St. Joseph's Care Group

Hogarth Riverview Manor

Resident & Family Handbook

St. Joseph's Care Group Resident and Family Handbook Revised October 2, 2024

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Welcome to St. Joseph's Care Group

Welcome,

St. Joseph's Care Group is proud to provide long-term care support and services to residents at Bethammi Nursing Home and Hogarth Riverview Manor. As an organization committed to resident-centred care, your personal preferences, cultural traditions, lifestyle and expressed needs are respected. We are committed to working with you, as a partner, to ensure that decisions about your care align with your values to the best extent possible, as - Together We Make a Difference!

We look forward to getting to know you. Our team will do our best to understand your interests, goals and what you are most proud of. We anticipate learning about your support network and the support for your family. By understanding your and your families' wants and needs, we are able to ensure the right care and supports are available when needed.

This Resident and Family Handbook should answer many of the questions you or your loved ones may have. It will help you as you become familiar with your new home. Additional resources which help families to understand and prepare for the transition to long term care include author Deborah Bakti's books titled Now What? The Managing Emotional Journey of Long Term Care and Recipe for Empathy: Six Strategies to transform your Families into Fans in Senior's Care. If you require assistance in obtaining a copy please let us know. Please do not hesitate to ask any of our team if you have any questions about your care or about our services.

Thank you for choosing long-term care at St. Joseph's Care Group. We are committed to supporting you, your family and your friends. We look forward to getting to know you.

Sincerely,

Your Care Team,

Hogarth Riverview Manor and
Bethammi Nursing Home

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About St. Joseph's Care Group

MISSION

Rooted in the healing ministry of Jesus, we meet the people of Northwestern Ontario where they are on their wellness journey and support them to achieve their highest quality of life.

VISION

Wholistic people-centred care. Creating healthier communities. Together.

CORE VALUES

Care

We will provide Wholistic people-centred care in a safe and welcoming environment for all.

Compassion

We will demonstrate dignity and respect for all, fostering healing and wholeness by addressing diverse needs.

Commitment

We will strive for the best care experience for all, while actively addressing systemic racism and discrimination.

Our Approach to Care

The model of care is resident-focused. We believe that decisions about the resident's daily life is made with him/her, not for him/her. It is our belief that independence is a desirable human quality that fosters a sense of well-being. For this reason, each resident is encouraged and assisted to attain the highest level of independence and self-care that is possible for him/her to achieve. St. Joseph's Care Group provides long-term care services in a home-like setting where each person's individuality is supported with respect and dignity.

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Long-Term Care Homes Act

The Fixing Long-Term Care Act, 2021 (the Act) and Ontario Regulation 246/22 (Regulation) was proclaimed into use on April 11, 2022 replacing, the Long-Term Care Homes Act, 2007. All long-term care homes in Ontario are now governed by this Act, which is designed to help ensure that residents of long-term care homes receive safe, consistent, and high-quality resident-centred care.

The Act states 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."

The goal of the Act is to create long-term care home environments where residents feel at home, are treated with respect, and have the supports and services they need for health and well-being. This goal is achieved through two ways: an ongoing, province-wide commitment to the health and well-being of Ontarians living in long-term care homes; and collaboration and mutual respect among residents, their families and friends, long-term care home licensees, service providers, caregivers, volunteers, the community, and governments.

Each of Ontario's long-term care homes undergoes inspection to ensure they comply with the Fixing Long-Term Care Act, 2021 and Ontario Regulation 246/22. These inspections include recorded interviews with residents, family members and staff.

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The Fundamental Principle and the Residents' Bill of Rights under the Fixing Long-Term Care Act, 2021

HOME: THE FUNDAMENTAL PRINCIPLE

1. 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.

RESIDENTS' BILL OF RIGHTS

3. (1) Every licensee of a long-term care home shall ensure that the following rights of residents are fully respected and promoted:

RIGHT TO BE TREATED WITH RESPECT

1. Every resident has the right to be treated with courtesy and respect and in a way that fully recognizes the resident's inherent dignity, worth and individuality, regardless of their race, ancestry, place of origin, colour, ethnic origin, citizenship, creed, sex, sexual orientation, gender identity, gender expression, age, marital status, family status or disability.
2. Every resident has the right to have their lifestyle and choices respected.
3. Every resident has the right to have their participation in decision-making respected.

RIGHT TO FREEDOM FROM ABUSE AND NEGLECT

4. Every resident has the right to freedom from abuse.
5. Every resident has the right to freedom from neglect by the licensee and staff.

RIGHT TO AN OPTIMAL QUALITY OF LIFE

6. Every resident has the right to communicate in confidence, receive visitors of their choice and consult in private with any person without interference.
7. Every resident has the right to form friendships and relationships and to participate in the life of the long-term care home.
8. Every resident has the right to share a room with another resident according to their mutual wishes, if appropriate accommodation is available.
9. Every resident has the right to meet privately with their spouse or another person in a room that assures privacy.
10. Every resident has the right to pursue social, cultural, religious, spiritual and other interests, to develop their potential and to be given reasonable assistance by the licensee to pursue these interests and to develop their potential.
11. Every resident has the right to live in a safe and clean environment.

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12. Every resident has the right to be given access to protected outdoor areas in order to enjoy outdoor activity unless the physical setting makes this impossible.
13. Every resident has the right to keep and display personal possessions, pictures and furnishings in their room subject to safety requirements and the rights of other residents.
14. Every resident has the right to manage their own financial affairs unless the resident lacks the legal capacity to do so.
15. Every resident has the right to exercise the rights of a citizen.

RIGHT TO QUALITY CARE AND SELF-DETERMINATION

16. Every resident has the right to proper accommodation, nutrition, care and services consistent with their needs.
17. Every resident has the right to be told both who is responsible for and who is providing the resident's direct care.
18. Every resident has the right to be afforded privacy in treatment and in caring for their personal needs.
19. Every resident has the right to,
    i. participate fully in the development, implementation, review and revision of their plan of care,
    ii. give or refuse consent to any treatment, care or services for which their 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 their care, including any decision concerning their admission, discharge or transfer to or from a long-term care home and to obtain an independent opinion with regard to any of those matters, and
    iv. have their 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 their records of personal health information, including their plan of care, in accordance with that Act.
20. Every resident has a right to ongoing and safe support from their caregivers to support their physical, mental, social and emotional wellbeing and their quality of life and to assistance in contacting a caregiver or other person to support their needs.
21. Every resident has the right to have any friend, family member, caregiver or other person of importance to the resident attend any meeting with the licensee or the staff of the home.
22. Every resident has the right to designate a person to receive information concerning any transfer or any hospitalization of the resident and to have that person receive that information immediately.
23. Every resident has the right to receive care and assistance towards independence based on a restorative care philosophy to maximize independence to the greatest extent possible.
24. Every resident has the right not to be restrained or confined, except in the limited circumstances provided for under this Act and subject to the requirements provided for under this Act. Note: On a day to be named by proclamation of the Lieutenant
25. Every resident has the right to be provided with care and services based on a palliative care philosophy.

26. Every resident who is dying or who is very ill has the right to have family and friends present 24 hours per day.

RIGHT TO BE INFORMED, PARTICIPATE, AND MAKE A COMPLAINT

27. Every resident has the right to be informed in writing of any law, rule or policy affecting services provided to the resident and of the procedures for initiating complaints.
28. Every resident has the right to participate in the Residents' Council.
29. Every resident has the right to raise concerns or recommend changes in policies and services on behalf of themself 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 IX, a member of the committee of management for the home under section 135 or of the board of management for the home under section 128 or 132.
    iv. staff members.
    v. government officials.
    vi. any other person inside or outside the long-term care home.

BILL OF RIGHTS – ALTERNATE FORMATS

To access the online Bill of Rights, click here.

To access an English video/audio version of the Residents' Bill of Rights click here.

To access translations of the Residents' Bill of Rights in different languages, click here.

