direction; if there is a meeting to be held; or if the resident requires clothing or personal items.

- TRANSFER OF INFORMATION

The Home is not allowed to transfer your medical records to other health facilities without your permission. The Charge Nurse will ask you to sign a Transfer of Information form to permit us to transfer any relevant information if, for example, you had to be transferred to hospital for treatment.

- FURNITURE & ELECTRICAL APPLIANCES

We encourage residents to decorate their rooms. There is limited space in the room, however personal belongings are permitted.

Please contact the Charge Nurse to discuss the items that you wish to bring for the resident.

All electrical appliances/equipment must be given to the Charge Nurse prior to placing it in the resident's room. Our Maintenance Staff must check all appliances/equipment for CSA approval and to ensure all safety requirements are met.

- **STORAGE OF VALUABLES**

We encourage residents not to store valuable items or large amounts of cash in their room. There are no secure areas in the rooms. The Home does not provide an area to store valuable items. Please leave these items with your family member/responsible person. We suggest that residents keep no more than \$5.00 cash in their rooms or purses. For the convenience of our residents, a trust account may be set up through the Office Manager, and accessed through the Business Office.

- **VISITING HOURS**

The Home does not have specific visiting hours; family members are encouraged to visit when they wish. The front doors are locked at 9:00 pm and the door alarm system must be by-passed before entering or exiting, by using the keypad and the code that is posted. We ask you to take into consideration your family member's daily routine when choosing to visit. We also encourage you to participate with your family member in activity programs.

- **SMOKING**

Smoking regulations are in place for the safety and security of all who live, work and visit at Manitoulin Centennial Manor. We provide a smoke-free living and working environment to all residents, family members, visitors and staff. Family members, residents and visitors are not allowed to smoke within the Home. **All smoking materials must be given to the Charge Nurse upon admission.**

The charge nurse will assess the safety of residents who wish to smoke. Residents assessed as able to safely smoke independently are allowed to sign out the desired number of cigarettes and one personalized labeled lighter from the nursing station. The smoking materials must be returned to the charge nurse.

Residents unable to smoke independently are not allowed to carry smoking materials on their person. Smoking must be supervised at all times by family members who are escorting the resident to the designated smoking area.

The designated smoking area is in the secured courtyard off of the Fielding Wing.

- **ADDITIONAL SERVICES**

Residents are not required to purchase care services, programs or goods, as outlined in the admission contract, from Manitoulin Centennial Manor, but may purchase such things from other providers, for example massage therapy, beauty and barber services, foot care services or private duty.

- **ADMISSION CONTRACT**

The resident and/or substitute decision maker is required to sign an admission contract prior to admission to the facility. You will meet with the Office Manager and/or the Administrator to discuss the admission contract and any other financial concerns, you may have.

- **RATE REDUCTIONS**

If you are residing in basic accommodation you may be eligible for a rate reduction. To determine your eligibility the Home must review your most recent Notice of Assessment from Revenue Canada. If you wish to have this option investigate further, please contact the Office Manager, Monday to Friday 0830 - 1630 at 705-368-2710

- **SUBSTITUTE DECISION MAKER**

You will be asked to choose a Substitute Decision Maker after you come to stay with us. A Substitute Decision Maker is a person that you wish to make decisions on your behalf when you are unable to do so, because of medical reasons.

- **LEAVE OF ABSENCE (LOA)**

If you wish to leave the Home for any amount of time, we ask that you sign yourself out in a sign-out book located at the nurses' station.

All overnight LOA will require 48 hours notice to ensure adequate time to prepare medications. Some residents may not be able to leave the Home independently because of medical reasons. These residents must be accompanied by a family member/friend, and they must also communicate to the staff their departure and return time.

Residents requiring medical or psychiatric attention are permitted a 30 days medical leave or a 60 days psychiatric leave.

If a medical or psychiatric leave exceeds the allotted days, the resident has a choice to either vacate the bed or pay the bed holding fee. The fee includes the accommodation cost plus \$53.00 per day.

The resident is responsible for all accommodation charges during such absences.

- **DAYS ABSENT**

A resident is allowed to leave the Home two days within a one-week period, Sunday through Saturday.

Residents can leave the Home beyond the two allowable free days. Any time beyond the two days would be considered holiday time.

- **HOLIDAY TIME**

Residents have a total of 21 days of holiday time per year beginning at admission. If you require further information regarding leaves of absence or holiday time please contact the administrator of the Home.

The resident is responsible for all payments of accommodation charges during any absence.

- **CALL BELLS**

Every resident's room, washroom and common area have available call bell, which can be used by residents if they require assistance from the nursing staff.

- **ADMISSION CARE CONFERENCE**

An admission care conference is held within six weeks of your admission. The meeting is an opportunity to meet with the Director of Care, Charge Nurse, Primary Health Care Aide, Support Services Supervisor, Activity Supervisor and Restorative Care Aide to discuss any concerns or ask questions which you or your family may have after your admission.

