

LET'S TALK **CARE**

ADMISSION CHALLENGES

It is not easy to move into a long-term care home. It's a difficult decision that often comes at a time in people's lives when they have suffered many losses such as declining health or the death of spouse. The resulting loss of well-being and self-confidence makes it even more difficult to adjust to a new place to live.

Moving can be a challenge for anyone, but the elderly are especially vulnerable. The stress experienced from change and loss may push an older person into a state of emotional upset or depression. Also, family and friends may react to the move with understandable pain and grief. However, new residents, their families and staff can do a lot to reduce this kind of stress.

Moving into a long-term care home is a three-part process: preparing for the change, moving in, and settling in. Each stage offers opportunities for families and friends to help new residents adjust.

PREPARING FOR THE CHANGE

- Involve your relative in decisions that help to maintain a sense of control. For example, encourage them to choose personal items to take to the home, or make up a list of people who would like to know the new address.
- Talk openly about the upcoming move. Many families are themselves upset about the change, so they avoid talking about it. But people need to talk, and need to know what to expect. They especially need reassurance that while the move itself may be difficult and life will be different, the support, love and understanding of family and friends will always be there.
- Encourage your family member to continue making decisions and maintaining a sense of control wherever possible, no matter how seemingly insignificant the opportunity.

If you feel anxious about any aspect of your family member's care or adjustment to life in the long-term care home, talk to our staff. They will be able to give valuable advice and support.

- Focus on the positive. Talk about the programs, activities and companionship available at the home. Remind your loved one that health and independence may even improve because of the care provided. But lend a willing ear to feelings of fear, sadness and anger, too – your relative has a right to express what's inside.

MOVING IN

- On moving day, bring favourite items such as pictures and knickknacks to decorate the room and make it feel more like home. Bring a TV, radio or comfortable chair (check available space first).
- Make sure your relative has enough clothing, especially underclothes, stockings or socks, and grooming products. People feel better able to cope when these items are in good supply. It is a good idea to bring the items the day before, so we can have them in the resident's room. (See list on next page.)
- Talk to the staff about your family member's likes, dislikes, routines and any other information that will help them make the person feel more comfortable. Introduce your self and your relative to other residents.
- Visit often, especially during the early days and weeks. Your presence provides invaluable reassurance and support.

SETTLING IN

- Adjusting to the new environment can take from six weeks to six months. You can help by encouraging your family member to make friends and get involved in home activities. Families might consider joining in some social and recreational activities at the home.
- Continue to visit regularly and encourage other family members and friends to do the same. Attend the care conference that staff will schedule for your relative.

THE FUNDAMENTAL PRINCIPLE

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

The Pines Long Term Care Residence Suggested Clothing and Personal Belongings

To assist us in caring for the resident we require all clothing and personal items to be clearly marked with the resident's name. At the time of admission, the facility will label all clothing items. All clothing items should be machine washable and preferably a polyester blend that require no ironing.

Suggested Clothing

2 housecoats
1 pair of shoes
1 pair of slippers- washable, non-skid
8 pairs of socks
3 nightgowns or pajamas
8 underpants
4 bras or undervests
2 sweaters

6 complete outfits: including top, bottom, undergarments and accessories
(blouses, shirts, pants, skirts, dresses, slips, belts, track suits)

If the resident is incontinent additional clothing and possibly adaptive, (for example open backed clothing) will be necessary for resident comfort and dignity.

If the resident is able to and enjoys the outdoors, please include a jacket and hat. With our limited storage we request that out of season clothing be stored with you at home.

Personal Belongings

1 comb
1 hairbrush
1 toothbrush
Favorite comforter or afghan
Family photographs
Easy Chair- dependent on room size
Radio or Television- dependent on room size

Please ensure that the resident's name is clearly marked on all of these items. Denture, hearing aids and glasses also need permanent labeling. We strongly suggest that families not bring valuables into the facility.

The maintenance staff must inspect all electrical appliances before being used in the facility.

Your Next Steps....

1. **ADMISSION CONTRACT and ACTIVITY QUESTIONNAIRE** – In Section 3 of this package is an Admission Contract and Activity Questionnaire to be completed. Please note it is important to have these completed and returned **as soon as possible**.
2. **CLOTHING** – Now that admission day has come and gone, please ensure that any additional items brought in are taken to the laundry for labeling. Please keep in mind this list provides a starting point only, and that the needs of each person are different. An adequate supply of clothing is essential to ensure a constant supply of clothing between laundry pick-up and delivery days.
3. **MEET OUR TEAM** – Over the next few days, please start to make yourself at home. Feel free to introduce yourself to members of our Resident Care Team. A list of management team members is provided in Section 4.
4. **CARE CONFERENCE** – Within the next couple of weeks, you will be contacted by our Nursing Clerk to arrange a date for an “Interdisciplinary Team Care Conference”. This conference is an opportunity for different disciplines within the facility (Activity, Nursing, Physio, Laundry, Dietary, and Housekeeping Departments) to meet with the resident and family. It provides a forum to ensure all aspects of a resident's needs are being met. After the initial conference, one will be held on an annual basis, or if there is a significant change.

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> From today forward, your family, friends, and yourself become part of The Pines >  
> Community...a network of people working to ensure that living, visiting, dining, >  
> volunteering and working at The Pines is a great experience. Welcome to our >  
> family. >  
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RESIDENTS' RIGHTS

It is the right of every resident:

1. 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. to be protected from abuse.
3. not to be neglected by the licensee or staff.
4. to be properly sheltered, fed, clothed, groomed and cared for in a manner consistent with his or her needs.
5. to live in a safe and clean environment.
6. to exercise the rights of a citizen.
7. to be told who is responsible for and who is providing the resident's direct care.
8. to be afforded privacy in treatment and in caring for his or her personal needs.
9. to have his or her participation in decision-making respected.
10. 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. has the right to,
 - i. participate fully in the development, implementation, review and revision of his or her plan of care,
 - ii. give or refuse consent to any treatment, care or services for which his or her consent is required by law and to be informed of the consequences of giving or refusing consent,
 - iii. participate fully in making any decision concerning any aspect of his or her care, including any decision concerning his or her admission, discharge or transfer to or from a long-term care home or a secure unit and to obtain an independent opinion with regard to any of those matters, and
 - iv. have his or her personal health information within the meaning of the Personal Health Information Protection Act, 2004 kept confidential in accordance with that Act, and to have access to his

or her records of personal health information, including his or her plan of care, in accordance with that Act.

12. to receive care and assistance towards independence based on a restorative care philosophy to maximize independence to the greatest extent possible.
13. not to be restrained, except in the limited circumstances provided for under this Act and subject to the requirements provided for under this Act.
14. to communicate in confidence, receive visitors of his or her choice and consult in private with any person without interference.
15. who is dying or who is very ill has the right to have family and friends present 24 hours per day.
16. 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. 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 a corporation, the directors and officers of the corporation, and, in the case of a home approved under Part VIII, a member of the committee of management for the home under section 132 or of the board of management for the home under section 125 or 129,
 - iv. Staff members
 - v. Government officials,
 - vi. Any other person inside or outside the long-term care home.
18. to form friendships and relationships and to participate in the life of the long-term care home.
19. to have his or her lifestyle and choices respected.
20. to participate in the residents' Council.