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Long-Term Care at St. Joseph's Care Group

St. Joseph's Care Group provides many programs and services for seniors. We have two long-term care homes, Bethammi Nursing Home and Hogarth Riverview Manor. The home-like design fosters resident-focused care. Resident rooms and common areas are spacious, home-like and designed to enhance safety and security.

BETHAMMI NURSING HOME

Bethammi Nursing Home is a 112-bed long-term care home operated out of St. Joseph's Heritage located at 63 Carrie Street. There are two Resident Home Areas (RHA). Bethammi Nursing Home has a mix of basic and preferred accommodations available for residents. All accommodations include a bathroom. All residents are provided with basic furnishings such as bed, night table, closet, vanity and dresser.

Bethammi Nursing Home

Bethammi Nursing Home

HOGARTH RIVERVIEW MANOR

Hogarth Riverview Manor is a 544-bed long-term care home located at 300 Lillie Street N. There are 16 Resident Home Areas with 32 residents each. There is a selection of basic and preferred accommodations available. Private rooms have their own bathroom, while basic rooms share a bathroom between two rooms.

Hogarth Riverview Manor

Hogarth Riverview Manor

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Accommodations

COSTS

All personal and nursing care provided by long-term care homes is funded by the Government. You must pay for accommodation charges such as room and board.

Accommodation costs are set annually by the Ministry of Health and Long-Term Care (Refer to Schedule A: of the Accommodation Agreement) and are standard across Ontario. Please visit their website for the most up-to-date information.

The current rates (maximum) are:

Type of Accommodation	Daily Rate	Monthly Rate
Long-stay Basic (HRM)	$66.95	$2,036.40
Long-stay Semi-private (HRM)	$80.72 (Basic plus a maximum of $13.77)	$2,455.24
Long-stay Private (HRM)	$95.65 (Basic plus a maximum of $28.70)	$2,909.36
Short-Stay Resident (HRM) (Respite Bed)	$43.34 (There are no current Respite beds at HRM.)	N/A
Accommodation costs as of July 1, 2024. Please refer to the Ministry of Long-Term Care website or Fixing Long-Term Care Homes Act (2021) for the current rates		

Ontario www.ontario.ca/page/find-long-term-care-home

You will be charged and are obligated to pay for the rate for basic accommodation unless there is an agreement to pay the preferred rate for a private or semi-private accommodation. If a semi-private or private accommodation is desired, an agreement to pay for preferred accommodation is required.

Residents are obligated to pay their accommodation fee during all leaves from the home.

RATE REDUCTION (SUBSIDY)

If you do not have enough income to pay for the basic room, you may be eligible for a subsidy. This is known as a rate reduction. Rate reductions are not available to people requesting semi-private or private rooms.

If you are unable to pay the maximum basic fee from your income and wish to apply for a rate reduction, your monthly rate will be determined from your last year's Notice of Assessment from Revenue Canada.

To apply for a basic accommodation rate reduction, submit your Notice of Assessment to Financial Services at the time of admission for submission to the Ministry of Health and Long-Term Care, who will respond to the home, with the maximum amount that you can be charged.

ACCOMMODATION FEES

The following outlines what long-term care expenses are funded with accommodation fees:

- Laundry and linen Services
- Furnishings, bedding and linen
- Housekeeping Services
- Dietary Services - meal preparation, service (three meals daily and snacks)
- Building and Property Services - maintenance, repairs
- General and administrative staff (e.g. finance services)
- Facility insurance
- Facility utilities expenses and taxes

GOVERNMENT FUNDING

The following outlines what long-term care expenses are subsidized by government funding:

Nursing and Personal Care (NPC)

- Direct care staffing (e.g. registered nurses, registered practical nurses, personal support workers, and other persons hired to provide personal support services)
- Nursing and personal care administrators (e.g. director of nursing and personal care, nurse managers, unit clerks, MDS RAI Coordinator, and, shared clinical nursing consultants) who assess, plan, provide, assist, evaluate, and document the direct care required to meet the residents' assessed nursing and personal care requirements
- Nursing and Personal Care training
- Nursing and personal care equipment, supplies, and devices used by NPC staff in the provision of direct nursing and personal care as outlined in residents' care plans or plans of care

NON-ARM'S LENGTH SERVICES

Other services provided by St. Joseph's Care Group (non-arm's length) are provided without fees to the resident (e.g. Diabetes Health Thunder Bay, Telemedicine etc.)

ADDITIONAL COSTS/FEES NOT COVERED

Residents are not required to purchase additional care, services, programs or goods from St. Joseph's Care Group and may purchase these products/services, with the exception of over -the-counter medications which must be purchased from our contracted pharmacy in compliance with Long-Term Care legislation, to ensure compatibility with our medication administration system.

Products and services for purchase from Bethammi Nursing Home and Hogarth Riverview Manor as per the Accommodation Agreement:

Extra products, services and fees from third parties:

- Transportation and Medical Escort
- Lift+ Passes (Accessible Transportation)
- Personal items removal and disposal fees upon discharge
- Hair Stylist and Barber Services, Hair Products
- Co-payment for Ontario Drug Benefit (ODB) Eligible Drugs
- Advanced Foot Care and Chiropody
- Oxygen and oxygen supplies
- Medications not covered by Ontario Disability Support Program and non-prescription drugs, vitamins, herbal remedies and some specialized medications
- Physiotherapy or Occupational Therapy services from providers not associated the home
- Café purchases/Gift shop items
- Continence care products other than what is supplied by the home
- Dentist, dental hygienist visits and dentures
- Eye glasses/examinations
- Funeral and burial arrangements
- Hearing aids and batteries
- Newspaper or magazine subscriptions
- Nutrition supplements requested by the resident not provided by the home
- Other private services (e.g. paid companions or massage therapists)
- Personal clothing
- Personal Telephone/Cable TV/Internet hook-up and service
- Repairs and maintenance of any personal and specialized equipment of exclusive resident use
- Specialized adaptive aids e.g. walkers, wheelchairs
- Specialized mattresses and cushions (must meet safety requirements)

LEAVES AND VACATIONS OR ABSENCE FROM THE HOME

The Ministry of Health and Long-Term Care sets out requirements for leaves of absence for all long-term care homes. Residents are obligated to pay their accommodation fee during all leaves:

- Casual Leave - Up to 48 hours per week. The first day of the week is considered to be Sunday.
- Vacation Leave - Maximum allowable is 21 days per calendar year, not cumulative from year to year. Casual leave can be combined with vacation leave for a total of 31 days.
- Medical Leave - Maximum allowable is 30 days at a time. Casual leave is not included.
- Psychiatric Leave - Maximum allowable is 60 days at a time.

Preparing to Move

MEDICAL CARE

Residents will receive medical care from one of our long-term care home Physicians.

RESIDENT ROOMS

You are encouraged to personalize your room to make it comfortable and home-like. Rooms include a bed and mattress with linens, bedside table, comfortable chair, wardrobe with a lockable drawer, overhead light, and a bedside light. A call bell is located at the bedside and in the bathroom.

FURNITURE

For the safety of all residents, staff and visitors, we have a policy to outline what types of additional furnishings and or equipment are permitted in the resident rooms.

Depending on the size of the room, the following are permitted:

- Television (maximum size 32 inches - no wall mounts)
- Table or floor lamp (with fluorescent or LED bulbs only)
- Small chair, stand or desk (maximum size 30 inches by 30 inches)
- Small dresser (maximum size 18 inches by 30 inches)
- Small electric fan

All electrical equipment brought from community or newly purchased, such as televisions and lamps must be checked by building service staff to ensure it meets CSA safety standards. For infection control purposes, we discourage furniture with cloth materials. The moving and cleaning of any furniture is the client and families responsibility.