The care conference is customarily held in the conference room and your family is also invited. The Director of Care will organize the time and date of the meeting.

FACILITY DESCRIPTION

Since 1967 Manitoulin Centennial Manor has been providing quality care to the Residents of Manitoulin Island.

Our two-story Home is designated to accommodate 59 long-term care residents and 1 respite (short stay) resident. We have a large dining room/lounge on our main floor and a smaller lounge on the north wing. The lower level has two lounges and a dining area along with a nondenominational chapel and hair salon.

Facing the North Channel of Lake Huron, there is a secure garden area, and in front of the building a gazebo for residents can sit and enjoy the long summer days in the shade.

Our Residents' Council and Activity Department plan various social and recreational events. Family members are encouraged to participate in these activities, as are the many community members who volunteer their time to our residents and programs.

FACILITY STRUCTURE & ORGANIZATION

There are several department, services and programs within the facility, which will impact directly on the care of the resident, they include:

- Nursing Department
- Physicians
- Dietary Department
- Housekeeping, Laundry and Maintenance Departments
- Activity Department
- Restorative Care Department
- Business Office
- Pastoral Services
- Hair Salon
- Volunteers

OUR MISSION

Manitoulin Centennial Manor is dedicated to providing quality, effective health care to individuals requiring long-term care with a spirit of respect and compassion for their dignity, integrity, spiritual and cultural values.

OUR VISION

Manitoulin Centennial Manor with a resident centered philosophy strives to become more efficient and effective through an ongoing quality improvement focus.

The care and service provided at Manitoulin Centennial Manor are the result of an empowered staff, utilizing their expertise and continuously evaluating and improving care strategies.

Manitoulin Centennial Manor continues to grow and develop as a centre of excellence in Long-Term Care

DIRECT CARE SERVICES

NURSING CARE

- Nursing Staff and Care Plan

Registered Nurses, Registered Practical Nurses and Personal Support Workers are under the direction of the Director of Care.

Each plays an important role in providing care to the resident, and support to family members. Communication is encouraged among resident, staff and family members.

The Charge Nurse is available to answer questions pertaining to nursing care within the Home.

Personal Support Workers provide the hands on care to the resident. They assist the resident with all aspects of daily living activities, taking into consideration their specific needs.

A Care Plan is a thorough assessment of the resident, and it allows the nursing staff to know the resident's needs and wishes, especially if the resident is new to the nurse providing care. A care plan is completed with your input directly upon admission and is revised as your needs change.

Caring for an individual is an ongoing process. Resident and family participation will constantly be encouraged and sought. If you have any further questions regarding care needs please contact your Charge Nurse and/or Director of Care.

- **Physician Care**

All residents are under the medical supervision of a physician.

Upon admission to the Home you may want to keep your family doctor. This must be coordinated with the administrator, the physician and yourself, in order that the physician meets the Home's standards. If you choose the facility physician, your doctor will transfer care to the physician within the Home.

We receive all the necessary documentation to provide us with a thorough medical history. Your contact person for any medical needs is the Charge Nurse on your floor. If you wish to visit or speak with the physician, contact the Charge Nurse.

The professional nursing staff dispenses medications, as ordered by your physician. Your physician may also refer you to professional services or therapies available in the community. The care team will assist you to receive the benefit of those services.

Residents do have the choice of their own physician, upon certain criteria being met.

Please contact the Administrator or Director of Care before arrangements are made.

- **Pharmacy Services**

Medical Pharmacy in Sudbury provides pharmacy service and medications for Manitoulin Centennial Manor.

The pharmaceutical services that they provide are very specialized and exceed that of your usual visit to a pharmacy. The practice of this specialty is highly regulated by the "Regulated Health Professions Act" and the "Ministry of Health and Long-Term Care. The Clinical Consultant-Pharmacist visits the Home at regular intervals, to review the drug therapy of every resident. They make suggestions to the physicians regarding medication regimens, reducing medications where appropriate and ensuring optimum drug therapy for each individual resident. They monitor systems and medication administration procedures to ensure that the best quality pharmaceutical service is provided and resident well-being and safety is achieved.

All medications are dispensed from Medical Pharmacy, in a special strip packaging system, and are checked by pharmacists to ensure correctness and appropriateness. Drug allergies, drug interactions and adverse drug effects are carefully monitored. Where possible, the cost for all medications are billed to the Ontario Drug Benefit plan and any alternative drug plans, e.g. Blue Cross, Liberty Health, Green Shield, Shared Health, etc. Ensure that you have provided all information regarding drug coverage to the office Manager.