21. to meet privately with his or her spouse or another person in a room that assures privacy.
22. to share a room with another resident according to their mutual wishes, if appropriate accommodation is available.
23. 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. to be informed in writing of any law, rule or policy affecting services provided to the resident and of the procedures for initiating complaints.
25. to manage his or her own financial affairs unless the resident lacks the legal capacity to do so.
26. to be given access to protected outdoor areas in order to enjoy outdoor activity unless the physical setting makes this impossible.
27. 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.

MANDATORY REPORTING

A person who has reasonable grounds to suspect that any of the following has occurred or may occur shall immediately report the suspicion and the information upon which it is based to the Ministry of Health and Long Term Care.

1. Improper or incompetent treatment or care of a resident that resulted in harm or a risk of harm to the resident.
2. Abuse of a resident by anyone or neglect of a resident by the licensee or staff that resulted in harm or a risk of harm to the resident.
3. Unlawful conduct that resulted in harm or a risk of harm to a resident.
4. Misuse or misappropriation of a resident's money.
5. Misuse or misappropriation of funding provided to a licensee under the Long Term Care Act, 2007, c. 8, s. 24 (1).

Residents are not required to report however residents have the option to report. Regulated Health Professionals are required by law to report however staff, family and volunteers are expected to do so as well. For more information please see the memo board in front of the Family Room.

WHISTLE BLOWING PROTECTION

No person shall retaliate against another person, whether by action or omission, or threaten to do so because anything has been disclosed to an inspector or to the Director and we shall not discourage anyone from reporting. No staff member will be dismissed, disciplined or suspended for reporting. No person will be intimidated, coerced or harassed for reporting an incident and no retaliation against a resident shall, or person action on their behalf will take place.

Policy

The Pines will afford whistle-blowing protection to anyone who discloses information to a Ministry of Health and Long-Term Care Inspector. The Pines will also afford whistle-blowing protection in the event that evidence has been or may be given in a proceeding including a proceeding related to enforcement of the MOHLTC Act and / or Regulations under the Act or in an inquest under the Coroners Act.

RESIDENT SAFETY

There is a delicate balancing act in a Long-Term Care Home between ensuring a safe environment and providing a home-like environment. Resident's personal items are familiar to them and yet some of these items can pose a danger to other residents.

The Pines' Staff would ask that the following items not be kept in resident's rooms:

- Medications
- Chemical cleaners
- Aerosol cans (hair sprays, deodorants, air fresheners)
- Scissors, letter openers, razors with exposed blades (use electric or disposable razors)
- Small pointed items such as nail clippers and orange sticks must be handled with care
- Nail polish and nail polish remover
- Baby and talcum powder (these are very slippery when spilled on the floor)
- Other personal items

The residents in our nursing care areas Spruce Glen, Maple Woods and Birch Meadow will be allowed to keep their personal care items in their rooms under most circumstances.

Please note that all electrical equipment including lamps and TVs must be CSA approved and inspected by our maintenance staff. Space heaters, fridges, curling irons, steam humidifiers, portable AC units, heating pads and water coolers are not allowed as they can present risks.

We thank you for your cooperation in ensuring a safe home for our residents.

NON-ARM'S LENGTH RELATIONSHIP

The Pines has no non-arm's length relationships between us and other providers who offer care, services, programs or goods to the residents.

ENTERTAINING FRIENDS AND VISITORS

Family and friends of all ages are welcome to visit you during the day or until 9 p.m. in the evening. It is expected that children are supervised during visits and respectful of the other residents in the area.

We welcome pets provided they are behaved and leashed at all times during the visit. It is recommended that pets have up to date immunizations. During our meal service hours, pets are not permitted in the dining rooms due to Public Health Regulations and Ministry of Health and Long Term Care Standards.

ALCOHOL

The Pines is a licensed establishment under the Liquor License Act. Unless the physician specifically orders no alcohol consumed, a small amount of alcoholic beverage is permitted in a resident's room for personal use (excessive use of alcohol is discouraged).

During activity programs where alcohol is served, residents who have signed consent along with the consent of the physician are limited to two drinks.

Please note that The Pines staff would not be allowed to purchase alcohol or provide any alcohol to the residents.

Insert Abuse and Aggression 01-02-01 (Zero Tolerance of Abuse and Neglect)

MANAGEMENT

The District Municipality of Muskoka owns *The Pines Long Term Care Home*. The operation is directed by provincial legislation via the Ministry of Health and Long Term Care, and policies and procedures.

The Community Services Committee of the District functions as the Board of Directors for The Pines. Decisions made by the Committee are ratified by the District Council at their regular meetings.

The Administrator is responsible for the operation of The Pines. Corporately, the Administrator reports to the Commissioner of Community Services, and the Community Services Committee.

The Director of Resident Care is responsible for the organization and administration of all Nursing services at The Pines. She is supported by the Assistant Director of Resident Care.

The Support Services Manager is responsible for the organization and administration of all Housekeeping and Laundry services.

The Dietary Manager is responsible for ensuring the nutritional quality of the menu is meeting Resident's needs and that Residents have input into foods served.

The Office Manager is responsible for the maintenance of Resident financial and trust concerns.

The Activities Manager is responsible for the organization and coordination of recreational programs, restorative care and pastoral care.

The Maintenance Manager is responsible for the grounds, building maintenance, building operations and mechanical functions of The Pines.

The Organizational chart on the following pages identifies key people and illustrates the connections between all the jobs in the home.

The Pines

KEY CONTACT PEOPLE

Katherine Rannie	Ext. 4850	Administrator
Renee Graham	Ext. 4828	Director of Resident Care (DOC)
Jackie Saule	Ext. 4805	Assistant Director of Care (ADOC)
Jennifer Ridgley	Ext. 4877	Assistant Director of Care (ADOC)
Christy Angiers	Ext. 4804	Support Services Manager
Sarah Tolton	Ext. 4801	Dietary Manager
Christina Rochette	Ext. 4824	Activities Manager
Mary Lodge	Ext. 4808	Office Manager
Dr. Keith Cross	645-2281	Medical Director
Norm Barrette	645-2231	Commissioner of Community Services, District Municipality of Muskoka

COMPLAINTS, CONCERNS or PROBLEMS

Insert poster filed under **W/Signs/MOH Complaints Dec 2010**

THE PINES FAMILY COUNCIL

Currently we do not have an active Family Council although we would welcome and support this group. You will be asked to provide your email address so that we can add your contact information to a large group of families and residents that we share information with. This is one communication method to help us provide a system for reciprocal information.

THE PINES RESIDENTS' COUNCIL

The Pines Residents' Council was established in 1980 to independently address issues of concern to residents. Meetings occur on a monthly basis and are open for all residents to attend. Meeting dates and minutes are posted on the first floor Family/Resident Information Board and in each home area. The Resident's Council has appointed assistants within the Activity Department to aid in the operation of the Council. Please contact Christina Rochette at ext. 424 for more information.