VALUABLES

There is a lockable drawer on the wardrobe for personal items you would like to keep safe, however, keeping large sums of money and other valuables in your room is discouraged. We recommend that valuables such as jewelry, credit cards, and large sums of cash are left with a family member or friend. St. Joseph's Care Group is not responsible for the loss of or damage to personal items.

Upon admission, families will be asked to sign an Accommodation Agreement which states:

The resident agrees to release and indemnify the home, its officers, agents and employees from all claims and liability from:

a) The loss of money, valuables and personal effects unless these were respectively deposited in trust funds or held in safe keeping by the home

b) The loss or destruction of clothing, furnishings, and personal effects, unless the loss or destruction occurred as a result of negligence on part of the home

RESIDENT TRUST ACCOUNTS

Residents can establish a resident trust account with Financial Services. This account allows residents to access spending money. Residents may withdraw amounts up to $50 at a time. You can also authorize pre-payments for items such as the hairstylist services or Ontario Drug Benefit Co-Payment fee. No resident trust account may exceed $5,000. Financial Services is open Monday to Friday (excluding statutory holidays) 9:00 am to 4:00 pm.

CLOTHING AND OTHER ITEMS TO BRING

Please ensure that you have an adequate supply of comfortable clothing that is machine washable. All clothing and personal items will be labeled with your name on admission and when new items are brought to the Nursing Station. Unmarked clothing or clothing where labels have come off will be kept in the laundry department lost and found.

Suggested list of items:

- Pajamas
- Housecoat
- Underwear, bra, undershirts, slips
- Shirts, shorts, pants, vest, dresses, skirts
- Jogging suits
- Socks, stockings
- Sweaters
- Non-slip slippers
- Non-slip shoes
- Coat or jacket (lightweight and heavyweight)
- Cosmetics, body lotion
- Eyeglasses
- Hearing aids
- Toothbrush, toothpaste
- Dentures, denture tablets, denture brush
- Hairbrush, comb
- Soap, deodorant, tissues
- Shaving supplies, electric razor, aftershave
- Assistive devices e.g. walker, wheelchair

St. Joseph's Care Group is not responsible for the loss or damages of personal items.

CLOSET CLEANING

Due to limited space, we suggest that only seasonally appropriate clothing be kept at the home.

RESIDENT ROOMS - ITEMS NOT ALLOWED

Electrical equipment (other than for medical purposes which are regulated and approved) pose a great risk for safety, therefore, the following are not permitted:

- Small refrigerators and freezers, electric blankets
- Space heaters, air conditioners, electric coolers, electric water coolers, fire places
- Kettles, coffee makers, toasters, electric grills, microwaves and other small appliances
- Sharp items such as scissors, and knives.

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Individualized Care

DEVELOPING YOUR CARE PLAN

An initial Care Plan is developed within 24-hours of your move to our home, it's called the 24-Hour Admission Care Plan. Soon after, the team will work with you to develop an individual plan of care. A care conference meeting with yourself, your family/Substitute Decision-Maker (SDM) and the interprofessional team is scheduled to discuss your care needs and set personal goals. Care conferences are held approximately six weeks following admission and annually thereafter, or as necessary. A letter is sent to notify you, your family/SDM of the conference date, along with a copy of the care plan for your review.

24-HOUR ADMISSION CARE PLAN

A 24-hour Admission Care Plan is developed with you and/or your substitute decision-maker within 24-hours of admission to the home and covers:

- Any identified risk, including fall risk with interventions to mitigate those risks
- Any behavioural triggers and interventions to mitigate those risks
- Type and level of assistance required relating to Activities of Daily Living
- All personal equipment, mobility aids, glasses, dentures, hearing aids, etc.
- Customary routines and comfort requirements
- Drugs and treatments required
- Known health conditions and allergies with interventions
- Skin condition with interventions
- Diet orders, including food texture, fluid consistencies and food restrictions
- Advanced Directives
- Individual needs and preferences
- Previous history and preadmission assessment by the placement co-coordinator

PLAN OF CARE

Within 14 days of your admission, team members complete their assessments for the development of your Initial Plan of Care. This is finalized within 21 days of admission and includes:

- Demographic information
- Identification of all persons who participated in its development
- Customary routines
- Cognition ability
- Communication abilities, including hearing and language
- Vision

- Mood and behaviour patterns, including wandering, any identified responsive behaviours, any potential behavioural triggers and variations in functioning at different times in the day
- Psychological well-being
- Physical functioning and type and level of assistance required relating to ADLs, including hygiene and grooming
- Continence including bladder and bowel elimination
- Disease diagnosis
- Health condition including allergies, pain, risk of falls and other special needs
- Seasonal risk relating to hot weather
- Dental and oral status, including oral hygiene, nutritional status including height, weight and any risks relating to nutritional care
- Hydration status and any related risks
- Skin conditions, including altered skin integrity and foot conditions
- Activity patterns and pursuits
- Drug and treatments, special treatments and interventions
- Safety risk, nausea and vomiting
- Sleep patterns and preferences
- Cultural, spiritual and religious preferences and age-related needs and preferences
- Potential for discharge
- Nutritional assessment by a registered dietitian

The Plan of Care is reviewed and revised according to reassessment in collaboration and consent with the resident / Substitute Decision-Maker:

- Quarterly and with any change in condition, risk level and or functional ability.

Changes are communicated to all staff involved with the care of the resident. The plan of care is maintained both in electronic and paper copy.

CARE CONFERENCES

Resident care conferences are held six weeks after admission then followed annually and as needed. All care conferences are scheduled with notice at least two weeks in advance. Bethammi Nursing Home and Hogarth Riverview Manor ensure all needs and concerns are being met in a variety of areas such as:

- Care Planning/Goals of Care
- Nutrition
- Medications
- Therapeutic Recreation
- Physiotherapy

- Spiritual care

Members in a variety of areas of the interdisciplinary team are included in care conferences:

- Resident and/or family – discuss any concerns in regard to care or services provided and provide feedback about the plan of care or goals of care
- Nurse – review admission assessment and compare to current status, bring forward any concerns
- Physician – review relevant medical history and discuss any current concerns when available.
- Pharmacist – review medications and provide suggestions for changes
- Dietician – review and discuss nutritional assessment and provide strategies if needed
- Other (e.g. Personal support worker, therapeutic recreation, physiotherapy, social work, psychogeriatric resource consultant, spiritual care.)

We value your input and take your thoughts and concerns into consideration with the goal of enhancing individualized care to meet the needs of each and every resident.

HEALTH UPDATES

Family members wishing to inquire about your health can call the appropriate home areas at any time, but preferably after 8:30 a.m. If the resident has many relatives, please assign one person to call and share the information received with other family members. Information about your health is not released to anyone other than an authorized family member or contact person with consent. Any concerns should be forwarded to the Registered Nurse on duty.

KEEPING YOU INFORMED

We believe that you and your Substitute Decision-Maker have the right to be informed of all aspects of your healthcare. We will be forthcoming about incidents in an effort to foster a just culture of safety and to make improvements in your care.

VISITING AND STAYING IN TOUCH

Family and friends are an important part of your care and are welcome and encouraged to visit and participate in many of the day-to-day activities. We encourage family and friends to visit as often as possible. They can also keep in touch by phone or email. Out of respect for all, we ask that visits occur during the day or evening. However, if you are very ill, or having trouble settling, family or friends are most welcome to come and spend time with you during the night. Visitors who will be arriving after 9:00 p.m. are asked to call ahead to inform nursing staff so they can alert security staff. Visitors are asked not to visit if they are feeling ill or have traveled to a country where an outbreak of a severe illness is occurring.

Due to COVID-19, visiting restrictions are subject to change and additional restrictions may be put in place in the case of an outbreak and/or in accordance to provincial guidelines. Families are sure to be informed of any changes through the automated calling system.

