## ADMISSION INFORMATION PACKAGE



# A CHOICE TO CELEBRATE LIVING

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## Introduction

Congratulations on choosing Sherwood Park Manor for you, or your loved one's long-term care needs. We are excited for the opportunity to provide top quality care and fulfilling experiences. We look forward to a great relationship with you and your loved ones and are here for all types of support along this journey.

Sherwood Park Manor considers it everyone's right to choose to celebrate living; whether it be as they are young or in the final years of their life. We solidify this vision with a culture and environment that supports individual potential, autonomy, and quality of life.

We endeavour to make sure our residents are part of the process in making decisions about their care, and that they are an active member in solutions towards any difficulties their facing. We demand compassion, professionalism and respect from our staff when engaging with any resident, family member or public agent. We have a serious focus on both the safety of individuals visiting and working in our facility, but also the utmost care for the safety of our residents. Through these values we ensure a beautiful place to reside. Please take the time to consider this welcoming package for new admissions. It will give all the information needed to become acclimated to Sherwood Park Manor, and will outline necessary documentation that must be submitted. Enjoy.

## Your Room

At Sherwood Park Manor we provide three different types of accommodation to our residents: Basic (formerly known as Ward), Semi-Private, and Private. Rooms come with provided dressers, closet space, beds, and nightstands. All rooms undergo regular cleaning by Manor staff and are monitored for repairs and maintenance.

Depending on what type of room you selected, and the location within the building, certain rules will apply.

#### General Rules

Regardless of your accommodation type the following rules apply to your room:

- I. No 'scatter mats' can be installed in resident's rooms, as they pose risk for tripping.
- II. All televisions must have headphone capabilities and cannot be mounted on walls. They must sit on top of the resident's dresser.
- III. Pictures may be hung on the walls of the resident's room, and personal bedspreads or quilts may be used.
- IV. Residents may have a personal chair. This chair must be first approved by Management.
- V. All electronics must be approved by the Maintenance Department, before being installed/used in a room. (Fire Code)

#### Basic/Semi-Private Rooms

In these types of accommodation rooms, residents reside with another individual. They also may, or may not, share bathroom facilities. Under these circumstances, additional rules apply:

- I. You will be sharing space with another individual. So, we ask for tact and respect from both the resident and family members, regarding the daily experiences of the other resident in the room.
- II. Respect should be given to typical sleeping hours.
- III. Noise should be kept to normal hours and normal levels.
- IV. Possessions should not be stored or left in another resident's living area.
- V. Possessions should not be used or taken from another resident's living area.

- VI. Families should not encroach upon another resident's living space, while visiting their loved one, unless there is a mutual agreement.
- VII. Bathroom space and use, should be equitable and fair, given the circumstances.

#### South/East/West/North Wing

Rooms within the South/East/West Wing have limitations on the size of television accommodation (24"), while the North Wing can accommodate larger units (32").

Residents with vision impairment may request exemption from the rules above. Management and the Maintenance department will assess each situation individually for accommodation.

## Your Possessions

Items you decide to bring with you for your stay here at the Manor, need to be processed and secured appropriately. The following are some of our guidelines for possessions:

- Cash, cheques, jewelry, or other valuables should not be left unsecure in a resident's room. Such items can be left with the Office to be put into the general safe or should be stored in a lockbox within the room.
- II. All possessions must be registered with the Office to label and keep a record of them.This also includes clothing. It is also wise to engrave the arm of prescription glasses.
- III. All clothing must be machine washable. If you intend to provide non-machine washable items, or would prefer to do your loved one's laundry, a hamper must be provided for staff use.
- IV. Do to it being a respiratory irritant and a fall hazard, Talcum Powder is not to be given or used within the Manor.
- V. All lost and found items will be held at the main Office and can be retrieved during business hours.
- VI. Lost and Found laundry will be accessible to browse by family members quarterly.

## Your Day

Sherwood Park Manor prides itself on providing a rich daily experience, full of fun and memorable moments.

Our Life Enrichment department pioneers the daily excitement with live music, crafts, cooking and many more activities. The monthly schedule for these events will be sent to each family/POA

at the beginning of each month. It is also posted within the Manor for all to see, and on our website.