DONATIONS

As a non-profit facility, The Pines Support Committee is grateful for donations to "The Pines c/o The District Municipality of Muskoka", which is to raise funds to provide for extras for our residents; assist in developing community awareness, and to make recommendations on priority use of donated funds. If you are interested in joining us or making a donation, please contact Mary Lodge.

ADMINISTRATION

The Administration office is open Monday to Friday from 8:00am to 4:00pm. The office staff will be pleased to provide you and your family with general information about The Pines and assist you with many matters or direct you to the appropriate person if they are unable to help.

The Administration office maintains information for each resident. For example, we record the names, telephone numbers and email addresses of your next-of-kin or a contact person in case of emergency. It is important that we be kept up to date with any changes in names, addresses, email addresses or telephone numbers regularly.

All information kept on file or relayed verbally is kept in the strictest confidence. Each employee of The Pines must sign a "Standards of Conduct" agreement, covering all aspects of resident/family confidentiality.

Issues concerning your finances can be discussed with the Office Manager.

If you have jewelry or other valuables, we urge you to give them to your family for safekeeping. Please note that The Pines cannot be responsible for money or personal items or valuables kept in a Resident's room.

NURSING SERVICES

Nursing services provide creative, holistic and individualized care for all residents. Our goal is to ensure that the concepts of prevention, rehabilitation and the provision of palliative support are combined in the provision of care. Mutual goal setting and decision making is encouraged between the resident, their family members or advocates, the attending physician(s) and the interdisciplinary team.

Resident Care Plans are developed for this purpose with each resident. The development of this plan requires the collection of information, definition of strengths and problem areas, understanding and recognizing recurring patterns and finally organizing and implementing a treatment plan with ongoing evaluation of the successes experienced.

Developing this Care Plan requires the cooperation of the multidisciplinary team of the facility, the resident, family/advocates and attending physician(s). Since a resident may be facing a combination of both physiological and psychological

challenges, it is vital that the information gathered be comprehensive to ensure that an effective and productive Care Plan be developed.

Initial Care Plan conferences are generally scheduled six weeks following the admission of a resident and annually thereafter. The resident and/or their family members/advocates will be contacted by the Nursing Clerk to arrange for times and dates.

If you have any questions or concerns about the Nursing service, please contact the Nurse-in-Charge, the Director of Resident Care, Renee Graham or our Administrator, Katherine Rannie.

INFECTION CONTROL

The Pines has an Infection Control Program to protect the health and safety of all residents and the employees who care for you.

Immunization is an important part of any Infection Control Program. There are a variety of vaccinations, which should be considered or strongly encouraged for residents of long-term care facilities. These will be reviewed with you at your admission. We strongly recommend the annual flu vaccine for all of the residents, families and staff.

The single most important factor in preventing the spread of infection is hand washing. There is more to good hand washing than you think, so take your time and do it right. Rub your hands well with soapy water – this will “pull” soil and dirt away from your skin. The soap lather “traps” the dirt and germs so they can be rinsed away. Lather with soap for at least 15 seconds. Wash the front and back of your hands, between your fingers and under your nails. Rinse your hands well under warm running water and dry them completely with a clean towel. Remember to be extra careful by using the towel to turn off the water taps when you have finished drying your hands.

Infectious disease experts say we can greatly reduce our risk of catching colds and “nasty bugs” if we all washed our hands more frequently. It’s hard to believe that something as easy as washing our hands can have an enormous impact on our health and on the health of people around you.

If you have any questions about infection control, please speak to a nurse or ask to have the Infection Control Nurse visit you.

PERSONAL MEDICATIONS

We have an established partnership with our contracted pharmacy service provider, Medical Pharmacies Group Inc. You may purchase services from other providers subject to the restrictions by this home and Ontario regulations. All personal medications are to be given to the Nurse-in-Charge on admission and not to be kept at the resident's bedside.

RESIDENT IDENTIFICATION PROCEDURE

Each new resident is photographed to enable all staff to accurately identify each resident for medications, treatments and documentation purposes. Every resident is issued an identification bracelet and an identification number on admission day.

CALL BELLS

All residents' rooms have a call-bell system (cord with a push button) that is accessible to them at their bedside. Residents' washrooms, as well as visitor washrooms, have an emergency call-bell system within their reach.

NOTIFICATION OF SIGNIFICANT EVENTS FOR NEXT OF KIN

Emergency contact information will be recorded by the front office and admitting nurse on the day of admission. If there is a change in the contact information, The Pines would ask that the next of kin/Power of Attorney or Substitute Decision Maker (SDM) kindly notify the front office staff and/or the Nurse-in-Charge. When a significant change of status/condition is noted by the nursing staff, the next of kin/Power of Attorney /SDM will be notified. Should an injury ever occur, the Nurse-in-Charge would notify the next of kin / Power of Attorney/SDM as soon as possible (first ensuring the resident is assessed and immediate treatment is given if necessary).

COERCION

No prospective resident will be refused admission or no resident will be discharged from The Pines because,

- A) a document has not been signed;
- B) an agreement has been voided; or
- C) a consent or directive with respect to treatment or care has been given, not given, or withdrawn or revoked.

If you want to cancel any agreement, other than agreement to pay basic accommodation you are able to do so without fear that you would be refused admission or discharged from The Pines.

MEDICAL SERVICES

The Medical Director for The Pines is Dr. Keith Cross. He is responsible for all medical services delivered in The Pines and for promoting and supporting the highest level of medical care for all residents.

The goal for medical services is to provide the maximum enrichment possible in the life of each resident by effectively contributing to the recognition and fulfillment of every resident's unique physical, psychological, social and emotional needs.

Each resident is free to choose his or her own attending physician or RN Extended Class, usually called a Nurse Practitioner but these practitioners must meet the home's standards. Policy requires that physicians be licensed to practice in Ontario and that they are appointed to the medical staff of a hospital operating in accordance with the Public Hospitals Act.

If you do not have a family physician in Muskoka, the Nurse-in-Charge can provide a list of doctors who have agreed to attend clients at The Pines.

DIETARY SERVICES

The Dietary service provides all meals and nourishments throughout the home. There are five dining areas within The Pines. Residents are expected to eat their meals in the unit dining room. Consideration is given to resident's physical and social needs when designating seating in the dining room. The menu is a three-week selective menu that offers a choice at each meal. A copy of the menu is posted in all dining areas. Menus are changed twice a year. Residents contribute to the creation of menus through Delightful Diners Club meetings with the Dietary Manager at Resident Council's meeting. The three main meals are complemented with nutritious snacks available between meals and before bedtime in accordance with Canada's Food Guide. Individual resident dietary needs may necessitate modified or therapeutic menus specific to diet restrictions and food preferences.

Family members and guests who wish to dine with their relative may do so in two ways. The Celebration Dining Room can be reserved by filling out the calendar available in the Celebration Dining Room. Families are welcome to bring in a takeout meal to share with the resident in the Celebration Dining Room. Food services are unable to provide additional meals for families in that area. For health and safety reasons, we discourage families from leaving food in residents' rooms.