PALLIATIVE CARE

Palliative care is about supporting our residents as health declines. When the time comes, the needs of you and your family can be met at the home to ensure that you are comfortable until end-of-life. Bethammi

Nursing Home and Hogarth Riverview Manor utilize services from the North West Regional Palliative Care Program (RPCP) and Hospice Northwest Volunteers to further enhance end-of-life care.

RESPONSIVE BEHAVIORS

Residents who have cognitive impairment due to mental health and addictions, dementia, or other neurological conditions may exhibit responsive behaviors. Both Hogarth Riverview Manor and Bethammi Nursing Home aim to accommodate the needs of each and every resident by employing experienced staff in the Specialized Geriatric Services Behavioural Supports Ontario Mobile Outreach Team, as well as a Psychogeriatric Resource Consultant. These staff members work collaboratively and one-on-one with other staff, families, and residents themselves to develop strategies which aide with responsive behaviors.

DONATIONS

We do not accept donations of any kind. This includes clothing, blankets, furniture, electronics, art work, televisions, wheel chairs and other mobility aids. Upon a residents passing or discharge from the home, all of the residents belongs must be removed from the room.

Becoming Familiar with Your New Home

BUSES

Bethammi Nursing Home - Bus stops are located on Carrie Street and Red River Road.
Hogarth Riverview Manor - A bus stop is located on Lillie Street.
Information on routes and timetables are available at the information desk in the Main Lobby.

RESIDENTS' COUNCIL

The Residents' Council provides opportunities for residents to express themselves and suggest positive changes that will benefit the quality of life for all residents. For more information about this council, contact the Life Enrichment Manager of Hogarth Riverview Manor at 807-625-1127 and Bethammi Nursing Home at 807-768-4427.

FAMILY COUNCIL

The Family council is committed to providing mutual support, empowerment and advocacy for family and friends of residents. The Council improves and promotes the quality of life for all residents and gives families and friends a voice in decisions that affect their loved ones in the home. We invite family and friends to be a part of our Family Council. Please contact the Family Engagement Coordinator of Hogarth Riverview Manor at 807-768-4423 and the Resident Counsellor of Bethammi Nursing Home at 807-768-4427 for information about meeting times.

HAIRDRESSING

Hairdressing and barber services are provided at both homes by a contracted service. Days of operation and a price list are available at the salons. Appointments are recommended to avoid disappointment. Residents are responsible for fees associated with this service.

Bethammi Nursing Home - Better Hair Daze 807-767-2004
Hogarth Riverview Manor - Shirley Maki 807-939-2849

LINK ON LILLIE STREET

The Link is a physical connection between Hogarth Riverview Manor and Sister Leila Greco Apartments. The Link is home to Janzen's Pharmacy, a Robin's Donuts Café, a hair salon and Auxiliary Gift Shop.

MAIL

Incoming mail is delivered to your resident home area. Please inform friends and family to address mail as follows:

Resident's Name, Room #
Bethammi Nursing Home
63 Carrie Street
Thunder Bay, ON P7A 4J2

Resident's Name and Room #
Hogarth Riverview Manor
300 Lillie Street North
Thunder Bay, ON P7C 4Y7

MEALS AND SNACKS

Nutritious meals are prepared on site by Red Seal Cooks. A Registered Dietitian is available to assist with special requirements and we are able to provide therapeutic diets as required. Trained dietary and nursing staff assist in the dining rooms.

We offer a pleasurable dining experience throughout all meals. Our goal is to provide a consistent service while allowing our Resident's sufficient time to eat their meals. Special meals are served on Holiday occasions chosen by our Resident Council.

Menus are posted in all dining room areas. Residents have two choices at each meal (breakfast, lunch and dinner.) Snacks are available mid-afternoon and evening. Light refreshments such as tea, coffee, juice, milk, cookies, bread and fresh fruit are available 24-hours a day in each home area.

Monthly food committee meetings are held with residents, families and Nutrition and Food Services staff to discuss meal concerns and provide menu input. There is an onsite Nutrition and Food Services Supervisor to answer any questions you may have.

Eating Safely - Guide for Care Givers

Family and friends of residents are welcome to assist with feeding during mealtimes, however, we need to ensure that it is done safely. Below are a few safety guidelines to follow while feeding a resident.

If at any time while eating a resident begins choke, cough or looks in distress please stop feeding and inform nursing or dietary staff immediately. DO NOT attempt to give fluids or pat resident on the back while coughing or choking. If you have any questions or concerns, please ask a member of our care team.

Ask a staff member to position the resident at the table in the safest position. The feeding companion must adhere to the following guidelines:

- A resident's meal tray has been specially prepared for them according to their care plan. Food and beverages may be altered to meet their needs. Please check with a member of the care team before feeding residents food you have brought into the home
- The feeding companion should be at eye level to the resident (to prevent resident from tilting their chin up or down to prevent coughing and choking
- Residents should be alert and awake when eating
- Discourage talking and limit distractions while eating
- Let resident know when food or drink is coming to the mouth and communicate if it is hot or cold
- Food should be given in small amounts and fluids should be in small sips
- Give time to chew and swallow, their mouth should be empty before giving more food or fluids. Sometimes residents need gentle reminders while eating to chew and swallow
- We recommend alternating food and fluids while feeding

Residents should always eat seated at a table before eating. Residents should only be fed in bed if they are:

- Completely bedridden
- Receiving end-of-life care
- Unwell and required to remain in their room to prevent the spread of infection

MEMORY BOXES (HOGARTH RIVERVIEW MANOR)

At the entrance to each room, there is a memory box with your name where you can display important pictures and collectibles.

ALL ABOUT ME

Upon admission, family and residents have the option to complete an All About Me form which is kept in the resident's chart. This provides staff a snapshot of the resident's life and a way to better get to know them.

PARKING

Parking is available at both homes. Accessible parking is located closest to the building for those who have Accessible Parking Permits.

PERSONAL APPOINTMENTS

Please let nursing staff know of any personal appointments that you may have. When the physician orders tests or procedures outside the home, nursing staff will help to arrange for assistance to and from the appointment. Transportation and cost for medical escort is an additional charge.

PETS

Family pets are welcome to visit but require prior approval before entering our homes. Family and friends are asked to contact the Therapeutic Recreation staff to obtain "Guidelines to Follow When Bringing Your Pet to Visit" pamphlet. Once approved pets will be issued an identification card which must be visible during the visit.

PHOTOS AND PICTURES

If you would like to have personal photos or artwork hung on the walls of your room, please talk with a staff member to put in a work requisition to Building Services.

RECREATION AND LEISURE

We are committed to providing our residents with personalized and meaningful recreation and leisure activities. There are a variety of recreational, social, physical and therapeutic programs offered during the day, evening and weekends. Residents are encouraged and supported by Therapeutic Recreationists to participate in programs that are of interest to them. Some examples of activities include:

- Horticultural Therapy
- Music Therapy
- Pet Therapy (St. John Ambulance)
- Entertainment
- Community Outings
- Crafts
- Special Events
- Socials
- Teas
- Exercise Groups
- Games
- Bingo

SPECIAL EVENTS - ROOM BOOKINGS AND CATERING

Bethammi Nursing Home - Arrangements can be made with Nutrition and Food Services to hold special events and celebrations at St. Joseph's Heritage. To book a room and order catering, please call the Catering Manager at 807-768-4408. Visit www.sjcg.net/services/catering for more information.

SPIRITUAL CARE

A variety of faith services are provided in the chapels. Additional spiritual, emotional and religious needs can be addressed by our Spiritual Care Associate. If you would like a visit from other clergy or faith leaders, this can be arranged through the Spiritual Care Associate.

Planning Ahead - What is Right for You?

SUBSTITUTE DECISION-MAKERS

A substitute decision-maker is a person who is authorized give or refuse consent on your behalf if you become incapable of making decisions for yourself.

A Power of Attorney is a legal document which gives someone authority to act on your behalf as substitute decision-maker. If you have not appointed a Power of Attorney (POA) for Personal or Financial matters, we encourage you do so.