Medical Pharmacy will bill you for any medications or products, which are not covered by your drug plans after the nurse has obtained your consent. You will also be billed for all co-payments (including the Ontario Drug Benefit co-pay of \$2.00 per prescription) and deductibles charged by the drug plan. Medical Pharmacy will send you regular statements. If you have any questions regarding these statements please telephone the pharmacy listed:

Medical Pharmacy
81 Larch Street
Sudbury, Ontario
705-675-0808

- Activity Programs

The Activity Department provides a variety of programs that recognize the residents' physical, intellectual, emotional, social and spiritual needs.

The department staff is usually available from 8:30 am to 4:30 pm on weekdays and on weekends.

Examples of regularly scheduled activities include:

- group exercises
- intellectual games
- discussion groups
- music therapy, which includes sing along, entertainment from the community, easy listening tapes, ethnic programs.
- games that include cards, darts and bowling
- socials, which include happy hour, bingo, birthday parties, special events parties and religious services.

Some of these activities occur in the Activity Room on the main floor and many occur in the lounges on each floor.

- Religious Services

Our Pastoral Care Program has involvement from all denominations that have representatives in the community. Lay people and clergy are encouraged to visit those of their religions and any other resident who may request their visit. At all times, the wish of the resident and/or their family representative is respected.

Religious services include:

- Church service - every Friday afternoon
- Hymn sings - every other Sunday at 2:00 pm
- Bible study every Thursday morning at 11:00 am
- Mass every other week.
- Special and seasonal services arranged as requested

The Activity Calendars, posted at the main entrance will also have a list of monthly scheduled religious services and programs.

- Family Involvement

The families are welcome to be involved actively or as observers for any activity that is planned. Your input into the activities that your family member will be involved in would be welcomed.

- Restorative Care

Restorative Care is the provision of therapeutic services aimed at restoring or maintaining physical and or psychosocial abilities.

The Physiotherapist, Physiotherapy Aide, Restorative Care Aide, staff, family members, physician and resident can fill out a referral form. The Team will then assess the resident to determine whether or not they would be appropriate for the program. If the

resident is appropriate for the program they will begin immediately. Residents are involved in the program for approximately 6 weeks and are then transferred to their primary care giver. The primary care giver is responsible for continuing the program.

Programs offered:

- Walking programs
- Upper and lower extremity exercises
- Wheelchair mobility
- Weight bearing
- Transfer program
- Heat therapy
- Restorative eating
- Balancing
- Positioning

DIETARY SERVICES

- **Meals**

Residents entering our Home have individual dietary needs. To ensure nutritional care is provided, the Doctor's diet order, resident's religious or ethnic background and personal preferences are all identified.

Centennial Manor's menu provides meals in accordance with established Policies and Procedures and the Ministry of Health and Long-Term Care standards, which meet Canada's Food Guide to Healthy Eating requirements. Meals are prepared using Standardized recipes.

- **Snacks (nourishments)**

Nourishments are planned and prepared by the Dietary Department. Fluids are offered to each resident at 10:30 am. Daily snacks such as fruit juices, milk, cookies, muffins, pastries, cakes, cheese and crackers, and sandwiches are offered to every resident at 2:15 pm and at 7:30 pm.

(Foods and fluids are made available to supplement the resident's daily intake)

- **Supplements**

A Clinical Dietician is available. Nutritional services include assessments, interventions and resident education. Supplements in addition to or in combination with meals will be provided if needed.

- **Mealtimes**

Breakfast: 8:30 am

Lunch: 12:00 pm

Supper: 5:00 pm

- **Alternatives**
An alternative menu choice to the main entrée is provided for residents at lunch and supper as listed on the posted menu at the dining room entrance.
- **Types of Diets**
We can provide a variety of diets to meet your needs.
- **Food Committee**
The food committee, made up of residents from the home, meets on a monthly basis. The purpose of the committee is to assist the Dietary Manager in the provision of quality dietary service for the residents.

Membership includes the following:
 - Dietary Manager
 - Residents
- **Family Eating Meals with Residents**
Family members are welcome to eat meals with the residents. Guest meal tickets are available in the Business Office. We ask that you please provide the Dietary Department with a three hour notice with the number guests meals required.
A private dining area may be arranged in the Activity Room.

SUPPORT CARE SERVICES

LAUNDRY

Each resident of Centennial Manor benefits from a Laundry Service, which processes personal clothing and linen in a safe and timely manner to meet the physical and personal care needs of each resident.

The Laundry Department provides our residents with laundered personal clothing and a supply of clean, sanitized linen of good repair within a 24-48 hour turn around.

- **Personal Laundry - Admission**
During admission, laundry services and the labeling process for personal clothing are explained to residents and their families.
To prevent clothing from being lost, all articles will be labeled. Clothing to be labeled must be put into a plastic bag or suitcase, for the laundry aide to take to be labeled.

- **Laundry done by Family**
Families may choose to wash their resident's personal clothing themselves. Arrangements must be made for scheduled pick-up and delivery, which is recorded by the nursing staff on the resident's care plan.

