

# CASSELLHOLME

*Compassionate care for life's journey.*

## Living at Cassellholme





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## Resident Handbook - Updated July 2017

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## WELCOME TO CASSELLHOLME



### **A warm welcome awaits you at Cassellholme.**

Our primary goal is to provide quality care to residents in a friendly, safe environment.

Cassellholme is a Long-Term Care home that has been in operation since 1925.

The present Cassellholme, designed for 240 residents, was officially opened in 1962. Since then, several major renovations have been completed, in addition to the development and expansion of innovative programs.

Our comfortable facility features paved walkways through landscaped gardens and grounds. Our residents and guests enjoy a breath of fresh air with a stroll or a rest on one of the many outdoor patios.

Cassellholme provides the finest services for residents with dedicated staff, volunteers, innovative programs and the latest in equipment.

Cassellholme promotes individualized care and includes residents and families in the decision making process.



## WELCOME TO CASSELLHOLME

### **MISSION**

Cassellholme provides a broad range of services focused on the well-being of people in East Nipissing who need Long-Term Care, Community Support Services (district wide), and Seniors Housing.

### **VISION**

Cassellholme strives to improve the quality of life of the people it serves in a safe and healthy environment.

It will be recognized as a Centre of Excellence through its expertise and research in all aspects of its services.

Cassellholme, in collaboration with its community partners, will be recognized as a leader in the on-going development of an effective system of services in East Nipissing.

### **VALUES**

#### **People Focused Care...**

Provide for the well-being of the community we serve  
Recognize and respect individual needs

#### **Quality Care / Excellence...**

Highest quality of care  
Staff aspire to excellence

#### **Responsibility & Accountability...**

Efficient and effective use of time and resources  
We are accountable, in an ethical manner, to all involved

#### **Respect...**

We believe in and respect uniqueness, diversity and dignity of each person  
We treat each other with honesty and compassion

Mission  
Vision  
Values





# WELCOME TO CASSELLHOLME

## ACCREDITATION

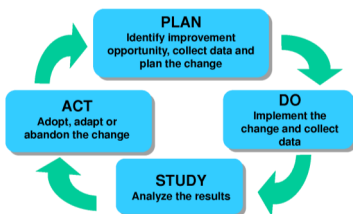
Cassellholme is an accredited facility under Accreditation Canada. Accreditation provides recognition that Cassellholme is meeting national standards of quality.

Through Accreditation standards and programs, Accreditation Specialists and Surveyors work with Cassellholme to help improve quality, safety and efficiency so that Cassellholme can offer the best possible care and service.

Accreditation Canada provides on-site surveys as an opportunity for surveyors to look for evidence through observation, interviews, and by reading and reviewing documents that support and demonstrate compliance with the national standards. During an on-site survey, surveyors will meet with staff, residents, families, Board members and community partners, as well as tour all service areas.

Accreditation is one of the best and most effective measures that Cassellholme can use to accurately assess the level of performance against a national set of standards set by Accreditation Canada in collaboration with the health care service industry.

## QUALITY COUNCIL



The Quality Council is an operations committee established to ensure adherence to all legislative acts, to the various requirements as identified through the MOHLTC, the NE LHIN and the various governing bodies including HQO and Residents First.

The Quality Council will achieve this through the ongoing development and monitoring of high Quality Improvement standards and quality annual plans.

Through its cross-disciplinary membership, Cassellholme’s Quality Council serves as a resource to all staff, residents and their families, volunteers, service providers, students and the Board of Management in matters that pertain to Quality Improvement.

## STRATEGIC MANAGEMENT



*Where We Are.....*

*Where We Are Going.....*

Cassellholme, as per the by-laws, develops strategies and plans, to make improvements, set goals and implement change.

The Board of Management, staff and stakeholders engage in the planning process using key Provincial and Regional documents to form the foundation of the Strategic Plan.



# ACCOMMODATIONS

Cassellholme provides different levels of care based on the particular needs of the individual. All rooms are private or semi-private with ensuite washrooms. A bedside table and chair are provided along with bedding, linen and window curtains. Adjustable beds are provided based on residents' needs. Bedrails are available, if required.

Individuals residing on Cherry Lane, Cassellholme's secure unit, may have further restrictions of items not permitted in that area. Please see the Safety & Security section of this handbook and/or contact registered staff prior to bringing items in the home.

### **PERSONAL ITEMS:**

Residents are welcome to bring the following additional items to personalize their rooms:

- 1 Lamp
- Pictures
- Bedspreads
- 1 Chair (appropriate to the size of the room)
- Other mementos
- 1 Television (max 20")
- 1 Stand up air conditioner unit
- 1 Standup dresser (max 48" H x 30" W)
- Headphones
- 1 Radio
- 1 Clock
- 1 Small fridge (max 19" H x 18" W - families are responsible to clean on a regular basis)

### **ITEMS NOT PERMITTED:**

The following items are **NOT** permitted:

- Humidifiers/vaporizers
- Portable heaters
- China cabinets
- Bookcases
- Wall shelving
- Curtains
- Scatter rugs
- Bath products / powder
- Foam mattress / pillows
- Cooking appliances
- Knives / sharp objects
- Guns
- Ammunition
- Swords
- Propane tanks
- Barbeques
- Electronic cigarettes
- Extension cords
- Irons / curling irons
- Heating pads
- Hot water bottles

### **RESTRICTIONS:**

Additional items such as lighters, alcohol, nail clippers, Vaseline (residents on oxygen), plants, etc., will be at the discretion of the home and resident's safety. Please check with nursing staff.

The dimensions of the rooms at Cassellholme vary; therefore we ask that you verify the size of the items with the Resident Services Coordinator prior to bringing items into the Home. Cassellholme is unable to store extra items for residents (example: walkers, wheelchairs, extra clothes, furniture, suitcases, etc.)