Families can dine with residents on the units. Tickets for these meals must be purchased and booked 24 hours in advance from the Front Office. Each unit is limited to three (3) guests at a meal.

The Country Kitchen area is also available for snacks and meals. This area is not booked in advance and availability is based on activity programs booked and first-come, first-serve. Coffee/tea and hot chocolate are available for you to make for your family.

ACTIVITIES

Activities are designed to stimulate body and mind, offering choices within a range of social, spiritual, therapeutic, educational, recreational and leisure activities. We encourage you to actively participate in the planning and implementation of all programs.

All activity programs are coordinated and supervised by the Activity Manager.

The variety of programs offered includes arts and crafts, games, group activities, exercises, special events, parties and social gatherings, musical events, bus trips and transportation to community events. The cost of Happy Hour/Pub Night beverages is listed at Annex B.

Our intention is to work with every resident to develop a program of activities to assist in achieving a healthy level of physical activity and participation. We encourage suggestions for new programs, crafts and special events. If you have a special skill or talent that you would like to share with others, please speak with the Activity Manager.

RESTORATIVE CARE

We are very pleased to be able to offer Restorative Care Programs to the resident of The Pines. Our Restorative Care staff work 7 days a week so that each resident in the program gets the greatest benefit from their efforts. We currently have five Restorative Care Programs. There is criteria that a resident must meet in order to be accepted into the program. For more information on Restorative Care and how to be admitted to the program, please see section 7 of the admission package.

PHYSIOTHERAPY SERVICE

Physiotherapy services are available to all residents upon admission to the facility and/or as referred by their physician. Our team includes a registered physiotherapist and therapy aide. These rehabilitation specialists work in partnership with you to break down barriers impeding physical function.

Physiotherapy can assist your recovery from surgery, illness, and neurological conditions such as stroke, injury or age-related conditions. Therapy can also help you live with chronic diseases or other debilitating conditions. Physiotherapy involves using a variety of techniques to help your muscles, joints, heart and lungs work to their potential. For example, the physiotherapist may take recommendations for safe transfers, mobility and use of mobility aids. Treatment may include education, exercises, therapeutic modalities and functional activities.

OPTIONAL CARE SERVICES

Shopper's Home Health Care, Ontario Wheelchair, Dr. D. Cox, Muskoka Mobile Dental Hygiene (Sue Hare), Direct Dentistry, Advanced Foot Care Nurse, Muskoka Mobile Dental Hygiene Services & Home Care Oxygen are a few optional care services you might choose to use. For further details or options please contact Renee Graham, Director of Care at 645-4488 ext. 4828

LEAST RESTRAINT CARE

Least Restraint care is promoted at The Pines Long Term Care Home. We consider the holistic needs of residents. Each resident has the right to freedom, to risk and to make informed decisions and choices. Where it is considered necessary to restrain a resident, either physical, chemical or environmental, the least restrictive form will always be used.

Restraints will only be utilized when:

- an assessment determines there is no alternative to maintain the safety of the resident and/or others
- a Physician's order has been obtained; and
- resident consent, or where appropriate SDM (Substitute Decision Maker) consent, has been obtained.

A copy of the policy follows and if you have any questions you may contact the Director of Resident Care, Renee Graham.

insert Restraints: policy
new one coming

SERVICES

The following is a list of services available to residents. Any member of staff will be able to provide you with direction or further details when you require a particular service. Please feel free to ask.

LAUNDRY

The laundry is located past the Reception Desk and Country Kitchen and is open 7 days a week. Soiled laundry is collected daily and clean laundry is returned within forty-eight hours. It is suggested that only washable items be brought in.

If you wish to launder personal items or delicate items, there is a small laundry room for Residents only located on the second floor – turn left as you exit the elevator. Families also have the option of doing their relative's personal laundry at home.

In order to avoid loss, we ask that all personal clothing items be labeled with the resident's name. The Pines will provide this service on the day of admission free of charge. Any additional item brought in after admission should be left at the Reception Desk for labeling.

From time to time, clothing may require alterations or replacement. We encourage families to make arrangements for this service. Laundry staff can only complete minor repairs like buttons and open seams when time permits.

Arrangements can also be made for residents who wish to use the services of a dry cleaner.

We cannot be responsible for loss or damage to any clothing or personal items.

HAIRDRESSING SALON

The Hairdressing salon is open Tuesday through Thursday and is located on the second floor, to the right as you leave the elevators. Jasmine McConnell is the hairdresser and appointments can be booked through her at extension 4885.

Current charges for these services are included as Annex A. See Section 3.

TUCK SHOP

The Tuck Shop is operated by volunteers and the hours of operation are posted outside the Shop.

DENTAL SERVICES

Dental services are available on site through Direct Dental Services. The company provides an array of services which would be billed directly to the resident. More information is available on request.

HEARING AID SERVICES

A local company, Kimberly Hearing Aid, provides free hearing aid cleaning. The company will also check for any problems with the devices and offer repairs. The repair costs would be billed directly to the resident.

OPTOMETRIST

You will be asked who has been providing your optometry services on admission and whether you wish to continue with his/her services. This is your choice.

CHAPEL, CHAPLAINCY AND PASTORAL CARE SERVICES

The Pines offers a range of spiritual and personal growth services through our local clergy.

The Activity Manager arranges for and coordinates regular religious services and activities of many faith communities. The times for all services are posted. Suggestions for new or additional services are always welcomed. The Activity Manager also coordinates pastoral visitors to residents at request.

The Pines is pleased to have a Pastoral Care Committee to assist in program development, coordination and evaluation of pastoral care services. This committee also acts as a liaison with the community.

Please contact the Activity Manager directly to discuss any of the services offered at extension 4824.

TELEPHONES and CABLE TV

Each room is equipped with telephone jacks and cable TV outlets. Telephone service may be arranged through Bell Canada. Cable service may be arranged through Cogeco Cable at (800) 267-9000. Installation costs and monthly charges for each of these services are the individual resident's responsibility.

NEWSPAPERS

Daily and weekly newspapers are available to read in the Library. Arrangements can be made through individual newspaper offices if you wish to have papers delivered to you at The Pines, at your expense.

MAIL

Mail is addressed to you at The Pines, 98 Pine Street, Bracebridge, Ontario P1L 1N5. Resident volunteers deliver mail daily to your room. Mail may be sent from The Pines and stamps are available from the Tuck Shop.

TRUST ACCOUNTS

Non interest bearing Trust accounts are available to all residents. Office staff will assist you in submitting the correct forms during normal business hours (8:00am to 4:00pm Monday to Friday). There is no charge for this service.

RATE REDUCTIONS ON BASIC ACCOMMODATIONS

A rate reduction on basic accommodation is calculated from the Notice of Assessment obtained from Revenue Canada. There are various programs that can affect your basic accommodation rate such as Comfort Allowance, GAIS, Involuntary Separation, Ontario Disability Support and Exceptional Circumstances. Please contact Mary Lodge, 645-4488 ext 4808 or by email at mary.lodge@muskoka.on.ca during normal business hours of 8:00am to 4:00 pm Monday to Friday.