#### Breakfast: 0800

Lunch: 1200

Dinner: 1700

## Visiting

Visiting residents within the Manor is a great way to encourage those who live here and create meaningful memories. We encourage visiting for all families. Some parameters for visitation are as follows:

- I. Visitation is allowed between 1000-2100\*, 7 days a week. Please respect these time constraints as they correspond to daily care needs. (*\*Time limitations do not apply to those on palliative care in the infirmary.*)
- II. Visitation is allowed within a resident's room, unless the group visiting is larger than two.In such cases, the entire group may be accommodated and asked to move into a common area. Please call ahead to arrange a visit with a large group.
- III. Visitors are welcome at lunch and dinner. They can bring their own meal or purchase a meal for a monetary charge. Purchased meals must be co-ordinated in advance via the website, or at the Front Office during business hours.
- IV. We do not have room to accommodate group meals within our traditional dining areas, and therefore use our auxiliary spaces. Due to this, we have a limited space for meal guests.
- V. During Statutory Holidays or Special Resident Luncheons/Dinners, meals will not be available for purchase.
- VI. During visitation, please respect all Infection Prevention and Containment (IPAC) rules.

#### Visiting Policy

#### Visiting Hours

Resident Council has increased the visiting hours; the current visiting hours are now 10:00 a.m. - 9:00 p.m.

#### Sign In

Please ensure that when you are coming to the home you sign into the Log sheet and sign out, filling in the required spaces. We are still mandated to keep the log sheets for 30 days in case there is an outbreak, as the health Unit will require it for contact tracing.

The measures outlined below should be carried out during non-high-risk periods of COVID-19 transmission. Please refer to PHO's Interim Infection Prevention and Control Measures Based on Respiratory Virus Transmission Risk in Health Care Settings for more information on classification of periods of high-risk transmission, and non-high-risk transmission.

#### **Masking Requirements**

#### For staff, students, volunteers, and support workers:

Masking will be based on a point-of-care risk assessment (PCRA), consistent with existing Routine Practices, and on the return-to-work protocol following COVID-19 infection (see section below on staff isolation). A PCRA must be completed by every health care worker before every patient interaction and task to determine whether there is a risk to the health care worker or other individuals of being exposed to an infectious agent, including COVID-19, and determine the appropriate IPAC measures to be taken.

Residents or substitute decision makers, who request that a staff member wear a mask when providing care, must be adhered to in alignment with the Residents' Bill of Rights, including the right to participate fully in making any decisions concerning any aspect of their care.

Staff may consider wearing a mask during prolonged direct resident care (defined as one-on-one care within two meters of an individual for 15 minutes or longer).

Masks are no longer required in administrative and staff-only areas (e.g., lunchrooms, offices, gyms).

#### For caregivers and visitors:

Masks are recommended, but not required, in all areas of the home.

This means that caregivers and visitors may now join in for meals or refreshments in communal areas.

#### For residents:

Residents are not required to wear a mask inside of the home. It is recommended they wear a mask when attending a community outing, as tolerated.

Homes must also have policies for individuals (staff, students, volunteers, support workers, caregivers, visitors, or residents) who:

• Have a medical condition that inhibits their ability to wear a mask or are unable to put on or remove their mask without assistance from another person.

#### Hand Hygiene

Hand hygiene is a critical component in preventing the transmission of infectious diseases. Please refer to PHO's hand hygiene webpage for more details.

Access to alcohol-based hand rub (ABHR) and/or handwashing stations are available at multiple, prominent locations in the setting, including entrances, common areas, and at point-of-care (e.g., client/resident rooms). This is to promote frequent hand hygiene, and signage will be posted to remind all staff, visitors, and clients/residents of the importance of performing hand hygiene.

#### Physical Distancing and Cohorting

Currently, there are no COVID-specific requirements or restrictions related to physical distancing or cohorting when not in outbreak.

#### Meal Visits

Caregivers and general visitors may accompany a resident for meals or social gatherings. When caregivers or visitors are joining a resident in a communal dining setting or social gathering, they are no longer required to remain masked for the duration.

Sherwood Park Manor will continue to have meal visits in the large activity room. Please advise if you are bringing in the meal or require the resident to have their regular meal, and if you are providing feeding assistance. This must be done a minimum of 2 hours in advance.