The maintenance department must check all electrical equipment before it is placed in the resident's room to ensure that the items meet all CSA safety standards and are in good working order.

Scooters are not permitted in resident rooms or on the units. Parking with access to charging is available outside in the Oval Garden.





## ACCOMMODATIONS

### **RESIDENT ROOMS**



To ensure a safe and hazard free environment for residents and staff, no items are to be stored on the floor. Shelves are not permitted to be installed on the walls and resident beds are not to be pushed up against the wall.

Residents will provide, on an ongoing basis, appropriate clothing and footwear, prosthetic devices (glasses, dentures, hearing aides, etc.) and anything else, which is reasonably necessary for the resident's comfort and functional ability in the Home. Residents agree to pay for any needed repair to these necessary personal effects.

Any physical modifications within the resident's room shall be approved and carried out by Cassellholme staff. Residents are financially responsible for any damage caused to the structure or physical property of Cassellholme by the resident or another unauthorized individual. Removal of furniture that is no longer suitable is the responsibility of the resident and/or family.

### **RESIDENT ROOM TRANSFERS**

Residents may be moved to another room within Cassellholme. Items that were brought in at admission may not be suitable and may have to be removed to accommodate the size of the new room. The priorities used to determine room changes are:

1. Safety considerations
2. Resident care needs
3. Ability to pay for preferred accommodation
4. Resident preference

Requests for room changes are recorded by the Resident Services Coordinator and can be made at any time following admission. When a Cassellholme bed becomes available, the needs of Cassellholme residents, on an internal waiting list, are satisfied prior to the bed being offered to the community for admission.

Residents will not be asked to transfer to another room unless there are safety considerations, resident care needs, and/or they are moving into or out of the secure unit.

Residents shall co-operate with the staff of Cassellholme in moving to a different room in the Home if the staff determine that the resident's health care requirements or the resident's behavior make a move necessary for the best interest of the resident or other residents of Cassellholme.

Residents agree to pay any costs incurred because of the room change. This also includes the transfer out of Cassellholme's secure unit (Cherry Lane).

If a resident is not satisfied with their current roommate, they may put their name on the internal transfer list and await bed availability.



## ACCOMMODATIONS

Where in the opinion of Cassellholme, a resident can no longer be cared for in the facility, the Long Term Care Homes Act Regulations 2007, c. 8, 39-51 states: “A licensee of a long-term care home may discharge a resident if the licensee is informed by someone permitted to do so under subsection (2) that the resident’s requirements for care have changed and that, as a result, the home cannot provide a sufficiently secure environment to ensure the safety of the resident or the safety of persons who come into contact with the resident.”

The CEO/Director of Clinical Services or designate will transfer or discharge the resident to another home or alternate housing, for the safety of all involved.

### **FINANCIAL INFORMATION**



Provincial legislation requires that the Accommodation Agreement be signed upon admission by the resident or Power of Attorney (POA) for Property and they receive a copy of this agreement.

The Ministry of Health & Long-Term Care sets accommodation rates annually. Monthly accommodation fees are due on the first of each month.

A rate reduction is available if a resident is unable to afford the maximum basic accommodation rate.

### **APPLYING FOR A RATE REDUCTION FOR BASIC ACCOMMODATION**

To apply for a rate reduction for basic accommodation, supporting documentation must be received by the home at time of admission or annually by June 1st, thereafter. Supporting documents most often include the resident’s Notice of Assessment issued under the Income Tax Act (Canada) for the resident’s most recent taxation year. The information for line 236 (Net Income) and line 435 (Tax Payables) is the information used to calculate a residents basic accommodation rate. Residents must submit their notice of assessment to determine the accommodation rate; otherwise the full basic accommodation rate will be applied.

Accommodation rates are calculated annually with changes taking effect on July 1st of each year. Rate reductions do not apply to residents occupying private rooms paying preferred accommodations.

Residents will be required to set an appointment with the Resident Accounts Coordinator to sign the Accommodation Agreement and pertinent documents within the Resident Information Package.

#### **Please bring the following to the appointment:**

- Notice of Assessment for most recent tax year
- Power of Attorney for Personal Care
- Power of Attorney for Property (Finance)

The Residents Accounts Coordinator is available:

Monday to Friday, 8:00 a.m. – 4:00 p.m.

Tel: 705-474-4250 ext. 227



## ACCOMMODATIONS

### **SAFEKEEPING TRUST ACCOUNTS**



Non-interest bearing, safekeeping trust accounts may be set up in the General Store/Reception. There are no charges for withdrawals or services provided on this account.

The only person(s) having access to withdraw monies on this account are the resident and/or the POA for Property or Substitute Decision Maker (SDM).

The only automatic deductions made from this account would be those indicated on the non-funded services list, which is set up with consent of the resident through the Resident Accounts Coordinator. A printout of this account will be provided quarterly as well as upon request.

Deposits or withdrawals may be made from these accounts Monday through Friday, 8:30 am – 4:30 pm. Any withdrawals over \$100.00 are issued in the form of a cheque with a 24 hour notice required. The maximum allowable balance that a resident may have in this account is \$5000.00

Cassellholme accepts no responsibility for money or valuables in the Home, except for money deposited in the Trust Account set up for that purpose.

Upon closure of the account, either by voluntary discharge or otherwise, all moneys remaining in the resident's trust account after the settlement of any and all outstanding accommodation fees or other costs, will be returned to the resident, POA or the resident's estate.

### **INCOME TAX RECEIPTS**



A tax receipt/credit letter may be requested annually for residents at the end of February or after their final bill is paid.

Cassellholme residents are not eligible for a property tax credit, as Cassellholme does not pay Municipal or school taxes.