COMFORT ALLOWANCE

The comfort allowance for residents is a monthly amount determined by the Ministry of Health and is used in calculating rate reductions on basic accommodations. Office staff will assist you in this regard.

INVOLUNTARY SEPARATION

The office staff can provide you with the application form. To be eligible for this income supplement, resident's income must be less than \$10,000. The government will review the file accordingly.

GENERAL INFORMATION
SCHEDULE A
FACILITY RESPONSIBILITIES
NON CHARGEABLE CARE/SERVICES PROVIDED

The Pines, agrees to the following:

1. To provide basic care, programs and services including:
 - Medical devices, such as catheters and colostomy and ileostomy devices, if required,
 - over and above that provided by other government programs;
 - Supplies and equipment for personal hygiene and grooming, including skin care lotions and powders, shampoos, soap, deodorant, toothpaste, toothbrushes, denture cups and cleaners, toilet tissue, facial tissue, hair brushes, combs, shaving equipment, shaving cream, feminine hygiene products if the Resident is unable to provide;
 - Mobility devices, including wheelchairs, walkers and canes, are available at all time to residents who require them on a short term basis (i.e., six (6) to eight (8) weeks or until a suitable assessment can be arranged);
 - Equipment for the general use of Residents, including geriatric chairs, toilet aids and other self-help aids for the activities of daily living;
 - Meal service and meals, including three meals daily, snacks between meals and at bedtime, special and therapeutic diets, dietary supplements and devices enabling Residents to feed themselves;
 - Social, recreational and physical activities and programs including the related supplies and equipment;
 - Laundry, including labeling, machine washing and drying of personal clothing;
 - Bedding and linen including firm, comfortable mattresses which have waterproof covers, pillows, bed linen, wash cloths and towels;
 - Bedroom furnishings such as beds, adjustable bed rails, bedside tables, chairs, and where Resident is confined to bed, a bed with an adjustable head and foot;
 - Nursing and personal care on a 24-hour basis, including care given by or under the supervision of a Registered Nurse or a Registered Practical Nurse, the administration of medication and assistance with activities of daily living;
 - Medical care that is available in the Facility;
 - *[Note: Residents may continue to have their personal physician provide care to them in the Facility provided their physicians meet the standards and criteria for physicians attending Residents of the Facility and that the physician enters into The Pines' standard form Attending Physician Agreement.]*

- Medical supplies and nursing equipment necessary for the care of Residents, including the prevention of care of skin disorders, incontinence products, infection control, and sterile procedures;
 - Basic ward accommodations;
 - The cleaning and upkeep of accommodations;
 - Suitable accommodation and seating for meetings of the Residents/family councils;
 - Use of an infirmary room, if available; and
 - Maintaining personal funds entrusted to the Facility up to five thousand dollars (\$5,000.00).
2. To review other services that may be available to the Resident and the associated costs to the Resident, if s/he agrees to receive such services.
 3. To review the health care services that may be available in the Facility or which may be arranged for by the Facility, including any associated costs to the Residents if they agree to receive such services, e.g. foot care, dental care.
 4. To communicate the costs of accommodation provided to Residents in the Facility, including applicable Resident charges for basic ward, semi-private and private accommodation.
 5. To communicate on admission, information and explanation about the following:
 - the Facility organizational structure and internal accountability mechanisms;
 - Residents' Rights;
 - Residents Council;
 - Residents' responsibilities when living in the Facility;
 - How to obtain information, raise concerns, lodge complaints, or recommend changes in the Facility;
 - The process for Residents/representative participation in assessment, planning, and evaluation of the individual Resident's care and the Facility programs and services;
 - Any advocacy process and resources available to Residents;
 - Care programs and services provided at no additional costs to the Residents;
 - Other available services and associated cost to the Residents; and
 - Health care services available in the Facility, or which may be arranged for by the Facility, including any associated costs to the Residents;
 - When transfer to hospital is necessary, The Pines will arrange for the transfer of the Resident to a public hospital and will use its best efforts to promptly notify the Resident's Agent of such transfer.

SCHEDULE B
OTHER INFORMATION DISCUSSED WITH RESIDENT

1. Where, in the opinion of the Administrator or the Resident's Attending Physician (in consultation with the Facility's Medical Director), the Resident can no longer be appropriately cared for at The Pines or becomes a hazard to the health and safety of him/herself, other Residents and/or staff, the Administrator will notify the Resident. The Administrator may take steps to arrange a transfer or discharge of the Resident to a more appropriate setting in accordance with the legislation.
2. If, in the opinion of the Administrator or the Resident's Attending Physician (and/or the Facility's Medical Director), the Resident's health care requirements or the Resident's behaviour justifies a relocation within the Facility, the Resident or the Responsible Party will be notified. The Resident shall co-operate with the Administrator in relocating the Resident to a different room in the Facility.
3. The Resident shall endeavour to ensure that visitors shall co-operate with the Facility's rules and policies and the *Long Term Care Homes Act 2007* and Regulations. If the Resident's visitors do not comply, after being notified, the Facility's Administrator or staff have the right to refuse or restrict their entry into the Facility or have those visitors removed from the premises.
4. The Resident agrees to provide all pertinent information regarding his/her care requirements and answer any requests for such information.
5. Each Resident and family has the responsibility to respect the rights and privacy of other persons in the Facility and shall treat other persons in the Facility, including The Pines staff, with dignity, courtesy and respect.
6. The Resident assumes full responsibility and liability for any harm, damage or injury to the Resident or others as a consequence of the Resident refusing to give consent to treatment, to take medication, or to follow care instructions and hereby releases The Pines and its staff from any responsibility, obligation or liability in respect thereof and arising there from.
7. Mandatory and Critical Incident Reporting requirements.
8. The Resident is responsible for inquiring of the Director of Care or designate with respect to who is providing the Resident's direct care on

specified dates and the Director of Care or designate shall provide the information within a reasonable time.

9. From time to time, a dispute may arise between two or more Residents. Such a dispute will be settled by bringing the matter to the attention of the Registered Nursing Staff or designate. If the Registered Nursing Staff are unable to resolve the dispute, the dispute will be brought directly to the attention of the Administrator; the Administrator will then make a decision, which will be final.
10. The Resident is responsible for the payment of any and all physician's fees, drugs and other treatments or aids ordered by a physician, unless otherwise covered by Ontario Health Insurance Plan, Ontario Drug Benefit Act, Assistive Devices Program, and/or funding provided to the Facility under the provision of the Act. All drugs must be obtained from The Pines' contracted pharmacy services provider. The Resident will not be entitled to keep or be permitted to keep a drug on his/her person or in his/her room unless authorized to do so by the Attending Physician.

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

1. 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.
2. 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.
3. 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.
4. 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:
 - (a) charges for goods and services that the Home is required to provide to a resident using funding that the Home 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;

- (b) 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;
- (c) charges for goods and services that the Home is required to provide to residents under any agreement between the Home and the Ministry or between the Home and a local health integration network;
- (d) charges for goods and services provided without the resident's consent;
- (e) 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 Home once the placement co-ordinator has authorized admission to the Home;
- (f) charges for basic or preferred accommodation for residents in the short-stay convalescent care program;
- (g) transaction fees for deposits to and withdrawals from a trust account required to be established and maintained by the Home, or for anything else related to a trust account; and
- (h) charges for anything the Home 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.