ADVANCE CARE PLAN (LIVING WILL)

Residents are encouraged to communicate with family or substitute decision-makers about how they wish to be cared for in the future. This allows you to make decisions about your healthcare, nutrition, shelter, clothing, hygiene and/or safety in advance and provides instructions for your substitute decision-maker to carry out. Your substitute decision-maker may have questions about your wishes, so, make the time to discuss your decisions with them. www.advancecareplanning.ca

ADVANCE DIRECTIVES

An Advance Care Directive is a legal document which provides instructions to your care team to manage your care according to your wishes, in the event of a medical emergency. These are reviewed annually or more frequently as necessary.

RESIDENT DISCHARGE AFTER PASSING

When a resident is discharged from the home, their billing will end on the date of their discharge. The home will then work collaboratively with the Power of Attorney or designate to make arrangements for all personal belongings to be removed, typically within 48 hours.

In the event that a Power of Attorney is from out of town, and unable to arrange for items to be removed within the required timeframe, the home will then make arrangements for the residents personal belongings to be packaged with care and made ready for pickup.

The home is unable to store any resident's personal belongings for greater than 48 hours, and will work with the Power of Attorney or designate to determine a suitable removal service to be contacted at the Power of Attorney or designates expense.

The Care Team

Every effort is made to ensure that all physical, mental psychosocial, and spiritual needs are identified and addressed. This is accomplished through a variety of programs and services provided by an interprofessional care team.

Director of Seniors' Health

Administrator – The Administrator reports to the Vice President of Clinical and Community Health and works in partnership with the Associate Administrator. The Administrator is responsible for providing overall leadership and oversight to the home while ensuring standards of care, building operations, budgetary goals, and staff performance are maintained in accordance with established regulatory policies, and procedures.

Associate Administrator – The Associate Administrator reports to the Administrator and works in collaboration to manage overall leadership and oversite of the home. Additionally the Associate Administrator also directly manages our Clinical Managers.

Director of Care (DOC)

The Director of Care reports to the Administrator, and works in collaboration with Associate Administrator. The Director of Care is responsible for providing leadership and oversight to the clinical teams for care delivery, clinical education, Infection Prevention and Control, Clinical practices, and review and implementation of clinical policies and procedures.

Clinical Manager (CM)

Clinical Managers are assigned to specific care units and report to the Associate Administrator. Working in collaboration with the Director of Care, they are accountable for the management of clinical practice and for the day-to-day clinical operation of the home. Clinical Managers oversee all aspects of clinical practice, resident care and staffing needs.

Clinical Resource Coordinator (CRC)

Clinical Resource Coordinator's report to the Director of Care and are typically scheduled to be onsite in a supervisory capacity during non-business hours. Their purpose is to ensure the homes goals and objectives are met during regular leadership absence, by supporting clinical operations, and assisting Registered Staff with managing both clinical and non-clinical tasks to meet our resident needs. CRC's will follow up with home challenges in the moment and prepare follow up details for members of our Clinical Management team, the Administrator's or our Director of Care for follow up on the next business day.

Resident and Family Experience Coordinator

The Resident and Family Experience Coordinator reports to the Director of Care and is scheduled during business hours. Their role acts as a liaison for residents and family members by providing system and resources navigation. They are responsible for receiving, investigating, delegating, and responding to resident and family inquiries, concerns and complaints regarding any aspect of care or services. This role will also reach out to new resident family members post admission to offer any additional supports that may be required.

Nursing Team

Professional nursing staff are available on a 24-hour basis. The nursing team consists of Nurse Practitioners (NP), Registered Nurses (RN), Registered Practical Nurses (RPN) and Personal Support Workers (PSW). The team will work with you to develop an individualized plan of care.

Nurse Practitioners (NP) focus on health promotion as well as the treatment and management of common acute and chronic conditions

Registered Nurses (RN) have the day-to-day responsibility for care and supervision of staff. The RN assesses, implements, and evaluates all nursing care.

Registered Practical Nurses (RPN) ensure the continuity of care as directed by the Registered Nurse.

Personal Support Workers (PSW) under the direction and supervision of the RN and RPN provide personal care and assistance as outlined in the individualized plan of care.

Resident Home Workers (RHW) are temporary positions under the direction and supervision of the RN and RPN that assist nursing staff with tasks that do not require hands on resident care.

Medical Director and Attending Physicians

The Medical Director is a physician who oversees all aspects of the medical services of the home while Attending Physicians are assigned to specific are units, and medically assess and provide support each resident by assisting in their care plan development.

Clerical Support Staff

Clerical staff provide administrative support with pre-admission planning as well as other office duties.

Nutrition and Food Services Staff (Cook, FSW)

Consist of a Food Services Manager, Supervisors, Cooks, and Food Service Workers, who are responsible for all Resident food preparation, texture modifications, and meal delivery that complies with Long-Term Care legislation.

Registered Dietitian (RD)

A Registered Dietitian provides recommendations and nutritional support to meet individual dietary needs taking into consideration personal, cultural and religious preferences. The dietitian also reviews the menus to ensure all nutritional requirements are met. Consultation with the registered dietitian is available on request as needed.

Pharmacist

A community-based pharmacy (Janzen's Pharmacy) provides prescription medications and pharmacy services. Medications are prescribed by the physician and administered by registered nursing staff. All medications are regularly reviewed by the physician and pharmacist (every three months at minimum.)

Financial Services Staff

The Financial Service Offices at each home attend to resident trust accounts, cashier services, (withdrawals, deposits, and payments), admission contracts, and monthly billings.

Building Services Staff

A team of skilled staff tend to the day-to-day repairs in the home as well as maintenance of the grounds. Building services staff are also available to check and approve any electrical equipment brought into the home to ensure safety.

Housekeeping and Laundry Staff

Housekeeping services are provided daily throughout the home and encompass all resident home areas as well as public and community spaces. All general linen (towels, sheets, etc.) and personal clothing is laundered on site. Clothing labels are provided and applied to clothing.

Physiotherapist

Physiotherapy services are provided by Arvan Rehab Group and are guided by the Ministry of Long-Term Care Physiotherapy policy. The Physiotherapist provides an assessment for:

- Every new resident
- For residents that are in the physiotherapy program, every three months and/or
- When the needs of a resident change

Family Engagement Coordinator

The Family Engagement Coordinator assists with the admission transition process into the long-term care home. Acting as a liaison for residents and family members by providing system and resource navigation.

Resident Counsellors

Resident Counsellors are Registered Social Service Workers who provide support and counseling for residents, family members and caregivers of the home.

Spiritual Care Associate

Spiritual Care Associates address your spiritual, emotional and religious needs and aspirations.

Students

St. Joseph's Care Group fosters an environment of learning. Many post-secondary students choose to do their healthcare placements in our homes where they can build on their knowledge and experience while assisting with the care of our residents.

Therapeutic Recreationists

Therapeutic recreationists are committed to providing our residents with personalized and meaningful recreation and leisure activities.

Other Health Care Professionals

There are several other Health Care Professionals whom can be arranged through our internal referral processes when their professional services are required. E.g. Speech therapy, chiropody, mental health and/or geriatric assessment.

Volunteers

Volunteer Services has a dynamic team of volunteers that consists of dedicated individuals who are committed to enhancing the quality of life of residents.

Volunteer initiatives enhance the lives of residents by assisting with many programs in our long-term care homes. Volunteers provide assistance with the following programs: Friendly Visitor, Meal Time Companion, Life Enrichment activities and special events, Spiritual Care services and visits, Horticultural Therapy Program and Garden, Hospice Northwest, St. John Ambulance Therapy Dog program and much more.

Volunteers must provide a Police Record Check and receive training. Volunteers can be identified by their photo ID badge.

If you, or someone you know is interested in joining our Volunteer Team please contact Volunteer Services at 807-625-1117 or visit our website at www.sjcg.net/careers/volunteers for more information.