### **ABSENCE/LEAVE FROM HOME**

Please be aware that residents are obligated to pay accommodations during Medical, Psychiatric, Vacation and Casual absences from the Home.



## ACCOMMODATIONS

### CASUAL LEAVE



Casual Leaves of Absence of up to forty-eight (48) hours per week are available to residents in long-term care homes. Casual Leaves are permitted throughout the year regardless of vacation or other medical leaves taken. Casual Leaves are considered separate from medical and vacation leaves.

### VACATION LEAVE



A Vacation Leave of Absence of up to twenty-one (21) days a year is available to residents of long-term care homes.

Please see the Registered Nurse (R.N.) Supervisor or RPN on the unit well in advance of the anticipated leave so medications can be prepared. In addition, please provide the expected return date so that accurate doses of medications can be prepared and supplied for the leave.

### MEDICAL LEAVE



A resident's condition may change requiring assessment or treatment in a hospital. If this occurs, a Medical Leave of Absence in a hospital for up to thirty (30) days per each hospitalization stay is available to the resident. (Use of Medical Leave does not reduce the resident's available casual or vacation leave days.)

### PSYCHIATRIC LEAVE

A Psychiatric Leave in a hospital for up to sixty (60) days at a time is available to residents of Cassellholme for the purpose of assessment, treatment and stabilization of a resident's psychiatric status. The use of psychiatric leave days does not reduce a resident's available casual or vacation leave days.

### RESIDENT OUTINGS REGISTRY



All Nursing Stations have a Resident Outings Registry binder secured to the top counter. Family members and friends are asked to utilize this book whenever a resident leaves the building.

**Residents must be signed out when leaving. It is critical to nursing staff communication. Staff will otherwise be unaware and begin to search for the missing resident.**

When a resident is returned to the Home, the time of return must be entered on the sheet. This registry will be used as a quick reference to verify a resident's outing and monitor the Census.



## CLINICAL SERVICES

### **COMMUNICATION & CONFIDENTIALITY**



It is strongly recommended that each resident have a documented Power of Attorney for Property and Power of Attorney for Care at the time of admission, or seek advice on having one prepared. A copy of this document will be kept in the financial file of the resident, as well as in the resident chart. Any change in POA must be brought to the attention of the Resident's Accounts Coordinator as soon as possible after the change has been legally made. A copy will be taken for the resident file.

Should a resident be incapable of making decisions regarding his/her personal care, then another person may speak on his/her behalf.

There are two possible ways this can happen:

- 1) Complete a Power of Attorney for Personal Care Form that legally identifies the person or persons that will make decisions on behalf of the resident and only when the resident has been deemed incapable. This document must be prepared before a person is deemed incapable.
- 2) Rely on the Health Care Consent Act that allows for a Substitute Decision-Maker (SDM) to speak on behalf of an incapable resident. According to the Act, the order of recognized hierarchy is as follows: Spouse/Partner, Child, Parent, Sibling, Other Relative.

Should a resident have no family or should there be a dispute between equally ranked substitutes regarding the care of the resident, the Office of the Public Guardian & Trustee will be asked to act on behalf of the resident.

The POA for Personal Care or Substitute Decision-Maker will participate in the assessment, planning and evaluation of all care delivered to the resident. Notification of medication changes, incidents, and other changes of the resident will be communicated.

Personal health information is important in allowing Cassellholme to provide better service. Often times that information is used when performing an assessment to determine health services and support needs.

The Integrated Assessment Record (IAR) is an application that allows assessment information to move with the client from one health service provider to another. Cassellholme uses this secure electronic system to share health information with other health service providers. Upon admission the choice to make consent or withhold your consent to the sharing of all your assessments in the electronic sharing system is available.

To ensure privacy, visitors will be asked by staff to leave the resident during treatment and care. (eg. dressing changes, status checks, etc.).



## CLINICAL SERVICES

### **CARE CONFERENCES**

Care conferences are multidisciplinary meetings held within 6 weeks of admission and annually thereafter to review the resident's care plan.

On admission, the RN Supervisor will develop an initial plan of care. Within the first 6 weeks after the resident is admitted to Cassellholme, the Resident Services Coordinator will arrange a Care Conference to meet with the family and resident to evaluate the initial plan of care.

All available information is reviewed at this time, including social history, diagnosis, expectations of the resident's family, outside community interests, POA, Advanced Care Directive (ACD) documents and contacts. The care plan is then reviewed and updated.

The Resident Services Coordinator will contact the resident, family and the interdisciplinary staff to arrange a date and time for each conference.

A Care Conference may be required more frequently depending on resident needs or as required. Families may also call the Resident Services Coordinator or a member of our registered staff to request a Care Conference. Should you be unable to attend the care conference, a telephone conference can be arranged.

### **NURSING & PERSONAL CARE SERVICES**



Planning for each resident's care is coordinated by the Interdisciplinary Health Care Team. This team is made up of the resident's physician, nurses, direct care and behavioural support staff, nutrition & food services, housekeeping, activities, pastoral personnel, therapists and resident services coordinator.

As members of the Interdisciplinary Team, all staff at Cassellholme are committed to enhancing the quality of life for residents.

Residents are assessed on a quarterly basis using the Resident Assessment Instrument – Minimum Data Set (RAI-MDS 2.0). If there is a significant change in care or hospitalization, residents will be reassessed more frequently.

Resident health cards should be kept at Cassellholme at the Nursing Station, so that in the event a resident has to go to the hospital or to an appointment, the card can be sent with the resident. Change of address, lost, damaged, and expired cards will be maintained by Cassellholme staff.

Cassellholme maintains a qualified, organized program of nursing and personal support services for the home to meet the assessed needs of the residents.