I. MAXIMUM CHARGES FOR ACCOMMODATION

Basic (Ward)	\$60.78	\$1,848.73
Semi Private (Basic rate of \$59.82 plus \$12.13)	\$73.27	\$2,228.63
Private (Basic rate of \$59.82 plus \$25.28)	\$86.82	\$2,640.78

During a medical absence, psychiatric absence, casual absence and vacation absence, a resident continues to be responsible for the payment of the maximum amounts that may be charged by the Home to the resident for the same class of accommodation that was provided to the resident immediately before the absence.

Even if the Home does not have an agreement with the resident, the resident is responsible for the payment of amounts charged by the Home for basic accommodation calculated in accordance with the *Long-Term Care Homes*

Act, 2007.

II. AVAILABLE 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 Home's Administrator can provide a rate reduction application form to 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 Home will provide assistance in completing the application.

III. INFORMATION ABOUT FUNDING

See list of funded services in the following pages. Unfunded services must have the appropriate signature prior to provided service.

ROOM PLACEMENT

Although we try to minimize room changes, the care requirements of a resident may dictate a move to another room. The Pines determines the room placement of a person within the home for the benefit of the individual and other residents.

Residents/families may request an in house move or transfer. Requests should be discussed with the Director of Care. If it is agreed that a transfer is possible, the resident's name is added to the list. Transfers are based on resident care needs, room costs and room availability. When a bed becomes available, the family and resident are offered the bed. In any move, the cost of moving telephones is the responsibility of the resident.

Residents may decorate their room with personal items such as comforters, pillows and pictures. However, there is no guarantee that the resident will always remain in the same room. Please check with the Support Services Manager for further information and before decorating the room.

DISCHARGES

A resident may be discharged from The Pines due to a variety of reasons. The home may discharge, after informing the MOHLTC, and after consultation with the multidisciplinary team, that the resident's requirements for care have changed and that, as a result, the home cannot provide a sufficiently secure environment to ensure the safety of the resident or the safety of persons who come into contact with the resident; or to ensure the safety of persons who come into contact with the resident. Should this situation arise The Pines will ensure that alternatives to discharge have been considered where appropriate tried. We will work in collaboration with the appropriate placement coordinator and other health service organizations, make alternative arrangements for the accommodation, care and secure environment required by the resident. We will also ensure the resident and the resident's substitute decision-maker, if any, and any7 person either of them may direct is kept informed and given an opportunity to participate in the discharge planning and that his/her wishes are taken into consideration. A written notice to the resident, the resident's substitute decision-maker, if any, and any person either of them may direct, setting out a detailed explanation of the supporting facts, as they relate both to the home and the resident's condition and requirements for care, that justify the home's decision to discharge the resident. The home may discharge if the resident leaves the home and informs the Administrator that he/she will not be returning to the home; the resident is absent from the home for a period exceeding seven days and the resident has not informed the Administrator of his/her whereabouts, and the Administrator has been unable to locate the resident. The Pines may also discharge a resident if the total length of the resident's casual absences during the period between midnight on a Saturday and midnight on the following Saturday exceeds 48 hours and the resident does not have any remaining vacation absence days available in the calendar year. They may personally request to be discharged, either individually or via their family; they may require a lengthy hospitalization (over 30 days) and therefore be discharged to a hospital; or they may require a lengthy psychiatric leave (over 60 days).

Should these situations arise we will provide you with as much notice as possible or if circumstances do not permit notice to be given before the discharge, as soon as possible after the discharge. Should the resident's condition improve and Long Term Care is no longer required we will assist you in contacting the appropriate placement coordinator for your information

Due to Ministry of Health and Long Term Care funding requirements, the resident's family is required to remove all of the resident's personal belongings within the first 24 hours. A hold of all personal belongings may be extended for one extra 24-hour period at the cost of one additional daily accommodation rate.

ACCOMMODATION RATES

The rate charged for accommodation at The Pines, along with all other Long Term Care Homes, is set province-wide by the Ministry of Health and Long Term Care. The rates are determined annually based on the OAS/GIS/GAINS entitlement and are indexed to reflect increases in the Consumer Price Index (CPI). The monthly rates are set out in Annex D, Section 8.

Residents who pay the basic accommodation rate are eligible for a rate reduction from the Ministry of Health and Long Term Care. In order to apply for this reduction an income test utilizing the residents Notice of Assessment is required. This process is done through the Administration office. Residents who reside in preferred accommodation are not eligible for a rate reduction.

FUNDED SERVICES

People residing at The Pines are charged only for accommodation costs. No charges are made for provincially funded nursing and personal care. There is no relationship between the care received and the amount paid by the resident for accommodation.

The list of basic services that residents will receive without additional charge (other than the charge for basic accommodation) is as follows:

- Nursing and personal care on a 24-hour basis, including care given by or under the supervision of a registered nurse or a registered practical nurse, the administration of medication and assistance with the activities of daily living.
- Medical care that is available in the home.
- Medical supplies and nursing equipment necessary for the care of residents, including the prevention or care of skin disorders, continence care, infection control and sterile procedures.
- Medical devices such as catheters and colostomy and ileostomy devices.
- Supplies and equipment for personal hygiene and grooming including skin care lotions and powders, shampoos, soaps and deodorant, toothpaste, toothbrushes, denture cups and cleansers, toilette tissue, facial tissue, hairbrushes, combs, razors / shavers, shaving cream, feminine hygiene products.

- Equipment for the general use of residents, including wheelchairs (non-customized), geriatric chairs (non-customized), canes and walkers, toilet aids and other self-help aids for the activities of daily living.
- Meal service and meals including three meals daily, snacks between meals and at bedtime, special and therapeutic diets, dietary supplements and devices enabling residents to feed themselves.
- Social, recreational and physical activities and programs, including the related supplies, equipment and staff.
- Laundry, including labeling, machine washing and drying of personal clothes.
- Bedding and linen, including firm comfortable mattresses with waterproof covers, pillows, bed linen, washcloths and towels.
- Bedroom furnishings, such as beds, adjustable bed rails, bedside tables and comfortable easy chairs.
- Standard ward accommodation.
- The cleaning and upkeep of accommodations.
- Suitable accommodations and seating for meetings of the residents' and family councils.

IV. GOODS & SERVICES AVAILABLE FOR PURCHASE

The following is a list of goods and services available to residents for purchase at the Home for an extra charge payable by the resident (cost schedule on following pages): Beautician, Tuck Shop, Guest Meals, Pub Night services, Escort Services and transportation. Residents are not required to purchase care, services, programs or goods from the Home and may purchase such things from other providers. However, the purchase of a drug supply for a resident is subject to any restrictions by the Licensee under the Regulation to the *Long-Term Care Homes Act, 2007*. At least 30 days written notice will be provided to resident in advance of any increases in charges.

PROPERTY DAMAGE

If in the event of damage to Pine's property, a charge for repairs may be incurred.