Health and Safety of Residents

PREVENTING THE SPREAD OF INFECTION

We all have a role in keeping our care environments healthy and welcoming. Family and visitors who are or have had contact with others experiencing one or more of the following, should refrain from visiting to avoid spreading infections:

- Influenza and/or cold symptoms
- Temperature of 100°F / 37.8°C or more
- New or worsening cough
- Difficulty breathing/swallowing
- Sore throat
- Runny nose or nasal congestion
- Chills, muscle aches, and/or fatigue
- Headache
- New gastrointestinal symptoms (e.g. nausea and/or vomiting, diarrhea, and/or abdominal pain)
- New smell or taste disorder(s)
- Pink eye

Hand Hygiene

Everyone carries germs on their hands and everyone should clean their hands in a healthcare setting. The best way to get rid of these germs is to prevent them from spreading by cleaning your hands. Alcohol-based hand rub is the best way of cleaning your hands unless they look dirty. Clean your hands with soap and water or an alcohol based hand rub for at least 15 seconds.

When should you clean your hands?

- Before going in to resident's rooms
- Before and after eating or drinking
- Before and after group activities
- After leaving patients rooms
- After leaving common areas
- After coughing, sneezing, or blowing your nose
- After using the washroom
- Whenever your hands look or feel dirty

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Ask me if I have washed my hands

Residents and visitors are encouraged remind staff to clean their hands. If you notice that a staff member has forgotten to clean their hands, give them a gentle reminder such as, “have you cleaned your hands?”

Sometimes residents forget to clean their hands too. This is why our staff will remind residents to clean their hands at key times during the day.

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ACCESSIBILITY

St. Joseph's Care Group strives to provide services to all individuals, including individuals with disabilities in a way that respects core principles of independence, dignity, integration and equality of opportunity. We are committed to improving accessibility to people with disabilities by meeting the requirements of the accessibility standards under the Accessibility for Ontarians with Disabilities Act, 2005.

ALCOHOL CONSUMPTION

Our long-term care homes do not have liquor licenses to sell liquor. Consumption of liquor by residents may be allowed if prescribed by your physician. It is the responsibility of residents or substitute decision-makers to purchase. Nursing staff will secure alcohol for residents.

CALL BELL

In case of emergency, each resident has a call bell accessible to them at their bedside. Emergency call bells are also located in each bathroom, and the central bathing rooms.

EMERGENCY CODE INFORMATION

St. Joseph's Care Group utilizes a code system to communicate emergencies that may arise. When a code is called on the overhead page, please remain calm. Staff will provide instructions. Staff will enlist the assistance of volunteers and visitors if required. Regular testing and evaluation of our emergency response takes place to ensure the safety of our clients. Please review Appendix G and H for specific information.

FIRE SAFETY

Both homes have fire prevention and detection programs in place. Fire extinguishers, fire hoses, smoke and heat detectors are located at various places at each site. All staff are trained to use fire suppression equipment.

Fire and evacuation drills are held regularly. If you hear a fire alarm, don't panic. You will be informed should any action become necessary. Elevators are not to be used when the fire alarm is activated. If you would like more information, please request to view our emergency manual.

IDENTIFICATION (STAFF, VOLUNTEERS AND STUDENTS)

St Joseph's Care Group staff, students and volunteers are easily identified by their photo identification badge.

MUTUAL RESPECT AND TOLERANCE

St. Joseph's Care Group believes that its residents and staff are entitled to an environment free of harassment and aggression. Physical or verbal abuse of staff, clients, family members or visitors will not be tolerated. We encourage mutual respect and tolerance at all times.

At Bethammi Nursing Home and Hogarth Riverview Manor an emphasis is placed on respecting resident's space. It is important to remember that although some areas of a long-term care home are shared, it is still a home to the residents and therefore should be treated and respected as such.

OCCUPATIONAL HEALTH AND SAFETY INSPECTIONS

Occupational Health and Safety Inspections of the homes and grounds are completed monthly to determine any potential risk or safety hazard. If you notice any safety concerns, please report them promptly to any staff member.

SCENT-FREE ENVIRONMENT

Scented products contain chemicals that may cause serious health problems for many people, especially those with asthma, allergies and environmental illness. In consideration of others we request that you do not wear scented products such as perfumes, colognes, after-shaves, body lotions or other scented toiletries.

SECURITY AND BUILDING SAFETY

All home areas are monitored by a security system and there is security present 24-hours per-day. Some entrance doors open with a keypad control. The main entrances are locked at night with access to the home obtained by pressing the intercom button and waiting for assistance.

SMOKE-FREE ENVIRONMENT

Consistent with the Tobacco Control Act, smoking is permitted only in designated areas. Designated smoking areas are located outside the building and are clearly marked for all residents and visitors. We appreciate your cooperation and understanding.

RESIDENT IDENTIFICATION

On move in day, your picture will be taken for identification purposes. Health care providers must use at least two identifiers before providing any service/treatment. For safety and security, you will be provided with an identification bracelet.

WANDERING PERSONS ALARM

A wandering persons alarm system is located on each resident care area to closely monitor those residents who are identified as being at risk to wander.

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Ensuring Quality Care

ZERO TOLERANCE OF ABUSE AND NEGLECT OF RESIDENTS

Bethammi Nursing Home and Hogarth Riverview Manor are committed to zero tolerance of abuse or neglect.

You have a right to be treated with courtesy and respect and in a way that fully recognizes your dignity and individuality and to be free from mental and physical abuse.

The Zero Tolerance of Abuse and Neglect of Residents policy is posted and available in readable form in a highly visible public area of the home.

The nature of employment in the Long-Term Care Home environment demands an ongoing capacity for compassion and patience for residents that far exceeds the norm. There is a high standard of conduct expected of those employed in the healthcare sector. The relationship between employees and residents and the potential for abuse and neglect by those in a position of trust, power, and responsibility for resident care must be acknowledged. Physical, sexual, or psychological harm from residents cannot be used as defense for abuse of residents. All employees must protect the rights of each and every resident entrusted to their care.

DUTY TO REPORT HARM OR RISK OF HARM TO A RESIDENT

The following areas of harm or risk of harm must be reported: neglect, abuse, incompetent treatment, unlawful conduct, misuse, misappropriation of funding or Resident's funds. Residents have the right to report, but are not obligated to report. Regulated Health Professionals however are required by law to report. It is expected that all staff, family and volunteers report as well.

For more information on the duty to make mandatory reports, please refer to St. Joseph's Care Group Policies available at Hogarth Riverview Manor in the main floor town hall compliance binder.

MAKING A COMPLAINT OR PROVIDING FEEDBACK

If you have a complaint about Resident care or the operation of our home, please let us know.

Concerns and complaints can be shared directly in person with our Clinical Managers, or Department Managers during business hours, or through our Registered Nurse's (RN) on duty who will ensure your concern is shared with the appropriate Manager 24 hours a day by calling:

Hogarth Riverview Manor

1N, Birch, Spruce …… 807- 633-6303
Floors 2 & 3 …… 807-633-3623
Floors 4 & 5 …… 807-633-5344
Floors 6 & 7 …… 807-633-7814

If you feel that your concern has not appropriately been addressed through our Clinical and Department Managers you can also notify the Director of Care, Administrator, or Associate Administrator in person or by calling:

Director of Care: 807-625-1128
Administrator: 807- 625-1114
Associate Administrator: 807-624-1798

Written complaints can be submitted to the home "To the attention of the Clinical Manager, Department Manager, Director of Care, or Administrator" and dropped off to the Administration wing or our Finance Office.