#### Community Outings/Visits

Visitors are expected to call the nursing station in advance if you are planning to take a resident off the grounds for an extended period. Nursing will assess and ensure the resident is well and able to attend the outing. 613-342-5531 ext. 103

For overnight visits, visitors are expected call the nursing station 24-48 hours in advance to ensure the resident has their medications prepared. You will need to sign the release of responsibility form to receive the medications for the resident. 613-342-5531 ext.103

#### Absences

Per section 6 of the Minister's Directive, the Manor is required to ensure that the resident absence requirements, as set out in this guidance document, are followed.

Currently, there are no COVID-specific requirements or restrictions related to absences.

The Manor will not restrict or deny absences for medical, palliative, or compassionate reasons at any time. This includes when a resident is in isolation or when a home is in an outbreak.

When a resident who is self-isolating on additional precautions is required to leave the home for a medical absence, the Manor will notify the health care facility so that care can be provided to the resident with the appropriate additional precautions in place.

#### During an Outbreak

Well visitors who choose to visit during an outbreak, and who are not going to be providing direct care to an ill resident, will be asked to:

- Consider wearing PPE if they plan to visit again in the next week.
- Perform hand hygiene when entering the Manor, and before entering/leaving the resident's room.
- To visit residents only in their rooms and avoid communal areas.
- If possible, visit only one resident and leave the Manor immediately after the visit; if multiple residents are in the home but in different locations, it is recommended that the healthy resident(s) (non-outbreak case) be visited first.
- To not mingle with other residents.

In addition to these recommendations, visitors who choose to visit during an outbreak, and are going to be providing direct care to an ill resident, will be asked to wear the appropriate PPE.

Moreover, the following recommendations apply regarding visitor restrictions:

• Notices will be placed on the door of the rooms of ill residents or in other visible locations, advising all visitors to check at the nursing station before entering the room. Visitors are to be advised of the above visitor restrictions.

• Ill residents should be visited in their room only.

General visitors should postpone all non-essential visits to residents within the outbreak area, for the duration of the outbreak.

Caregivers, support workers, or individuals visiting a resident receiving end of life care, are allowed when a resident is isolated or resides in an area of the Manor in an outbreak, provided they can comply with the PPE recommendations below.

#### Appropriate PPE for a suspect or confirmed case of COVID-19:

- A well-fitted surgical/procedure mask or a non-fit-tested N95 respirator (or approved equivalent).
- An eye protection (goggles, face shield, or safety glasses with side protection)
- A gown.
- A set of gloves.

Ill visitors shall not be permitted in the Manor, unless under extenuating circumstances. Under these circumstances, they will wear the appropriate PPE, perform hand hygiene upon arrival, as needed during their stay and when leaving both the room of the resident and the Manor, and finally, they should restrict their visit to the one resident.

In the event of a COVID 19 outbreak, Sherwood Park Manor will follow the direction of the local public health unit, including cohorting practices, as outlined in the COVID 19 Guidance: Long-Term Care Homes, Retirement Homes, and other Congregate Living Settings for Public Health Units.

## Outings/Appointments

It is always a nice experience for a resident to get out of the facility and enjoy the public. If it is appropriate for your loved one to have this privilege, or they have a need for an appointment, some information follows:

- I. Nursing must be notified a minimum of 48 hours in advance if a resident is going out.
- II. Staff are not permitted to assist residents in and out the facility for outings. There are very specific techniques and equipment used to safely transfer a resident, and pedestrian vehicles do not provide the necessary environment to facilitate this.

- III. Residents should not be fed anything that does not align with their care plan, while outside the facility.
- IV. When residents have external medical appointments, the Charge Nurse needs to be informed at least two days in advance. This allows the transfer summary, medication list and consent form to be prepared. Surgeries should be booked 2 or more weeks in advance, to obtain pre-operative blood work and an ECG to be completed. Remember: all medical paperwork from an appointment, needs to be given to Nursing upon a residents return.
- V. Para-Transit rides originating at the Manor, will be charged to the appropriate resident's accommodation account.

## The Office

Sherwood Park Manor provides all its residents and their families access to a fully staffed Office. This Office provides administrative, financial and support services. Please do not hesitate to utilize the Front Desk for your needs, during business hours.