CASUAL LEAVE

Ministry of Health policies provide for casual leave up to forty-eight (48) hours per week in addition to vacation and medical/psychiatric leaves. For calculation of

the period for casual leaves, the first day of the week is considered to be Sunday.

VACATION LEAVE

Ministry of Health and Long Term Care policies provide for a vacation leave of up to twenty-one (21) days per year, which is not cumulative. Casual and vacation leave may be combined for a total of thirty-one (31) days of combined leave once each year. Arrangements for leaves are made through the Nurse-in-Charge and confirmed and recorded through the Administration Office.

MEDICAL LEAVE

Ministry of Health and Long Term Care policies provide for Medical Leave for the purposes of hospitalization of up to thirty (30) days per occurrence. The use of medical leave requires authorization of a resident's attending physician.

PSYCHIATRIC LEAVE

Ministry of Health and Long Term Care policies provide for transfer to a hospital for psychiatric leave up to sixty (60) days at a time. The use of psychiatric leaves requires authorization of a resident's attending physician.

PERIODS OF LEAVE - CHARGES

During a leave of absence, including medical, psychiatric, vacation and casual leave, a resident will continue to be responsible for all accommodation charges. Upon return to The Pines you will return to your previous room and rate.

NOTIFICATION OF TRANSFER TO HOSPITAL

The Pines will notify the family within 24 hours prior to the resident's transfer to hospital. Where circumstances do not permit notification within 24 hours, the home will notify the family as soon as possible.

SMOKING

The Pines is a smoke-free home.

PHYSICIANS

You are encouraged to maintain the relationship you have with your family physician or RN Extended Class if he/she is willing to provide you services at The Pines.

If the doctor is not willing to attend at The Pines, or you wish to change physicians, your arrangements can be clarified through the Nurse-in-Charge. The

selection and notification of the physician is the resident's (or family member's) responsibility.

Residents will have a choice of the available attending physicians.

FURNITURE and PERSONAL EFFECTS

Every room at The Pines is fully furnished with a wardrobe, electric bed, bedside table, dresser, bulletin board and comfortable chair. You are encouraged to bring with you personal items and small pieces of furniture that are important to you and will assist you in creating a comfortable and home-like setting in your room. The amount is limited by the space available and safety concerns. Please discuss any concerns with the Support Services Manager or the Administrator before bringing any piece of furniture into the home.

It is not advisable to keep significant amounts of money at bedside. Family heirlooms, valuable jewelry or irreplaceable items are not recommended.

All electrical items must be CSA approved and in good working order. **Heating pads, electric blankets, air conditioners, space heaters, refrigerators, curling irons, humidifiers, water coolers or other major electrical appliances are not permitted in resident rooms due to risk level.** Television sets and stereo systems should have earphones.

CONTINUOUS QUALITY IMPROVEMENT (CQI)

Continuous quality improvement (CQI) programs in The Pines are designed to demonstrate our consistent effort to deliver the best possible service to residents. Quality assurance measures the actual process of providing service against the standard established for that service.

Achieving and maintaining accreditation status with the Commission on Accreditation Rehabilitation Facilities (CARF) is an ongoing goal. CARF is a national, independent, non-profit organization that measures the process of program delivery against national standards and provides recognition to health care facilities that have reached and maintained or surpassed these nation-wide standards. The Pines has been accredited since 1984.

EMERGENCY PROCEDURES

Emergency procedures are clearly written in special manuals located in all office and major activity areas. We encourage you to review the main parts of the manual. If you have any questions, please ask any staff member.

The Pines is well equipped in case of fire. All rooms and corridors are equipped with sensitive detection devices. Our fire alarm system is directly connected to the Bracebridge Fire Department and Ambulance Service, ensuring fast response to every alarm.

We have fire drills monthly on all shifts to ensure that residents, staff, volunteers and visitors will know how to respond should there be a real fire.

When the fire alarm sounds, we ask that (if you are able) you leave your room and wait in the corridor for assistance and direction. If you are in a public area of the home, please remain there and await further direction.

Evacuation Procedure (Code Green) - The objective of evacuation is to remove residents away from a source of danger to a safe area in the shortest possible time. The source of danger may be in many forms; fire, chemical spill, external air contamination, loss of services which, over time, would endanger resident safety. (e.g. loss of water)

Remember, if you have any questions regarding these safety procedures, please contact any staff member.

EMERGENCY RESPONSE

FIRE PLAN (mini manual)

Section:
FIRE PLAN

Subject:
RESPONSIBILITIES OF RESIDENTS

EMERGENCY GUIDELINES

WHEN YOU HEAR THE FIRE ALARM

STAY CALM

Remain in your room with door closed. Put (wet) towel/other at the bottom of door if able.

Turn off all non-medical equipment in room.

Follow instructions given by employees and volunteers when they come into your room.

If away from your room, go with staff to safe location.

Wheelchair Residents

Travel along the right hand side of the hallway, close to wall so as not to block corridor. Go with staff to safe location.

If Fire is in Your Room/Area

a) LEAVE room/area immediately and close door to specific location of fire, if possible.

b) CALL FOR HELP

c) If able, pull fire alarm.

If Fire is NOT In Your Room/Area

Remain in your room with door closed and wait for staff to assist you.

If Smoke coming Into Room under Door

Place a **WET TOWEL** at bottom of door to keep out smoke.

WAIT for help to arrive.

SAFETY FEATURES

The Pines LTC Home is fully equipped with a sprinkler and fire detection systems (addressable) with dual detecting smoke sensors and duct detectors; portable fire extinguishers located throughout the building, kitchen hood fire suppression system, and fire blankets. All exit doors have Mag-lock closures with keypad code activation systems. All mag-lock doors have auto release during fire alarm procedures. Nursing staff use the Nurse Call Display, as well as Walkie Talkie's for communication of staff that work alone.

There is a generator for emergency power with extra fuel supply in case of power outages.

SAFETY SIGNAGE

Signage is used throughout The Pines including fire extinguisher identification and location so they will be returned to their proper location; pull stations (REACT) locations; exit locators are lighted; warning signs on equipment rooms, room identifiers and handicapped parking.

An evacucheck marker system is used on most doors of the facility in case of an emergency evacuation of residents or used during a missing resident search procedure.

SECURITY OF BUILDING

Due to the Ministry of Health & Long Term Care Act, the door is locked at all times. The Pines currently has only one main entrance, which is secured after 9 p.m. Monday through Sunday. If and when the door is secured, there is a direct phone line to the Nurse-in-Charge located beside the entrance door. Simply lift the handset and the system will automatically connect you to the Nurse. The Nurse-in-Charge is responsible to complete a tour of the building to ensure all stairwell exits are also secure and record this information.

SECURITY OF RESIDENTS

If a resident is at risk for exit seeking from The Pines, a "Roam Alert" bracelet will be placed on their wrist. This device resembles a watch and allows the main entrance/ exit to automatically lock when the resident is in the general vicinity of the door, or alarm if the door happens to open when passing the entrance/exit.