Please be sure to have clothing labeled to help prevent loss of articles.

- **Lost Clothing**
We ask family and residents to report all lost clothing to the Charge Nurse on the unit. The loss is reported to the Laundry Department. Other residents' rooms are checked. When the item is found we will notify the resident and their family member.
- **Unclaimed Clothing**
A central lost and found is located in the Laundry Department. Every two months the Support Services Supervisor will have a lost clothing day, where family members and residents can go through the unclaimed clothing.

HOUSEKEEPING SERVICES

Resident rooms, common areas and public areas are cleaned daily to provide a sanitary and safe living/working environment. Floors are dust mopped and washed daily; floor care is carried out on a weekly floor maintenance program. Project cleaning is planned on weekly, monthly and annual routines. All residents are encouraged to utilize personal possessions (e.g. pictures, TV, radio, furniture) to make their rooms as "home-like" as possible. The use of earphones is encouraged for radios and TVs. All cleaning routines will be performed with the least possible amount of disruption to the residents.

- **Decorating Rooms**
Families are encouraged to bring in pictures, plants, wall hangings and furnishings to make the rooms more home-like. The Home's Housekeeping Staff will be happy to assist in any way and we prefer that the facility staff hang pictures for you.

MAINTENANCE DEPARTMENT

If there is something that is not working in your room or you observe a similar situation outside your room, contact the Charge Nurse immediately.

The Charge Nurse will contact the Maintenance Department to investigate your concern. The Maintenance Department is also responsible for ensuring that all electrical equipment and/or appliances (new or old) meet safety regulations before they can be placed in your room for use.

If you have any electrical equipment/appliance, please give the equipment/appliance to the Charge Nurse for inspection by maintenance.

To comply with fire safety standards, extension cords, plug adaptor, power bars and Christmas lights **are not permitted** in resident areas.

BUSINESS OFFICE

The Business Office is the communication centre of the Home. Outside telephone calls are received and relayed for the Business Office during normal working hours (8:30 am to 4:30 pm). If there is information, which you require, or someone you would like to speak to, feel free to go to the Business Office, and the staff will direct you to the appropriate individual, or may be able to answer your questions. Calls are not put through to the nurses during meal service.

- **Payment of Monthly Accommodations**

The Business Office staff will accept payment for accommodations. Accommodation payments are due on the first of each month.

You can arrange to have pre authorized payments made to the home.

SAFETY AND SECURITY

- **Facility Safety and Security**

Manitoulin Centennial Manor is committed to maintaining and promoting a safe and healthy environment for all persons, including residents, visitors and staff. The administrator is responsible for ensuring a safe and secure environment.

- **Door Alarm Systems**

All doors within the facility are connected to an alarm system, to allow staff to monitor movement of residents within the facility. If visitors wish to use the stairways they may bypass the door alarm system by pressing **1234***. This will allow you 10 seconds to go through the door. We encourage residents to use the elevators for safety reasons.

The front door is locked at 9:00 pm every evening and placed on the alarm system. If you wish to enter the building after 9:00 pm, you must ring the doorbell and staff will come to open the door. Upon leaving the building after 9:00 pm, we ask visitors to use the bypass code of **6431*** to ensure that the alarm is not activated.

- **WatchMate**

Centennial Manor has implemented a system called WatchMate. This system monitors the movement of residents who have a tendency to wander outside the building and who may pose a danger to themselves if a staff or family member does not accompany them.

A decision for a particular resident to wear a WatchMate bracelet is made in consultation between the Charge Nurse and the resident's family upon or after admission. If you wish to take the resident outside, please follow the posted instructions to deactivate the alarm found in the front doorway area.

- Fire Exits & Alarms

Fire exits are located East and West side of each floor and are clearly marked by the doors. Fire alarms and pull stations are located throughout the building, and can be easily activated by pulling down on the lever. The Fire Alarm system is monitored by our office and is directly connected to the Fire Department.

Staff receives monthly training regarding fire procedures.

If you hear a fire alarm, please follow the instructions of our staff members.

- Safety Devices

Centennial Manor does not utilize physical restraints, unless all other alternatives have failed, and the physician and family deem it appropriate to use such a safety device.

Alternatives to reduce the use of restraints and enhance resident safety may be at an additional cost to the resident. (i.e. portable patient alarms, lap tables and skin protectors.) The Home is also equipped with many safety devices to enhance safety and assist with activities of daily living. (i.e. handrails, grab bars, shower seats and lifts)

- Signs in use

Fire exits are well marked throughout the Home. We ask all residents and visitors to be aware of any signs on residents' doors, which may identify a medical situation (i.e. quarantine of a resident). Please consult the Charge Nurse if you are unsure of the meaning of a particular sign.