#### Business Hours: 0900-1600, Monday-Friday (Excl. Holidays)

Financial services are available through the accounting department. Here we can assist residents with financial tasks and documentation, advise families on their financial options and help with any issues a resident may have with their finances. This department deals with all billing concerns/questions and manages the resident Trust (withdrawals/deposits).

#### Trust Hours: 1000-1600, Monday-Thursday (Excl. Holidays)

## Billing

The Ministry of Health sets the accommodation rates every July, and this information is posted for all residents and families 30 days in advance. Your rate will directly correspond to the type of accommodation (Basic, Semi-Private or Private). If you have financial circumstances that do not allow you to pay the current Basic rate, you may qualify for a Rate Reduction. Here is some information to note:

I. Information flow between the Manor and you is preferred via email, although postage is an acceptable alternative.

- II. Monthly statements are issued within the first 7 working days of each month, and depending on delivery method, will be received before or by the 12<sup>th</sup>. If you have not received documentation by the 15<sup>th</sup>, please contact the Office.
- III. We use a no-fee electronic payment withdrawal service to collect accommodation charges from residents. If you cannot provide the necessary banking information for this service, payments can be made via cheque addressed to "Sherwood Park Manor".

Managing finances while in a Long-Term Care Facility can be challenging at times. We have come up with some helpful hints and practices to make this process easier for you.

#### Involuntary Separation

Please make sure initially, that the resident and their spouse (if applicable) have applied for Involuntary Separation. The Ministry of Health views spouses as separated once a member has entered Long-Term Care.

Legally registering the involuntary separation allows for other entities including Ontario Works, Welfare, Ontario Disability Services and the CRA to also treat the parties as separated. This will alleviate any financial burdens that may make it impossible to cover accommodation charges or leave the spouse outside the facility financially insolvent.

#### OAS/GIS

Please make sure, if a resident makes under the Guaranteed Annual Income System (GAINS) threshold, that they apply for Old Age Security (OAS) and the Guaranteed Income Supplement (GIS). The Ministry of Health assumes that a resident is getting these subsidies if they are entitled, regardless of if a resident has actually applied and been approved.

If the resident is a lower income earner and does not apply for these assistances, the financial burden of the accommodation charges will be too much. It really is imperative that this step is not overlooked.

#### Taxes

If a resident intends to apply for a rate reduction, please remember that the application requires the most recent tax year Notice of Assessment (NOA). Therefore, it is good practice to make sure all tax years due to the CRA are filed, before entering Long-Term Care.

If taxes are not filed, then we may have to process a Rate Reduction application with subpar data. This could result in an inflated rate that is not sustainable, or a denial of Rate Reduction entirely.

#### Bank Accounts

We have found that it is best practice to make sure the resident has their own separate bank account from POAs or spouses. This allows the spouse to budget their own funds, as it omits amounts, they are not entitled to utilize. It also allows POAs to 'set and forget' managing payments for accommodation charges.

Remember: if a resident is on a Rate Reduction, only the comfort allowance is retainable per month (ideally deposited into Trust at the Manor for personal expenditures). In the event the resident makes more than was anticipated, all additional amounts will most likely be taken the following year by the Ministry. *\*\*A Surplus is most likely NOT a Surplus\*\** 

Rate Renewals: July 1<sup>st</sup>, annually.

#### Rate Reduction Applications: August 30<sup>th</sup>, annually.

## Additional Items

- Current Legislation removes/limits the ability to use restraining technologies. Therefore, it is inevitable that falls will occur at the Manor. Rest assured we will do our utmost to aid in these instances.
- II. There is no secure unit at the Manor, and residents with dementia wander freely throughout the facility. If you have an issue with such residents, please contact the nearest staff for assistance.
- III. Wheelchairs or walkers are provided for a short-term initially, to each resident that may need them, as their mobility needs are assessed by a professional. Once mobility needs are assessed, it is the responsibility of the resident and their family to provide the necessary equipment.
- IV. On each second week of the month, a Multi-Disciplinary (MD) conference is held to allow department managers to meet with the new resident and family. These conferences are also done annually, going forward. Typically, they are booked on Tuesdays and Thursdays. Please plan to attend.
- V. When a resident is discharged, we ask that all their belongings be removed from the premises within 48 hours. This is due to the tremendous demand for our facility, and the

desperate nature of the circumstances of some individuals. Resident's belongings cannot be accepted as donations.