DEFINITIONS

- (a) “Long Term Care Act, 2007 and the regulations thereunder, as may be amended from time to time;
- (b) “Basic Accommodation Charges” has the meaning ascribed to that term in Section 2.1 of this Agreement;
- (c) “Director” means the person appointed by the Minister of Health to be the Director for the purposes of the Act;
- (d) “Facility” means the home for the aged operated by The District Municipality of Muskoka located at 98 Pine Street, Bracebridge, ON P1L 1N5
- (e) “Resident” means a person admitted to and lodged at The Pines;
- (f) “Responsible Party” in relation to a Resident may include any one of the following:
 - (i) a court-appointed guardian of property and/or personal care;
 - (ii) statutory guardian of property and/or personal care (e.g. Public Trustee and Guardian); or
 - (iii) any individual appointed pursuant to a continuing power of attorney for property, with the corresponding obligations for personal care as provided under the *Substitute Decisions Act*.

Pre-Bill:

Bills for accommodation and other charges are sent to the Resident/Agent in the month prior to the month in which payment is required

Electronic Bracelet:

The provision for payment of an electronic bracelet provided by the Facility, billed in advance at the beginning of each month. This service is offered free of charge at this time.

SERVICE BILLED PER OCCURRENCE:

Audiologist Services:

The provision for payment of costs not covered by OHIP for an audiologist examination.

Beautician/Barber:

Beautician/barber services are provided by appointment as requested by either the Resident/Responsible Party.

Chiropody:

The provision for payment of costs not covered by OHIP for professional foot care.

Clothing Purchases:

The provision of payment for the purchase of clothing required by the Resident.

Dental Service:

The provision for payment of any dental services required. Invoice will be received directly from the dentist.

Escort Service:

The provision for payment of Escort Service charges required by the Resident to attend appointments, etc.

Guest Meal Purchases:

The provision for the payment of the cost of the meal(s) provided to the guest(s) of the Resident.

Identification Bracelet:

The home is required to provide a basic Resident identification system. Some Residents prefer to have a customized metal identification bracelet. This provision is for payment of an alternative identification bracelet.

Meals, Transportation and Related Costs For Recreational Outings:

The provision of meals, trips, transportation and related costs for recreational outings.

Drugs Not Covered by ODBA:

The Resident's co-payment required under sections 20.1 and 20.2 of the ODBA and the provision for drugs ordered by the attending physician which are not covered under the Ontario Drug Benefit Plan.

Optometrist:

The provision for payment of an optometrist examination.

Other Services:

The provision of payment for the cost of special services available within the Facility.

Personal Care Supplies:

The provision for the payment cost of personal care supplies such as, but not limited to, smoking vest/apron, hearing aid batteries, etc. required by the Resident.

Podiatry:

The provision for payment of costs not covered by OHIP for professional foot care.

Professional Foot Care Services:

The provision for payment of costs not covered by OHIP for professional foot care.

Pub Nights:

The provision for the payment of the cost of the Pub Night beverages purchased by the Resident.

Resident Equipment Repair:

Any costs incurred for maintaining maximum safety and security of equipment owned by the Resident.

Transportation:

The provision for payment of taxi or other fares required by the Resident to attend appointments, clinics, etc.

Vision Care: The provision for payment for purchases or repairs of glasses.

Plants and Flowers Welcome at The Pines

The following plants and flowers are considered to be non-toxic (safe, not poisonous). Any of these plants and flowers may be brought into The Pines for the residents. This is not a complete list of all non-toxic/non-poisonous plants.

- African Violet
- Alyssum
- Asparagus Fern
- Astilbe
- Baby's Breath
- Baby's Tears
- Bachelor's Buttons
- Black-eyed Susan
- Boston Fern
- Chinese Evergreen
- Christmas Cactus
- Coleus
- Coral Bells
- Cosmos
- Crocus (spring blooming only)
- Dahlia
- Dracena
- Evening Primrose
- Ficus Benjamina
- Freesia
- Fushia
- Gardenia
- Gloxinia
- Grape Hyacinth
- Hens and Chicks
- Hibiscus
- Hollyhock
- Hoya
- Impatiens
- Jade Plant
- Marigold
- Money Plant
- Peperomia
- Persian Violet
- Petunia
- Phlox
- Poinsettia
- Polka Dot Plant
- Portulaca
- Prayer Plant
- Primrose
- Purple Cornflower
- Rose
- Rubber Plant
- Schefflera
- Snapdragon
- Spider Plant
- Spirea
- Statice
- Tulip
- Wandering Jew
- Weigela
- Yucca
- Zinnia

The following plants and flowers are non-toxic, however, they do cause serious allergic reactions in some individuals, and may not be brought into The Pines:

Lilac

The fragrance produced from lilac plants can cause irritation for those with odour sensitivities.

Lilies

It is the brown pollen-bearing anthers on the tip of the stamens that causes the allergy. The sap of the lily can also cause an uncomfortable long-lasting itchy skin rash.

Please note that any plant may cause unexpected reactions in certain individuals. Every individual who has allergies or sensitivities is unique and generalization is not possible when dealing with this issue.

What is the truth about Poinsettias?

This Christmas flower has received an unfavourable reputation over the years. The fact is that they are not poisonous. Research shows that only ingestion of very large amounts of this plant may be harmful. The milky sap from the plant may however cause dermatitis.

HAIRDRESSING SALON**PRICE LIST****Effective July 1, 2018**

SERVICE	TOTAL
MENS HAIRCUT	\$ 20.00
LADIES HAIRCUT	\$ 24.00
SHAMPOO	\$ 5.00
SHAMPOO AND SET	\$ 25.00
SHAMPOO, HAIRCUT AND SET	\$ 35.00
SHAMPOO, BLOWDRY	\$ 16.00
COLOR RINSE	\$ 4.00
SET ONLY (No Wash)	\$ 22.00
TRIM (Neck, Bangs, etc.)	\$ 5.00
Porter Fee	\$ 5.00

Prices effective July 1, 2018

**HAPPY HOUR / PUB NIGHT
BEVERAGES PRICE LIST**

Pop	\$1.00 per drink
Liquor	\$2.25 per drink
Beer	\$2.00 per drink

GUEST MEAL TICKET PRICES

Breakfast	\$ 5.00
Lunch	\$ 5.00
Supper	\$10.00

Effective March 2008

ACCOMMODATION RATES

July 1, 2018 to June 30, 2019

<u>Type of Accommodation</u>	<u>Daily</u>	<u>Monthly</u>
Basic (Ward)	\$60.78	\$1848.73
Semi Private	\$73.27	\$2,228.63
Private	\$86.82	\$2,640.78

Rate Reduction

A rate reduction can be applied for in a basic (ward) room. To do so, please provide a Notice of Assessment (NOA) to the Front Office and an application will be submitted to the Ministry of Health & Long Term Care(MOHLTC). Upon approval from the MOHLTC a signature from the Next of Kin / Power of Attorney/ SDM will be required.

Please contact Mary Lodge, Office Manager, for more information at 705-645-4488 ext. 408 or by email at mary.lodge@muskoka.on.ca. Office hours are 8:00am to 4:00pm Monday to Friday.