IF YOU HAVE ANY QUESTIONS REGARDING FACILITY SAFETY AND SECURITY
PLEASE CONTACT THE ADMINISTRATOR or DIRECTOR OF CARE

RESIDENTS' COUNCIL

Membership in Manitoulin Centennial Manor's Resident Council is automatically conferred on all residents by virtue of living in the Home. Non-residents such as relatives, volunteers, local clergy, and service club members may become members of the Residents' Council on the recommendation of the membership. Non-residents may also wish to join the Family Council. The Residents' Council provides a forum through which comments and suggestions may be received from the residents. Projects can be initiated, recommendations made to administration and programs developed from these comments and suggestions. The council has an executive consisting of president, vice-president, secretary and treasurer.

FAMILY COUNCIL

The Membership on the Centennial Manor's Family Council is automatically conferred on all family members by virtue of their relative living in this home. This Council provides a forum in which families, volunteers and visitors will have an opportunity for active participation regarding the change process within the home. It is a forum where council members can be provided with accurate and timely information. Projects can be initiated and recommendations made to administration regarding the daily operation of the facility. It is an opportunity to learn more about the Home and the long-term care system.

The council has an executive consisting of president, past-president, and secretary. Meetings are held twice yearly and may be more often if necessary, at the call of the president.

VOLUNTEERS

Volunteers are an essential component of the services offered to residents in Centennial Manor. We are always looking for family members and friends to become volunteers. Volunteers provide friendship, one to one interaction and involvement with community as well as contribute unique skills to the facility programs.

Volunteers are encouraged to be a part of the health care team. Their comments, interest and suggestions are valued. If you are interested in volunteering, please call the Activity Manager.

FINANCIAL INFORMATION

- Trust Accounts

Residents have the ability to have monies deposited into a non-interest bearing trust account. The Manor has established and will maintain a non-interest bearing trust account at a financial institution in which it shall deposit all money entrusted to it on behalf of a resident. At no time will the Manor hold more than \$5,000.00 in the trust account for any resident at any time.

The Manor will keep petty cash trust money, composed of money withdrawn from the trust account, which is sufficient to meet the daily needs of the residents who have money deposited in the trust account on their behalf.

A resident, or a person acting on behalf of a resident, may pay the Manor for accommodations and other charges with money from the trust account upon providing the Manor with a written authorization.

The Manor has a written policy and procedures for the management of resident trust accounts and the petty cash trust money. The written policy and procedures is available to every resident and person acting on behalf of a resident who asks to have money deposited into a trust account.

To set up a trust account or enquire about same, please contact Michelle Bond at 705-368-2710 Monday to Friday, during regular business hours.

- **Trusteeship**

If a resident does not have any family members, relatives or friends to assist with their finances, and the resident is physically and/or mentally incapable of handling financial matters, the Home may request that a trustee be appointed through the Public Guardian and Trustee.

- **Power of Attorney and Wills**

Staff will not participate in the development of any legal documents. Staff are also prohibited from witnessing such documents.

- **Resident Charges**

The Manor will not charge a fee to a resident for anything, except in accordance with the following:

- For basic accommodation, a resident shall not be charged more than the amount provided for in the Regulation under the "Long-Term Care Home Act, 2007" for the accommodation provided.
- For preferred accommodation, a resident shall not be charged more than can be charged for basic accommodation, unless the preferred accommodation was provided under an agreement, in which case the resident shall not be charged more than the amount provided for in the Regulation under the "Long-Term Care Home Act 2007" for the accommodation provided.
- For anything other than accommodation, a resident shall be charged only if it was provided under an agreement and shall not be charged more than the amount provided for in the Regulation under the "Long-Term Care Home Act 2007" or, if no amount is provided for, more than a reasonable amount.
- A resident shall not be charged for anything for which the Regulation under the "Long-term Care Home Act 2007" provide is not to be charged. The following charges are prohibited by the Regulation:
 - charges for goods and services that the Manor is required to provide to a resident using funding that the Manor receives from a local health integration network (including goods and services funded by a local health integration network under a service accountability agreement), or the Minister of Health and Long-Term Care;
 - charges for goods and services paid for by the Government of Canada, the Government of Ontario, including a local health integration network or a municipal government in Ontario.
 - charges for goods and services that the Manor is required to provide to residents under any agreement between the Manor and the Ministry or between the Manor and a local health integration network;
 - charges for goods and services provided without the resident's consent
 - charges other than the accommodation charge that every resident is required to pay, to hold a bed for a resident during a medical absence, psychiatric absence, casual absence and vacation absence, or during the period permitted for a resident to move into the Manor once the placement coordinator has authorized admission to the Manor;
 - transaction fees for deposits to and withdrawals from a trust account required to be established and maintained by the Manor, or for anything else related to a trust account;
 - charges for anything the Manor must ensure is provided to a resident pursuant to the Regulation under the "Long-Term Care Home Act, 2007" unless a charge is expressly permitted

- **Rate Reductions**

Where a long-stay resident of a long-term care home has accessed all sources of income to maximize his or her annual net income, the resident may apply to the Director for a reduced amount payable by the resident for basic accommodation.