## CLINICAL SERVICES

### NURSING AND PERSONAL SUPPORT SERVICES

Nursing and personal support services staff are available 24 hours a day, 7 days a week.

Personal Support Workers (PSW's) provide services to assist with the activities of daily living, including personal hygiene services, and includes supervision in carrying out those activities.

Registered Practical Nurses (R.P.N.'s) are responsible for the administration of prescribed medications, treatments and other professional nursing duties, within their scope of practice.

Registered Nurse (R.N.) Supervisors are responsible to carry out other professional nursing duties, within their scope of practice. At least one registered nurse is on duty and present in the home at all times. Any visitor or resident may request, through any staff, to meet with the R.N.

The nursing staff work closely with North Bay's medical community. Residents have the option of retaining their own family physician, if the physician has a contract with Cassellholme, or will have the Home's Medical Director assume responsibility for medical care and treatment.

### MEDICATIONS



All medications must be ordered by a doctor and filled by staff from our contracted, accredited pharmacy. Only Registered Nurses and Registered Practical Nurses will administer medications.

**Medications cannot be kept at the bedside.**

All medications brought in by a resident at the time of admission will be reconciled by the nurse and orders obtained from the Medical Director or the resident's physician.

Medications brought into Cassellholme will be returned back to the family for disposal. Medications will be re-ordered by the registered staff from the pharmacy.

Any supplements or herbal remedies will be re-ordered only at the discretion of the Medical Director and must be supplied by the pharmacy. Any medications brought into the home by the resident or family will not be administered.

Residents/family/POA will incur all costs associated with ordering and receiving supplemental medications and/or herbal remedies, or medications not covered by ODB. Pharmacy will notify residents/POA of all associated costs.

Staff will inform residents/family/POA of when a new doctor's order is received. The resident/family/POA will have the right to consent or refuse consent to start the new order. The resident is responsible for any harm, damage or injury to himself/herself or others occurring as a result of the resident refusing medication, treatments or other medical orders including the use of restraints.

Information can be requested from the pharmacy concerning risks and benefits of any medication prescribed.



## CLINICAL SERVICES

### **LEAST RESTRAINT POLICY**

The use of physical, chemical or environmental restraints in Cassellholme will respect individual dignity and personal freedom and be considered as a last resort when all other measures have failed.

Cassellholme staff will ensure that the least restrictive type of restraint is used as an intervention after all alternatives have been considered or tried and found to be ineffective. A consent and doctor's order must be obtained before application of a restraint.

In an emergency, restraints can be applied only when there are reasonable grounds to believe that the resident may suffer injury or may injure others, an Alternatives to Restraint Assessment has been completed by an R.N. and results indicate the need for a restraint.

Cassellholme complies with a written policy to minimize the restraining of residents and to ensure that any restraining that is necessary is done in accordance with the Long-Term Care Act. 2007, c. 8, s. 29 (1) For a copy of Cassellholme's Least Restraint Policy, contact one of the Unit Support Assistants or the RN Supervisor on Duty.

Cassellholme ensures that no resident of the Home is:

1. Restrained, in any way, for the convenience of the licensee or staff
2. Restrained, in any way, as a disciplinary measure
3. Restrained by the use of a physical device, other than in accordance with section 31 or under the common law duty described in section 36
4. Restrained by the administration of a drug to control the resident, other than under the common law duty described in section 36
5. Restrained, by the use of barriers, locks or other devices or controls, from leaving a room or any part of the Home, including the grounds of the home, or entering parts of the home generally accessible to other residents, other than in accordance with section 32 (if the restraining of the resident is included in the resident's plan of care) or under the common law duty described in section 36. 2007, c. 8, s. 30 (1)

### **WHEELCHAIRS / WALKERS / SPECIALIZED EQUIPMENT**

Cassellholme has a limited supply of wheelchairs, walkers and geriatric chairs for short-term use only.

Cassellholme walkers, wheelchairs and geriatric chairs are loaned to residents, under the following circumstances:



1. On a trial basis, so the resident may try the equipment prior to purchase
2. As a loaner, to be used when the resident's own equipment is being repaired
3. As a trainer, when the equipment has been identified as being needed for only a short period of time





## CLINICAL SERVICES

Because of the different sizes and options available in walkers and chairs, a specifically prescribed assistive device is best for the resident's comfort. Residents who need equipment for long term use are required to be assessed and purchase their own equipment, chair or walker specifically designed for them. The assessment is arranged by Cassellholme's registered staff and done by an occupational therapist, through CCAC.

When residents require equipment such as wheelchairs or specialized seating, the contract for services is between the resident and this company.

The Ontario Assistive Devices Program is currently available to help those who qualify, with the purchase of equipment. In order to utilize this program, an assessment by a physiotherapist / occupational therapist is required and additional charges may apply to the resident.

If a resident's equipment requires repair, this can be arranged through Cassellholme staff. The repair will be completed by an outside provider at the expense of the resident.

### **PHYSIOTHERAPY/REHABILITATION PROGRAM**

Physiotherapy helps strengthen muscles, keep joints flexible and maintain well-being. Exercises such as walking, range of motion, weight training and balance exercises can help to enhance quality of life.

All residents receive an assessment upon admission to determine if physiotherapy is required. Referrals can be made to the physiotherapist, CCAC occupational therapist or CCAC speech & swallowing therapist if there is a significant change in a resident's condition.

The Home provides physiotherapy services through a Physio Provider at no charge to residents. A Nursing Rehab/Restorative Nurse works with external and internal health care providers to develop individual rehab therapy programs for residents who have had a significant change in their condition. The clinical services staff will receive a specific nursing rehab care plan and will deliver the rehab as directed.

### **INFECTION CONTROL**



Use of the alcohol-based hand sanitizer is strongly encouraged on entry and exit of the building. Sanitizer units are located at the elevators, Nursing Stations, hallways, resident rooms and at the main entrance. Residents who feel unwell are asked to inform the nurse immediately.