## Resident/Family Council

If you are interested in joining Resident or Family Council, this is a great way to become involved in the day-to-day management and decision making within the Manor.

To be involved in Resident Council, please see the Resident and Family Services Manager. They can provide the necessary documentation and run you through the process of becoming a member.

You may sit in on any Family Council meeting you would like. These are held at the Manor, and the schedule will be posted by the Council, within the Facility. If you would like to become a member on the Family Council, please contact the Chair, and complete the referral form.

## Confidentiality

Resident's Personal Health Information (PHI) is important to provide better care services and is used for medical assessments. We share PHI with external parties via electronic systems to ensure the most complete and applicable care.

PHI is stored securely and is only able to be viewed by authorized individuals, bound by confidentiality contracts. Any viewing of PHI is logged and can be reviewed at any time to ensure compliance. Any violations will be investigated and pursued by the Manor.

All PHI is stored and disposed in accordance with law.

#### Your Privacy Choices

- I. You may see your own PHI at any time.
- II. You can ask for any PHI to be corrected or updated at any time.
- III. You may choose to not share your PHI with medical assessors, and you may choose to block your basic personal information from staff.

#### Privacy Officer: Resident and Family Services Manager

If you have any issues or concerns about how your PHI is being handled, you have the right to contact:

#### Information and Privacy Commissioner of Ontario

2 Bloor Street East, Suite 1400, Toronto, Ontario M4W 1A8

Toll Free: 1-800-387-0073

TDD/TTY: 416-325-7539

info@ipc.on.ca

WWW.IPC.ON.CA

## Complaints

#### Who Can Report a Concern?

Anyone who is concerned about any resident's situation can report a concern or complaint, including:

- · A resident.
- · A family member.
- Someone employed by the Manor.
- Anyone providing services to the resident.
- Any member of the public.

#### How to Report a Concern?

Reporting your concern directly to the home is usually the best and fastest way to solve the problem. This is usually the most efficient and effective when concerns are directly expressed right to a staff member.

In the event you have not found a resolution, forms are provided in the front lobby for a written complaint, and they can be submitted into the complaint mailbox.

Additionally, you can call 613-342-5531 and ask to speak to the Administrator during business hours, or the Charge Nurse during after hours, weekends and holidays.

#### What Will the Manor Do?

The Manor will investigate and, when possible, resolve all written and verbal complaints related to a resident's care or the Manors operation, and provide a response within 10 business days of receiving the complaint. The response will indicate what has been done to resolve the complaint or that the Manor believes the complaint to be unfounded, and the reasons for that belief. If the complaint alleges harm or risk of harm to any resident, an investigation will commence immediately and follow mandatory reporting requirements.

If a complaint requires more than 10 business days to investigate and resolve, receipt of the complaint will be acknowledged within 10 business days of receiving the complaint and indicate the date by which the complainant can reasonably expect the complaint to be resolved. A follow-up response will be provided as soon as possible indicating what has been done to resolve the complaint or that the Manor believes the complaint to be unfounded, and the reasons for that belief.

Except for verbal complaints that are resolved within 24 hours, records will be kept on all verbal and written complaints, which include: the nature of the complaint and date received; actions taken including dates of actions, time frames for actions and follow-up actions; final resolution; dates and description of response; and response made by the complainant. These records will be reviewed and analyzed at a Management Meeting at least quarterly to determine if there are any trends, and the results will be considered when determining what improvements are required. A written record will be kept of each review and the improvements made.

The following complaints received concerning the care of a resident or the operation of the home will be immediately reported to the Director (MLTC) under the mandatory reporting requirements and investigated as outlined in the Zero Tolerance of Abuse and Neglect Policy (A-2-100):

- Improper or incompetent treatment or care of a resident that resulted in harm or a risk of harm to the resident.
- Abuse of a resident by anyone or neglect of a resident that resulted in harm or a risk of harm to the resident.
- Unlawful conduct that resulted in harm or a risk of harm to a resident.
- Misuse or misappropriation of a resident's money.
- Misuse or misappropriation of funding provided to the home by the Ministry.