The Manor's Administrative Assistant can provide a rate reduction application form to the residents to complete. The application must be in a form and manner acceptable to the Director, must include any supporting documentation required by the Director, and must include the Notice of Assessment issued under the "Income tax Act (Canada)" for the

resident's most recent taxation year. Upon the request of a resident, the Manor will provide assistance in completing the application

- **Reimbursement of Accommodation Costs.**
A reimbursement of accommodation cost will be forwarded to the financially responsible party upon discharge. Residents being discharged to another Long-Term Care facility will be reimbursed the daily rate effective from the day of transfer for the remainder of the month. The facility receiving the resident is entitled to bill for the admission day. Residents being discharged for other reasons will be reimbursed from the day following the discharge day.
Refunds are sent out six weeks from the date of discharge. If you do not receive your refund within six weeks, please contact the Business Office for immediate assistance.

SERVICES WITH ADDITIONAL COSTS

- **Resident Identification Procedure**
Upon admission to the Home you are asked to purchase an I.D. bracelet, which serves as identification in case of an emergency or if a resident cannot identify themselves because of medical reasons.
- **Health Care Services Available with Costs**
 - dental services
 - optometrist services
 - foot care services
 - personal wheelchairs
 - massage therapy
- **Assistive Devices Program**
This program assists Ontario residents in purchasing equipment needed for activities of daily living (i.e. personal wheelchairs, walkers). Respiratory equipment and prosthesis products are also funded.
- **Mobility Equipment Maintenance Program**
Shopper's Home Health Care is our contracted mobility equipment maintenance service provider. Their skilled technicians visit our Home on a regular basis to provide repairs, replacement of parts and if requested deep cleaning of any mobility aid.
Any needs of an urgent nature can be addressed through the Charge Nurse to contact the service, who will then visit on a priority basis. Families or Substitute Decision Makers are contacted with quotation for repairs prior to any work being initiated. Please contact the Director of Care for more information on this service.

- **Internal Room Transfers**

Residents who wish to transfer rooms may do so by requesting to be placed on an in house waiting list. The transfer will occur upon the availability of the specific request. Please contact the Office Manager to inform the facility of any accommodation preferences. Internal room transfers may occur for residents occupying an alternative type of accommodation. For example: if basic accommodation was requested and the resident is admitted to a preferred accommodation, a room transfer may be initiated by the Home. As a resident's care needs change, a room transfer may be in the individual's best interest. An interdisciplinary team approach is taken when reviewing possible room transfers.

- **Hairdressing/Barber**

Centennial Manor offers the services of an in house hairdresser and barber for the convenience of residents. Arrangements can be made to have regular hair treatments by contacting the Hairdressing Salon. Prices are posted in the Beauty Salon.

- **Telephone Connection Fees**

All rooms have the capability of having a telephone connected. Telephone hook ups can be arranged through the Manor office.

- **Cable Television**

Cable television is available in all rooms. If you wish to have cable connected to your television, please contact the local provider for services you wish to have. Please have the bill directed to the resident or family member for payment.

- **Transportation/Escort Services**

In the event of an emergency, residents at the Manor are sent to the hospital via ambulance service.

In non emergency situations (e.g. Appointments with dentists, specialist etc) the resident or the substitute decision maker are responsible for the cost of transportation and escort services. Any resident from the Manor going out for an appointment will require an escort.

The Manor has made arrangements with A.J. Bus Lines and a retired PSW to transport residents in the community and for off island appointments.

COMPLAINT PROCEDURE

- Written complaints can be received by any staff member of the Manor who will forward to their Department Manager immediately, who then will inform the Administrator of the complaint.
- If required, the Department Manager will contact the author of the complaint to obtain any further details.
- The Department Manager will initiate an investigation into the complaint.
- The Administrator will inform the Extencicare Regional Director of the complaint and keep the Regional Director apprised of the investigation and outcome.
- Notes will be taken of all interviews, observations and other actions related to the investigation. Where possible witness statements should be written by the witness themselves, dated and signed.
- At the end of the investigation, the person conducting the investigation, The Department Manager and the Administrator will meet to review the findings and complete a written response to the author of the complaint.
- If the investigation is not completed within 6 days of receiving the complaint, the Administrator will contact the author of the complaint, acknowledge receipt of the complaint, indicate an investigation is on-going and that the results of the investigation will be shared as soon as possible. The Administrator should provide the author of the complaint with an estimated date of completion for the investigation. If that date can not be met, the Administrator is to update the author accordingly, keeping the person informed until resolution is achieved.
- The written response will include what the Manor has done to resolve the complaint. Depending on the severity of the complaint a disclosure meeting may be required; the written response can be provided to the author of the complaint at that meeting.
- If after the investigation the complaint is found to be unfounded, the written response to the author of the complaint will indicate the reasons why this conclusion was reached.
- Where required by provincial regulations, a copy of the written complaint and the response will be forwarded to the appropriate regulatory person as outlined in the regulations.
- When a verbal complaint is received, the person receiving the complaint will obtain as many details as possible regarding the complaint.
- Where possible, an investigation will be initiated immediately (missing laundry, missing glasses etc)
- If the verbal complaint can be resolved within 24 hours, the person receiving the complaint or the department manager will verbally respond to the person making the complaint the outcome/resolution.
- If the investigation can not be initiated immediately and /or resolution can not be obtained within 24 hours, then steps as per written complaints will be followed.