In an effort to control the spread of infection and protect the health of our residents, if a visitor is feeling sick, we ask that he or she reschedule their visit. If there are a number of residents who are ill, Cassellholme works with the North Bay Parry Sound District Health Unit and takes appropriate actions to reduce the spread of infection. An illness "Outbreak" may be declared. This may require the cancellation of home-wide activities and restrictions on visiting.



# CLINICAL SERVICES

Notices of the presence of certain infections will be posted on all entrance doors, Cassellholme’s Website and a recorded announcement when calling Cassellholme to inform visitors of illness outbreaks and restrictions on visiting.

All residents, family and visitors are expected to be cooperative with the recommended changes during outbreaks. Changes are put in place to prevent the spread of disease.

When a resident becomes ill (eg. cold, influenza, diarrhea, vomiting, shingles, or any other illness that can be transmitted), additional precautions (also known as isolation) are put in place. Signage will be posted on the door of the resident’s room, along with gloves, gowns, masks and goggles.

Visitors should check with the nursing staff before entering the room to ensure they understand what precautions are required. It is expected that residents and visitors cooperate with the additional precautions to prevent the transmission of infection.



In order to protect residents from infections, staff are trained to follow the 4 moments of hand hygiene. We encourage residents and visitors to do the same.

Immunizations such as flu shots (Influenza Vaccine) and pneumonia shots (Pneumovax) are offered to residents. Residents, family and friends are strongly encouraged to get an annual flu shot.

## **FALLS**



A Falls Prevention Program actively monitors residents who are identified as having a history of falls.

Care plans for these residents include specific interventions to reduce falls and a specific nursing restorative and/or physiotherapy program for qualifying residents.

## **ESCORTS TO APPOINTMENTS OR VISITS OUTSIDE OF THE FACILITY**

The medical community requires that a resident be accompanied by a clinically skilled person that is able to provide hands on care and stay for the duration of the appointment or treatment.

If family is unable to provide for the resident’s care needs, arrangements for an external escort can be made through the Unit Support Assistant on the applicable unit. A community service provider will escort the resident at the established rate with charges being the resident’s responsibility according to the Cassellholme Companion Policy.

While the resident is off Cassellholme premises, the Home is not responsible for the resident’s welfare.

All residents have the option to be registered with Para-Bus services.



## CLINICAL SERVICES

### FOOT CARE



A foot care assessment is done on all new residents upon admission. Basic foot care then becomes part of the routine care, as required.

Basic foot care will include the following non-invasive measures: assessment, identification of infection, injury and other problems, and care of the skin and nails.

Diabetic residents are encouraged to have an advanced foot care provider. Contact the Unit Support Assistants on the units for a complete list of providers.

Advanced foot care will be provided only by chiropodists, podiatrists or qualified registered nursing personnel. This latter care will be done on a fee-for-service basis arranged and paid for by the resident or his/her Power of Attorney.

### Behavioural Supports Ontario



BSO, Behavioural Supports Ontario, was formed and exists to enhance service for older people with responsive behaviours associated with cognitive impairments, providing them with the right care, at the right time and in the right place.

An individual's responsive behaviour(s) may be related to: a diagnosis of dementia, mental health disorder, substance use disorder or other neurological disorders, such as Parkinson's Disease. A Responsive Behaviour occurs when a resident is having difficulty communicating an unmet need or desire.

A resident's actions, words and gestures are a response to this need that is important to them. Responsive Behaviours can be categorized as wandering, withdrawn, disruptive, physical, verbal, socially inappropriate and resistive.

The focus of the BSO Program is on providing Client Centered Care to improve the quality of life and the quality of care for this population.

At Cassellholme the BSO team consists of two RPN's and four PSW's, all of which have specialized skills and experience. Through various tools such as "Piece of My Personhood", Real Life Story, and a comprehensive assessment, the BSO team is able to develop a plan of action that will "accommodate the behaviour, rather than control it".

*"I am more than my behaviour. Learn who I was, understand who I am"*



## SUPPORT SERVICES

### **HOUSEKEEPING**



The Housekeeping staff takes pride in maintaining a safe, clean and tidy environment. Regular housekeeping is important to ensure that the environment is clean, pleasant and safe. Cleaning of washrooms, touch and contact points, garbage, general light cleaning and tidying of rooms are completed daily. A more thorough cleaning is scheduled at regular intervals.

All furniture brought into the home must be delivered through the receiving room at the back of the building. Furniture must be clean, safe, in good condition and appropriate for the size of the resident's room.

### **RECEIVING ROOM - DROP OFF HOURS FOR FURNITURE**

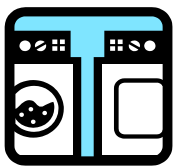
Monday to Friday: 7:00 am to 3:00 pm

Closed - Saturday, Sunday and Statutory Holidays

### **ROOM DISCHARGE**

Cassellholme is sensitive to the grief that family and friends face when a loved one passes and we strive to be supportive and responsive to the needs of family and friends. When this occurs, the room must be made available for occupancy within 24 hours and all items must be removed within that time frame.

### **LAUNDRY**



Cassellholme uses industrial machines to wash and dry personal clothing and bed linens.

All clothing should be machine washable and machine dryable. It is suggested that each resident have at least twelve (12) changes of clothing, both night and day wear.

Delicate items such as feather duvets, wool and other items that may require dry cleaning are not recommended as they may become damaged. Dry clean items can be sent to a local business, at the resident's expense.

### **LABELING - DROP OFF LOCATION**

New items and gifts brought in to be labeled can be dropped off in the cabinet located in the Main Hall outside the General Store. Place items inside the bags provided. Paper and pen are located on the side of the cabinet to write the resident's name. Include this information in the bag to ensure proper identification. Please do not drop off items for labeling at the nursing stations.