Bethammi Nursing Home

2nd Floor Team Station: 807-768-4419
3rd Floor Team Station: 807-768-4426
Assistant Clinical Manager: 807-768-4446

Additional Contacts

If you feel that your concern has still not been addressed by the home, you can alternatively reach out to the following supports:

Ministry of Long-Term Care Family Support and Action Line: toll-free 1-866-434-0144 between: 8:30am - 7:00pm, 7 days a week, or the Patient Ombudsman Action Line: toll-free 1-888-321-0339 between 9:00am to 4:00pm, Monday to Friday

Following the Fixing Long-Term Care Act, 2021 (FLTCA), Whistle-blowing protections are in place to give anyone (residents, family members, staff or visitors) the confidence to bring forward any concerns about a Long-Term Care Home without fear of retaliation.

LEAST RESTRAINTS PROGRAM

Using restraints is the last approach used to prevent injury. We have policies and best practices in place that promote minimal restraint use. If a physical restraint is deemed necessary, there is ongoing assessment and monitoring for safety. A copy of the policy is included at the back of this handbook.

Hogarth Riverview Manor and Bethammi Nursing Home have recognized bed rails on resident's beds as a restraint and have begun the removal of bed rails throughout the buildings.

Potential risks associated with bed rail use include:

- Increased risk of falls with serious injuries if residents attempts to climb over the rails
- Death of bodily injury from strangulation or entrapment when residents or part of their body are caught between the bed rails and mattress
- Increased levels of confusion, agitation from potential restraining effect of bed rails
- Emotional distress and lingering stress with long-term negative health consequences

- Preventing residents, who can get out of bed, from performing routine activities such as going to the bathroom

ACCREDITATION

St. Joseph's Care Group is fully accredited by Accreditation Canada. Accreditation Canada is an independent, not-for-profit organization that sets the standards for quality and safety in healthcare.

MEASURING OUR SUCCESS

We encourage you or your Substitute Decision-Maker to complete the confidential Resident Satisfaction Surveys and Product Evaluations to help us determine what we are doing well and where we need to make improvements. Surveys are conducted annually each fall. The manager reviews all surveys and shares results with the team for appropriate follow-up.

St. Joseph's Care Group is fully accredited by Accreditation Canada. Accreditation Canada is an independent, not-for-profit organization that sets the standards for quality and safety in healthcare.

Fundraising

ST. JOSEPH'S FOUNDATION OF THUNDER BAY

St. Joseph's Foundation of Thunder Bay was established to support the works of the Sisters of St. Joseph of Sault Ste. Marie, which includes St. Joseph's Care Group. The Foundation is a separate organization working in cooperation with St. Joseph's Care Group. Our objective is to raise funds that support purchases of essential equipment, capital refurbishment and items for client needs.

Monies raised by St. Joseph's Foundation are used strictly for equipment and capital purchases not funded by the Ministry of Health and Long-Term Care or other funding agencies – not for the funding of staff positions at St. Joseph's Care Group.

Apart from the necessary and essential equipment such as beds, bathtubs, and mobility-assisting equipment, clients of St. Joseph's Care Group benefit from additional items that create a home-like environment. Each year, the Foundation allocates donations for client well-being and safety. Whether it is books and videos for a client lounge, or gardening tools and supplies, these items ensure that all clients experience a sense of home and comfort in their surroundings.

The generous support of donors in our community ensures that individuals and their loved ones receive services delivered with Care, Compassion and Commitment.

www.sjftb.net

Acronyms

BNH	Bethammi Nursing Home
CCAC	Community Care Access Centre
HRM	Hogarth Riverview Manor
IAR	Independent Assessment Record
LHIN	Local Health Integration Network
LTC	Long-Term Care
MOLTC	Ministry of Long-Term Care
OANHSS	Ontario Association Non-profit Homes and Services for Seniors'
ODSP	Ontario Disability Support Program
OHIP	Ontario Health Insurance Plan
POA	Power of Attorney
RAI	Resident Assessment Instrument
RHA	Resident Home Area
SDM	Substitute Decision-Maker
SJCG	St. Joseph's Care Group

NOTES:

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Thank you for choosing Bethammi Nursing Home and Hogarth Riverview Manor as your new home. We are committed to providing you exceptional resident-centred care.

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Long-Term Care Policy

RESIDENTS' PERSONAL FURNISHINGS

Updated: 2023/24

For the safety of all residents, staff and visitors, a policy was developed to outline what types of additional furnishings and or equipment are permitted in the resident rooms.

Depending on the size of the room, the following are permitted:

- Television (maximum size- 32 inches- no wall mounts)
- Table or floor lamp (with fluorescent or LED bulbs only)
- Small chair, stand or desk (maximum size- 30 inches by 30 inches)
- Small dresser (maximum size- 18 inches by 30 inches)
- Small electric fan

The addition of furniture other than what is listed will not be considered.

Electrical equipment (other than for medical purposes which are regulated and approved) pose a great risk for safety, therefore, the following are not permitted:

- Small refrigerators and freezers, fire places
- Space heaters, air conditioners, electric coolers, electric water coolers, electric blankets
- Kettles, coffee makers, toasters, electric grills, microwaves and other small appliances

Staff will make residents/family aware of this policy and when clarification is required, will direct the resident/family to building service staff or the manager. Any and all electrical equipment brought from home or newly purchased, such as televisions and lamps must be checked to ensure all equipment meets safety standards.

St. Joseph's Hospital
Corporate Office
35 Algoma St. N.
Thunder Bay, ON P7B 5G7
807- 343-2431
sjcg.net

Code Red Information

The term “Code Red” communicates to staff, residents and visitors that a fire emergency is present somewhere in the building or a fire drill is being exercised.

Hogarth Riverview Manor and Bethammi Nursing Home have fire prevention and detection programs in place. Fire extinguishers, fire hoses, smoke and automatic thermal detectors are located at various places throughout the building. All staff have received fire emergency training.

Fire and evacuation drills are held monthly. If you hear a fire alarm, don’t panic, you will be informed by a staff member wearing a safety vest should any action become necessary.

Elevators cannot be used during a fire alarm. Elevators automatically return to the main floor and the doors will remain open until the alarm is reset.

Employees encountering smoke or a fire at Hogarth Riverview Manor and Bethammi Nursing Home will initiate the **REACT** protocol:

- **R**emove persons in immediate danger, if possible.
- **E**nsure the door(s) is closed to confine the fire and smoke.
- **A**ctivate the fire alarm system using the nearest pull station.
- **C**all the fire department-this task is completed by the registered staff assigned to respond to the main floor fire panel.
- **T**ry to extinguish the fire or continue to evacuate.

Magnetically locked doors will automatically unlock if the fire alarm escalates to the evacuation stage. Staff will be posted in these locations for the safety of residents.

Emergency plans have been approved by Thunder Bay Fire Rescue, the Ministry of Long-Term Care and St. Joseph’s Care Group Emergency Planning Committee, to ensure that if an evacuation is ever required, it can be carried out safely.

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Code Green Information

The term “Code Green” communicates to staff, residents and visitors that an evacuation is required. When a code green is announced, there is usually some lead time to carry-out the evacuation. A “Code Green Stat” communicates that an immediate evacuation is required.

When a code green is called, instructions will be announced using the over-head paging system.

Stages of Evacuation:

An evacuation normally occurs in successive steps.

- Partial - an evacuation from the immediate place of emergency to an adjacent area.
- Horizontal - evacuation beyond corridor fire doors to the opposite home area.
- Vertical - evacuation to safe zone on a lower level away from the emergency.
- Complete - evacuation of the entire building.

Priority of Resident Evacuation:

- Residents in the room of emergency
- Residents in rooms on each side of and opposite the room of origin
- Residents who are ambulatory - 4 or 5 residents will be accompanied by a staff member
- Residents requiring assistance - will be transported by blanket carry if no wheelchair/stretcher available
- Residents who are non-ambulatory or non-compliant.