- To make a complaint to the Director under section 24 of the LTCHA the following options are available:

Call a confidential toll-free number (7 days a week 8:30 am to 7:00pm)
1-866-434-0144

or

Write a letter to this address
Director, Ministry of Health and Long-Term Care
Performance Improvement and Compliance Branch
55 St Clair Avenue West, 8th Floor Suite 800
Toronto, Ontario
M4V 2Y7

WHISTLE BLOWING PROTECTION

- The "Long-Term Care Homes Act, 2007" offers protection against retaliation to any person who disclosed information to an inspector or to the Director of the Ministry of Health and Long-Term Care, or who gives evidence in legal proceedings. This protection is known as the "whistle-blowing" protection.
- The Whistle-Blowing protection requires that the Manor and its staff will not retaliate against any person, whether by action or omission, or threaten to do so because anything has been disclosed to an inspector of the Director. This includes, but is not limited to, disclosure of: (i) improper or incompetent treatment or care of a resident that resulted in harm or a risk of harm to the resident; (ii) abuse of a resident by anyone or neglect of a resident by the Manor or its staff that resulted in harm or a risk of harm to the resident; (iii) unlawful conduct that resulted in harm or a risk of harm to a resident; (iv) misuse or misappropriation of a resident's money; (v) misuse or misappropriation of government funding provided to the Manor; (vi) a breach of a requirement under the "Long-Term Care Homes Act 2007"; (vii) any other matter concerning the care of a resident or the operation of the Manor that the person advising believes ought to be reported to the Director.
- In addition, no person will encounter retaliation because evidence has been or may be given in a proceeding, including a proceeding in respect of the "Long-Term Care Homes Act, 2007" or its regulations, or in an inquest under the "Coroners Act".
- The Manor or its staff will not do anything that discourages, is aimed at discouraging or that has the effect of discouraging a person from doing anything mentioned above. Nor will the Manor or its staff do anything to encourage a person to fail to do anything mentioned above.
- For the purposes of the whistle-blowing protection, "retaliation" includes but is noted limited to, disciplining, dismissing a staff member, imposing a penalty upon any person, or intimidating, coercing, or harassing any person. A resident shall not be discharged from the Manor, threatened with discharge, or in any way be subjected to discriminatory

treatment (e.g. any change or discontinuation of any service to or care of a resident or the threat of any such change or discontinuation) because of anything mention above, even if the resident or another person acted maliciously or in bad faith. Further, no family member of a resident, substitute decision maker of a resident, or person of importance to a resident shall be threatened with the possibility of any of those being done to the resident.

INFORMATION ABOUT FUNDING

A new funding system for all long-term care homes was introduced in July 1993. The system is based on dividing all funding into three separated "envelopes"

- Nursing and Personal Care
- Program and Support Services
- Accommodation

Nursing and Personal Care includes all nursing services and medical and nursing supplies, as well as the personal car of the resident. Ministry of Health funding for Nursing and Personal Care is based on a formula that reflects two often conflicting priorities: first, the amount of funding the Ministry has, and second the number of residents and their needs. The Nursing and Personal Care funding formula is the same for private and public sector service providers and reflects the fact that private and public sector long-term care providers must meet the same high standards for care. Regardless of the type of service provider, the funding form this envelope and must be used only for nursing and personal care. If, at the end of the funding year a long-term care home has a surplus of funds, the money must be returned to the Ministry of Health. An exacting audit process has been established to verify surpluses.

The Program and Support Services envelop includes funding for therapeutic services, pastoral care, recreation staff training and volunteer coordination. As with the Nursing and Personal Care envelope, funding is based on resident needs, but in reality reflects available funds. Again, any surplus funds remaining at the end of the year are carefully audited and must be returned to the Ministry.

The Accommodation envelope includes funding for "room and board" expenses such as food costs, housekeeping, dietary services, laundry and linen services, administration, building and property operations and maintenance, including mortgage payments and taxes for private long-term care providers. The Ministry of Health sets a predetermined minimum expenditure for food cost as well as specific requirements for dietary staffing levels. There are three types of accommodations: basic, semi-private, and private.