## SUPPORT SERVICES

The efficiency of the laundry service and minimization of lost articles of clothing is dependent on all items being labeled by Cassellholme laundry services. All personal belongings including clothing, slippers, shoes, personal linens, bedspreads, pillows and comforters must be labeled with the resident's name immediately upon admission or upon entry of new articles into the home. There is no charge for this service.

Items received as gifts or any item brought into the home must also be labeled before being worn or put in closets. Please allow Cassellholme to label all articles, as Cassellholme labels will not come off the clothing. Cassellholme cannot be responsible for articles that have not been labeled by the Home.

If families choose to do laundry at home, all clothing and bed linens must still be labeled. If residents wish to do their own laundry, washers and dryers are located on each floor.

Resident articles can occasionally be misplaced. If this occurs, please notify the RN or RPN on the unit or the Manager of Housekeeping & Laundry. A Lost and Found day is held monthly on the 1st Thursday of the month in the Garden Room for those articles un-labeled or not identified.

### **LAUNDRY - FOR NEW ADMISSIONS**

Upon admission only, all clothing must be brought to the receiving room, at the back of the building, and placed in bags with the resident's name on it. Suitcases are to be brought home by the family. All clothing must be clean. Family should check to make sure there is nothing in the pockets (lipstick, shoe polish, gum, etc) when dropping off clothing, as all clothing will require an initial cycle in dryers upon arrival before delivery to resident.

Family members are encouraged to remove seasonal clothing from the resident's room, as this helps provide more room in the resident's closets and drawers.

### **NUTRITION & FOOD SERVICES**



The Nutrition & Food Service Staff prepare, cook and serve over 275,000 nutritious meals annually for our residents and community clients. Menus are developed by qualified dietitians and meet the therapeutic and texture modification needs of our residents.

Daily and weekly meal time menus are posted outside each dining room. Choices are offered at breakfast, lunch and supper.

Nutritious snacks are provided between meals and before bedtime. Resident's may access Kitchenettes for beverages, etc. Family members are welcome to enjoy a meal with residents. Meal tickets can be purchased at the General Store at least one hour prior to the meal.

The Dietitian sees all residents on admission and develops a personalized nutritional care plan. Each resident's nutritional care plan is reviewed quarterly by the Dietitian or Food Service Supervisor.



## SUPPORT SERVICES

The Resident Council reviews the menus, meal and snack times. The Council allows for positive changes to be made to meal service and to ensure resident satisfaction. The goal is to provide a pleasant, homelike atmosphere during mealtimes.

Residents and family members are encouraged to join the Food Committee and share their comments and ideas. The Food Committee meets twice a year to plan and review the Spring/Summer and Fall/Winter menu cycles.

### **BRINGING FOOD INTO THE HOME**

Food and beverages are carefully handled in Cassellholme to prevent any possible foodborne illness or contamination.

Families wishing to bring in meals and snacks from outside sources are responsible for the serving and storing of these personal food items.

Residents may have food allergies or medical restrictions. Please do not share outside food with other residents.

### **MAINTENANCE**



All electrical, plumbing, heating and other maintenance problems, which occur within Cassellholme, should be reported to the Unit Support Assistant as soon as they are noticed.

The Maintenance staff will take care of the problem as soon as possible during regular business hours. Maintenance staff are available after-hours, for emergencies only. Cassellholme has a comprehensive routine and preventative maintenance plan.

Safety is of prime concern. When a resident's electrical equipment (eg. radios, fans, lamps, clock, TV, etc.) is not working, maintenance staff may help to assess the problem and may do minor repairs at the expense of the resident, as time permits.

All resident's electrical equipment must be inspected and approved by the maintenance department to ensure it is CSA Safety Standards Approved, prior to placing in a resident's room. A fluorescent sticker will be attached, signed and dated to indicate that it has been inspected.

# RECREATION, LEISURE & SPIRITUAL PROGRAMS

## VOLUNTEERS



Our volunteers' contribution in enriching the lives of residents at Cassellholme cannot be overemphasized. Volunteers are here to enhance the quality of life and to support services to the residents. Besides giving individual attention to residents, volunteers help create a pleasant atmosphere and assist residents to and from activities. Families and friends are welcomed and encouraged to become a registered volunteer.

For more information on these exciting opportunities, please contact the Volunteer Coordinator.

## RECREATION & LEISURE

A wide variety of recreational activities and programs are offered to residents based on needs and lifestyles. Activities and programs vary from one-to-one and small unit-based groups to large group and global programs.

Programs are offered 7 days a week including weekends and evenings. Some activities include, but are not limited to, fun and fitness, cards, musical performances, knitting, quizzes, trivia, bingo, barbeques, pub nights, exercise programs, shopping trips and community outings.

To keep residents and families informed of activities and special events, there are daily bulletin boards on the units, monthly activity calendars available on each unit and posted on the Cassellholme website. Upcoming events are also advertised in the quarterly resident newsletter.

## SPIRITUAL AND RELIGIOUS CARE



Regular church services for all denominations are held weekly in the Chapel Auditorium as well as on major religious holidays.

Mass is offered every Saturday at 10:00 a.m. with worship services on Sundays at 2:00 p.m.

Volunteers provide Bible Study, Hymn Sing and Rosary on a weekly basis.

Pastoral visits are available during times of illness, grief or palliative care.

Cassellholme supports each resident's right to celebrate his or her faith and will attempt to meet the spiritual needs of residents, families and staff within their religious affiliation. Alternative arrangements may be made for residents to attend the church of their choice.