You May Choose to Contact the Ministry of Health and Long-Term Care.

#### You can do this in one of two ways:

Call the Long-Term Care Family Support + ACTION Line, toll-free at 1-866-434-0144.

The person answering the ACTION Line will take down your information, ask you some questions, assess the problem, and give the information to an inspector for follow-up.

The Ministry of Health and Long-Term Care's Long-Term Care ACTION Line is open seven days a week, from 8:30 a.m. to 7:00 p.m.

#### OR

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

Director, Performance Improvement and Compliance Branch

Ministry of Long-Term Care

1075 Bay Street, 11th Floor

TORONTO, ON M5S 2B1

You will receive a letter or phone call to let you know that the Ministry has received your complaint. The Director will refer your complaint to an inspector who will investigate the matter.

#### What information should I give the Ministry when I report a concern or complaint?

The more details you provide, the easier it will be for our inspectors to investigate the problem.

At a minimum, your complaint should include:

- Name of the long-term care home
- · Address of the long-term care home (including city)
- A description of your concern.

Please provide the following information if it is available:

- $\cdot$  who was involved
- · what happened
- when it happened
- $\cdot$  ~ where in the home or outside of the home the incident happened
- your name, address, and telephone number (optional).

If we have your contact information, the inspector can call you for more information and notify you when the inspection is done.

However, you do not have to provide your name, address, or phone number. You can make your complaint anonymously.

#### What Will the Ministry Do?

An inspector will conduct an inquiry and visit the long-term care home immediately if the complaint indicates that any of the following may have occurred:

- Improper or incompetent care or treatment, abuse, neglect, or unlawful conduct that resulted in serious harm or a risk of serious harm to a resident.
- Retaliation against a resident or any other person for reporting information to the ministry or testifying in a proceeding.

In all other cases, an inspector will contact you to talk about the problem and how to resolve it.

When looking into the problem, the inspector may talk to residents, families, staff, or other people. He or she may also review documents and watch the way the home operates. It is the inspector's role to ensure the home is complying with the Fixing the Long-Term Care Act (2021).

If the inspector finds the home is NOT complying with the legislation, he or she will describe the problem in an inspection report. The home will be expected to fix the problem and comply with any orders from the inspector or the responsible Director at the Ministry of Long-Term Care.

Once the inspection is complete, the ministry will contact you and tell you about the findings and actions taken. We are careful to respect the privacy of residents when reporting on our inspections. When telling you what has been done to resolve your complaint, the inspector will only provide information permitted by the Personal Health Information Protection Act, 2004.

#### What About Privacy?

People making complaints do not have to give their name or any contact information. If you do provide your name, we are committed to protecting people's privacy and all complaints are treated as confidential. Information about complaints is only disclosed if a law requires or allows the ministry to disclose it.

Long-term care homes are not told who has complained; however, the home may be able to identify the person based on the nature of the complaint.

To encourage people to report any concerns, the Fixing the Long-Term Care Act, 2021, provides protection for residents as well as anyone else who makes a complaint from any retaliation. If

you feel that you or anyone else is being treated unfairly because you complained, contact the ministry right away.

Members of the public can request information about inspection reports for a long-term care home. In the future, the ministry also plans to post information about inspections on a website. In these cases, the ministry will only disclose the information permitted or required by law.

#### Questions?

If you want more information about reporting a concern or complaint, ask the home for its complaints procedure or call the ministry's confidential toll-free number.

#### Long-Term Care Family Support + ACTION Line

1-866-434-0144

7 days a week, 8:30 a.m. – 7:00 p.m.

## Directory

Main Telephone Line	613-342-5531
Corporate/Finance Services – Blu Desrosiers	101
Main Nursing Station	103
Director of Care – Darlene Knapp	104
Executive Director – Nancy Nesbitt-Boucher	105
Life Enrichment	114
Facility Services – Barry Barton	115
Support Services – Connie Hoyland	116
Dietitian	118
Physiotherapy	119
North Nursing Station	121
Assistant DOC – Tammy VanderKloet	125
RAFS Supervisor – Chris LeClair	126
Gift Shop	128

Sherwood Park Manor

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