ZERO TOLERANCE POLICY ON ABUSE & NEGLECT

The Manor has a zero tolerance policy of abuse and neglect of residents. Abuse and neglect of residents will not be tolerated.

Definitions:

Abuse in relation to a resident means physical, sexual, emotional, verbal or financial abuse, as defined below. Neglect means 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.

Physical Abuse: means (i) the use of physical force by anyone other than a resident that causes physical injury or pain (ii) administering or withholding a drug for an inappropriate purpose; (iii) the use of physical force by a resident that causes physical injury to another resident. 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 circumstances.

Sexual Abuse: means (i) 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; (ii) 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. Sexual abuse does not include (i) 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, (ii) 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.

Emotional Abuse: means (i) any threatening, insulting, intimidating or humiliating gestures, actions, behaviours or remarks, including imposed social isolation, shunning, ignoring, lack of acknowledgement or infantilization that are performed by anyone other than a resident (ii) any threatening or intimidating gestures, actions, behaviours 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: means any misappropriation or misuse of a resident's money or property,

POLICY ON MINIMIZING OF RESTRAINING

Manitoulin Centennial Manor is committed to a restraint free living environment for residents and has a minimal restraint philosophy. Our goal is to minimize the restraining of residents and to ensure that any restraining that is necessary is done in accordance with the Long-Term Care Homes Act, 2007.

Restraint Definitions:

Physical/Mechanical Restraints: Any manual or any physical or mechanical device, material or equipment that is attached or adjacent to the resident body, that the resident can not remove easily and that restricts the resident's freedom of movement or normal access to his or her body.

Environmental Restraints: use of physical barriers or other means of confining the resident within a limited space, e.g. locked doors, door alarms, WanderGuards. Environmental restrains are often used in place of physical restraints

Chemical Restraints: any medication that is given for the sole purpose of altering a person's behaviours, movements or physical actions.

The Manor has a written policy that is located on the bulletin board across for the office on the Upper Level that can be reviewed by contacting the office and meeting with either the Administrator or Assistant Director of Care.

MANDATORY REPORTING

Regulated health professionals who have reasonable grounds to suspect that any of the following has occurred or may occur must immediately report that suspicion and the information upon which the suspicion is based to the Director appointed by the Minister of Health and Long-Term Care.

- i) Improper or incompetent treatment or care of a resident that resulted in harm or a risk of harm to the resident.
- ii) Abuse of a resident by anyone, or neglect or a resident by the Home or its staff that resulted in harm or a risk of harm in the resident.
- iii) Unlawful conduct that resulted in harm or a risk of harm to a resident.
- iv) Misuse or misappropriation of funding provided to the Home under the Long-Term Care Homes Act. 2007

RESIDENTS' BILL OF RIGHTS

Every licensee of a long-term care home 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 the licensee or staff.
4. Every resident has the right to be properly sheltered, fed, clothes, 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,
 - 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,
 - iv) have his or her personal health information within the meaning of the "Personal Health Information Protection Act, 2004" kept confidential in accordance with the Act, and to have access to his or her records of personal health information including his or her plan of care, in accordance with the 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 the "Long-Term Care Home Act, 2007" and subject to the requirements provided under the 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) the licensee, and, if the licensee is corporation, the directors and officers of the corporation, and in the case of a home approved under Part VIII of the Long-Term Care Homes Act, 2007, a member of the committee of management for the home under section 132 or the board of management for the home under section 125 or 129 of the Act,
 - iv) staff members
 - v) government officials
 - vi) any other person inside or outside the long-term care home
18. Every resident has the right to form friendships and relationships and to participate in life of the long-term care home.
 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 the licensee 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 in 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 area 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.

WE WANT TO HEAR FROM YOU

We would like to know if you have concerns or comments regarding any aspect of care you receive at Manitoulin Centennial Manor.

We would also like to hear if you have any reason to believe that we have not fulfilled any of our commitments to residents. Any suggestions help us improve our service to you.

The following individuals are here to assist you:

- **Charge Nurse**

If you have a concern or question regarding nursing care service the Charge Nurse on the floor will assist you and they will contact the appropriate individual who can address your concerns.

- **Director of Care**

The Director of Care is responsible for operations of the nursing department. The Director of Care would be pleased to speak to you regarding nursing care issues.

- **Department Managers**

The department managers include the Dietary Manager, Activity Supervisor, Support Services Manager and Office Manager. If you have specific questions regarding any department, please feel free to contact these individuals directly.

- **Administrator**

The administrator is in charge of the overall operation of the Home. If you have any questions or concerns, and you wish to speak to the administrator you may call her directly.

There are also sources available outside the facility to answer question or concerns. They include:

- Ministry of Health and Long-Term Care
- Regional Director at Extencicare Canada INC

Their phone numbers and address are posted on the main floor and are available from the Administrator. **We hope to make your stay with us as comfortable as possible**

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