## RECREATION, LEISURE & SPIRITUAL PROGRAMS

### PALLIATIVE CARE



Cassellholme staff strive to meet physical, psychological and spiritual needs of residents who are dying. When death is anticipated, residents prefer to remain in their own rooms and a butterfly is placed on their door.

The predetermined advanced care directives respect the desires and wishes of the resident and/or significant others at these times. Staff are trained and very skilled in the provision of palliative care.

Families and clergy are welcome to visit whenever they wish and extra volunteer support can be arranged. An informative booklet is provided for family members to assist with their understanding and preparation for the dying process.

Celebration of Life Services are held regularly to remember those who have passed away. Cassellholme recognizes the importance of acknowledging the loss of a loved one. This time together gives families an opportunity to visit with residents, staff and volunteers, possibly for the first time since the death.

The Celebration of Life Service consists of music, readings, memory candles and a reflection focusing on our shared loss. To help facilitate this service, the Pastoral Care Coordinator will contact families for pictures and/or stories about the resident. Family, friends, staff and volunteers are encouraged to attend.





## GENERAL INFORMATION

### WHAT TO DO IF YOU HAVE A CONCERN



Cassellholme takes all concerns seriously. If there is a matter of concern, that you would like to discuss, please follow the suggestions listed below:

1. First, contact a registered staff (RN, RPN) on the applicable unit. The RN Supervisor name is posted at each nursing station. The RN may direct or forward your concern to the appropriate person
2. If the matter is not resolved to your satisfaction, contact the Department Head
3. The Family Council or Resident Council are available to act on your behalf as well
4. Other avenues for resolving issues include contacting the CEO, the Board of Directors of Cassellholme, the Ministry of Health & Long-Term Care, or the Local Health Integration Network (LHIN). A list is provided on the following page of this handbook and posted throughout the Home.

### DUTY TO REPORT

A person who has reasonable grounds to suspect that any of the following has occurred or may occur shall immediately report the suspicion and the information. Some examples include, but are not limited to:

1. Improper or incompetent treatment or care of a resident that resulted in harm or a risk of harm to the resident
2. Abuse of a resident by anyone or neglect of a resident by the licensee or staff that resulted in harm or a risk of harm to the resident
3. Unlawful conduct that resulted in harm or a risk of harm to a resident
4. Misuse or misappropriation of a resident's money
5. Misuse or misappropriation of funding provided to a licensee under this Act or the *Local Health System Integration Act, 2006*, 2007, c. 8, ss. 24 (1), 195 (2)

An investigation will be completed and reported to the MOH LTC

### WHISTLE-BLOWING PROTECTION



As per the Long-Term Care Homes Act, no person shall retaliate against another person, whether by action or omission, or threaten to do so because:

- (a) anything has been disclosed to an inspector
- (b) anything has been disclosed to the Director including, without limiting the generality of the foregoing:
  - I. A report has been made under section 24, or the Director has otherwise been advised of anything mentioned in paragraphs 1 to 5 of subsection 24 (1),
  - II. The Director has been advised of a breach of a requirement under the Long-Term Care Home Act, or
  - III. The Director has been advised of any other matter concerning the care of a resident or the operation of a long-term care home that the person advising believes ought to be reported to the Director
- (c) evidence has been or may be given in a proceeding, including a proceeding in respect of the enforcement of this Act or the regulations, or in an inquest under the Coroners Act 2007, c. 8, s. 26 (1).



# CASELLHOLME CONTACTS

## ATTENTION RESIDENTS, FAMILY MEMBERS & VISITORS

IF YOU HAVE QUESTIONS OR CONCERNS, PLEASE FEEL FREE TO CONTACT ANY OF THE FOLLOWING:

### CASELLHOLME ADMINISTRATION

<b>Jamie Lowery</b>	<b>Chief Executive Officer</b>
Ric Campbell	Chief Financial Officer
Lindsay Dyrda	Director of Clinical Services
Shani Giroux	Director of Human Resources
Angie Punnett	Director of Operations
Marshall McCully	Manager, Maintenance
Bev VonHassell	Manager, Clinical Services
Trina Milne	Manager, Support Services
Ellen Whittaker	Manager, Infection Control/Health & Safety

### BOARD MEMBERS

**Chris Mayne, Board Chair**  
 Mark King, Vice Chair  
 Walter Ross, Treasurer  
 Tanya Vrebosch, Director  
 Dean Backer, Director  
 Tamela Price-Fry Director  
 Sherry Culling, Director

### Local Health Integration Network (LHIN)

**Louise Paquette, Chief Executive Officer**  
 555 Oak St., 3<sup>rd</sup> Floor  
 North Bay, ON P1B 8E3  
 tel: 705-840-2872 ext. 225 or 1-866-906-5446  
 fax: 705-840-0142  
 email: [louise.paquette@lhins.on.ca](mailto:louise.paquette@lhins.on.ca)

**Long-Term Care ACTION  
Line**  
**1-866-434-0144**  
**7 days a week,  
8:30 a.m. to 7:00 p.m.**

### THE MINISTER OF HEALTH & LONG-TERM CARE

**Honorable Dr. Eric Hoskins**  
 M-1B114, MacDonald Block  
 900 Bay Street  
 Toronto, ON M7A 1N3  
 Toll free: 1-866-532-3161

**THIS LIST MUST BE POSTED AT ALL TIMES**



## GENERAL INFORMATION

### **ZERO TOLERANCE OF RESIDENT ABUSE & NEGLECT**



Cassellholme is committed to providing a positive atmosphere for both residents and staff by ensuring that each individual's human rights and personal dignities are respected. Physical or verbal abuse of a resident or staff will not be tolerated under any circumstance.

All residents have the right to dignity, privacy, respect, individuality and freedom from physical, verbal, sexual, emotional, and financial abuse or neglect of care from staff, co-residents, family members, Power of Attorney representatives, or visitors to the Home.