When an evacuation occurs, all residents will be assessed in the holding area to determine if they require medical services due to injury or illness. Residents who require acute medical treatment will be transferred to Thunder Bay Regional Health Sciences Centre. The remaining residents will be relocated to an alternate location within St. Joseph’s Care Group

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Long-Term Care Policy - Least Restraint Use

Updated: 2023/24

The Least Restraint Program at Bethammi Nursing Home and Hogarth Riverview Manor is coordinated by an interprofessional team to provide the residents with optimal comfort, dignity and quality of life along the continuum of care from “move-in day” up to and including the end of life.

The least restraint program policy upholds the belief that reasonable care is provided to each resident to promote quality of life in a safe manner while respecting an individual’s right to risk.

PURPOSE

The purpose of this policy is to outline:

- Definition and types of restraints
- When Personal Assistance Services Devices (PASDs) are restraints
- Staff roles and responsibilities related to least restraint
- Prohibitive restraint devices
- Reassessment and evaluation related to least restraint

DEFINITION AND TYPES OF RESTRAINTS

“Physical restraint” A physical restraint is any device used by the home that restricts freedom of movement or normal access to one's body. It is any device, from which a resident is unable to both physically and cognitively release by themselves.

“Chemical restraint” A chemical restraint is any pharmaceutical given with the specific and sole purpose of inhibiting specific behavior or movement. When a drug is used to treat clear-cut, psychiatric or medical symptoms, it is not usually a restraint.

“Environmental restraint” An environmental restraint is any device or barrier that limits the movement of an individual, and thereby confines an individual to a specific geographical area or location. The use of barriers, locks or other devices at stairways is not a restraint. A secure unit is not an environmental restraint: rather an enabler to a safe environment and requires consent and physician order.

“Emergency restraint” refers to the common law duty “to restrain or confine a person when immediate action is necessary to prevent serious bodily harm to the person or to others” (HCCA, s.7 and PRMA s.6 (2)).

PERSONAL ASSISTANCE SERVICES DEVICES (PASDS)

“Personal Assistance Services Devices (PASDs)” A PASD is a device used to assist a client with a routine activity of daily living. PASDs may include tilted chairs, gloves/mitts, high-low beds, table trays, arm rests, bed rails, positioning rolls, alarm devices, and security bracelets.

PASDs require consent and their use clearly described in the plan of care. Deciding whether a PASD is a restraint or not is based on the following:

When the device is used to restrict movement rather than to assist the resident with a routine activity of daily living, the PASD is considered to be a restraint (LTCHA s 36(6) & s. 31). If the resident is able to release the device him/herself – that is, the resident understands how to release the device and is physically able to do so, the device is not considered to be a restraint. However, if the resident must struggle or take an extended period of time to remove the device, the device is considered to be a restraint. Four bed rails up is considered a restraint.

STAFF ROLES AND RESPONSIBILITIES

All nursing and support staff:

1. Participate in the annual review of the Least Restraint Program for Long-Term Care training module
2. Collaborate during unit huddles to recommend alternatives to restraint use
3. Routinely monitor residents for safety

The Registered staff:

1. Considers and exhausts all alternative methods to restraint use (refer to Alternatives to Restraints, LTC checklist)
2. Obtains a physician's, or Nurse Practitioner's order for the type and reason for restraint as well as the duration of the restraint
3. Ensures that the resident/SDM has provided informed consent and is aware of their right to discontinue at any time.
4. Supervises the application if the restraint according to the order and manufacturer's instructions
5. Reassess the residents' condition and the effectiveness of the restraint at least every 8 hours. This assessment is documented in the residents' medication administration record.
6. Directs the PSW to monitor the resident hourly and to release and reposition the resident every 2 hours or as often is necessary based on the resident's condition and circumstances.
7. Reviews and revises the plan of care related to restraints or PASDs quarterly or more often as necessary
8. Includes in plan of care:
    - Purpose of the device
    - When it will be used
    - How it will be used
    - How long it will be used
    - Duration and frequency of use

The PSW:

Never applies a restraint without the assessment and approval of the registered staff

1. Follows the care plan and provides input for possible alternatives to restraints
2. Checks the resident hourly and documents on the “Restraint Monitoring Form”
3. Repositions the resident at least every 2 hours as directed by registered staff
4. If more than one type of resident is used a separate record must be completed for each resident

PERMITTED RESTRAINTS FOR USE

Devices that are permitted to be used as restraints are as follows:

a) Seat belt on a wheelchair
b) Velcro seat belt with alarm
c) Chair preventing rising
d) Table top with seat belt.

PROHIBITED RESTRAINT DEVICES

Devices that are prohibited to be used as restraints are as follows:

a) roller bars on wheelchairs, commodes or toilets
b) vest or jacket restraints
c) device with locks that can only be released by a separate device
d) four point extremity restraints
e) any device used to restrain to a commode or toilet
f) device that cannot be immediately released by staff
g) sheets, wraps, tensors or other types of strips or bandages used other than for therapeutic purpose.

Any use of a prohibited physical restraint, restraining for staff convenience or as a method of discipline, or non-compliance with manufacturer’s specifications is considered a form of resident abuse.

COMMON LAW DUTY

When immediate action is necessary to prevent serious bodily harm to the resident or others, registered staff are to ensure:

a) The resident is monitored or supervised on an ongoing basis and released from the physical device and repositioned when necessary based on the resident's condition or circumstances.
b) The resident’s condition is reassessed at least every fifteen minutes and at any other time when reassessment is necessary based on the resident’s condition or circumstances.
c) When immediate action is no longer necessary to prevent serious bodily harm to the resident or others, the use of restraint is discontinued.

REASSESSMENT AND EVALUATION

Regular reassessment and evaluation is conducted to ensure that the least restrictive restraint is used for the least amount of time.

Residents who are restrained are monitored daily and the Home's indicators related to restraint.

Utilization are reviewed with the care teams on a monthly basis. Restraint utilization is also compared to provincial averages. Recommendations to discontinue a restraint are brought forward to the resident/substitute decision maker and attending physician.

The effectiveness of the Home's least restraint program is evaluated annually by the interprofessional team. At this time the **Least Restraint Toolkit** may be revised to ensure practices and staff education is based on current evidence and legislative requirements. The annual evaluation is documented and records maintained.

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Making a Complaint or Providing Feedback & Whistle-Blowing Protection

If you have a complaint about Resident care or the operation of our homes, please let us know. Concerns and complaints can be shared directly in-person with our Clinical Managers, or Department Managers during business hours, or through our Registered Nurse's (RN) on duty who will ensure your concern is shared with the appropriate Manager 24 hours a day by calling:

HOGARTH RIVERVIEW MANOR

1N, Birch, Spruce …… 807-633-6303
Floors 2 & 3 …… 807-633-3623
Floors 4 & 5 …… 807-633-5344
Floors 6 & 7 …… 807-633-7814

If you feel that your concern has not appropriately been addressed through our Clinical and Department Managers you can also notify the Director of Care, Administrator, or Associate Administrator in person or by calling:

Director of Care …… 807-625-1128
Administrator …… 807-625-1114
Associate Administrator …… 807-624-1798

Written complaints can be submitted to the home "To the attention of the Clinical Manager, Department Manager, Director of Care, or Administrator" and dropped off to the Administration wing or our Finance Office.

BETHAMMI NURSING HOME

2nd Floor Team Station: 807- 768-4419
3rd Floor Team Station: 807- 768-4426
Assistant Clinical Manager: 807-768-4446

ADDITIONAL CONTACTS

If you feel that your concern has still not been addressed by the home, you can alternatively reach out to the following supports:

Ministry of Long-Term Care Family Support and Action Line:
Toll-free 1-866-434-0144 between: 8:30am - 7:00pm, 7 days a week

Patient Ombudsman Action Line:
Toll-free 1-888-321-0339 between 9:00am to 4:00pm, Monday to Friday.

Following the Fixing Long-Term Care Act, 2021 (FLTCA), Whistle-blowing protections are in place to give anyone (resident, family members, staff or visitors) the confidence to bring forward any concerns about a Long-Term Care Home without fear of retaliation.