Any person can report an alleged, suspicious or witnessed incident of abuse or neglect. Immediately report the incident to the RN Supervisor. An investigation and notification to the Family, CEO, Police and MOHLTC will be initiated immediately.

For a complete copy of Cassellholme's "Resident Rights: Prevention of Abuse & Neglect Policy", please contact one of the Unit Support Assistants or the RN on Duty.

### **RESIDENT RESPONSIBILITIES**

It is the responsibility of those residents living at Cassellholme to treat all persons with whom they come in contact, with the same courtesy, kindness and respect they wish for themselves.

Residents, family and visitors agree to comply with Cassellholme's established policies and procedures, the Ministry of Health and Long-Term Care Act and with all other applicable legislation.

Visitors who do not demonstrate compliance will receive verbal notification from Cassellholme staff. Visitors who remain non-compliant after receiving notification may be refused entrance into Cassellholme, may have their entrance into the Home restricted or may be removed from Cassellholme at the discretion of the CEO or his or her delegate.



## GENERAL INFORMATION

### **PROTECTING THE PRIVACY OF YOUR PERSONAL HEALTH INFORMATION**



The legislative Act governing Long-Term Care Homes requires that all health information of residents be treated with respect and sensitivity and that the residents' privacy be protected. Cassellholme collects personal health information from the resident directly or from the person acting on their behalf. The personal health information collected may include name, date of birth, address, health and medical history among other items.

Specific items requiring consent will be discussed and required as part of the Admission Package. Access to additional information is restricted to that permissible by law or when consent has been obtained.

Personal health information is disclosed/shared on a need-to-know basis with:

- Staff who need to know how to provide care, including physicians, nurses, technicians, therapists, and other health care professionals.
- With written consent, other health care providers who are not our employees but may be required to assist in providing health care services when no longer a resident at Cassellholme. These may include:
  - Health care practitioners and groups of health care practitioners, public hospitals, pharmacies, laboratories, ambulance services, community care access centres, community service providers, psychiatric facilities, independent health facilities, rest homes, nursing homes, care homes and homes for special care and community health or mental health centres, programs and services whose primary purposes are providing health care.

Cassellholme is committed to:

- Taking steps to protect personal health information from theft, loss and unauthorized access, copying, modification, use, disclosure and disposal.
- Monitoring and managing compliance with privacy legislation.
- Taking steps to ensure that all contracted services are held to the same standards and use personal health information for the purposes with which it was intended and consented to.
- Requesting consent to disclose any information for purposes not related directly to care (eg. insurance companies, lawyers, etc.) unless otherwise required by law.

You have the right to:

- Withdraw consent for the above uses and disclosures where otherwise not required by law.
- Access and request corrections to your personal health information.



## GENERAL INFORMATION

### **EVALUATING SERVICES**

Annual Satisfaction Surveys allow residents and families the opportunity to evaluate the services at Cassellholme. Results of the surveys are brought forward to the family and resident councils for review and recommendations.

### **RESIDENT COUNCIL**

Resident Council meetings are held monthly, giving residents an opportunity to raise issues, express concerns and receive information regarding the general operation of the home.

Cassellholme is a member of the Ontario Association of Residents' Councils which addresses issues of concern to residents, makes suggestions to the Ministry of Health & Long-Term Care and assists with proposals for change.

All residents of Cassellholme are welcomed and encouraged to sit on the Resident Council Committee.

Minutes of the Resident Council meetings are posted on the Resident Council information board on the main floor.

### **FAMILY COUNCIL**



The Family Council is an organized, self-led and directed group, composed of family members and friends of residents.

Long-Term Care Homes are required, per the Act, to encourage families and persons of importance to residents, to participate in a Family Council.

As a member of the Family Council, you have the ability to provide assistance, information and advice to residents, family members and friends of residents, as well as support and plan activities for residents. The Council will also advise the Home of any concerns or recommendations the Council has regarding the operation of the Home.

The Resident Services Coordinator is available as a liaison to support and facilitate the council. The Family Council holds monthly meetings and the minutes of the meetings are posted on the bulletin board in the main hallway.

All family members and friends of residents are welcome to participate as part of the Family Council.



# GENERAL INFORMATION

## LEGAL DOCUMENTS



If a lawyer or other business advisor is coming to Cassellholme to do business with a resident who does not have a private room, please contact the Unit Support Assistant in order to have a room available for private consultation.

Staff are not permitted to witness legal documents, even at the request of a lawyer or other visitor. All such matters must be referred to the CEO.

## CHARITABLE DONATIONS

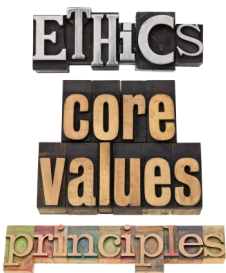
The Cassellholme Foundation is a not-for-profit charity dedicated to enriching the lives of the residents of Cassellholme through charity gifting. Donations to the Cassellholme Foundation can be made in the form of cash, cheque or “donation of kind”.

Please remember Cassellholme and its Foundation when you:

- ◆ Make financial donations
- ◆ Remember a loved one at time of his/her passing
- ◆ Prepare your will or help prepare the will of a family member
- ◆ Wish to celebrate some special event or anniversary by giving, thereby enriching the lives of others

Tax receipts are issued for all donations of \$10.00 or more. For further information, call ext. 300 or drop by the Administration Office.

## ETHICS PROGRAM



Cassellholme strives to produce a positive and healthy ethical climate in which basic ethical principles and moral reasoning are considered in making values-based decisions.

In health care settings, ethical questions arise when *‘the right thing to do’* is unclear or when people disagree about what is best for a resident.

Cassellholme has an Ethics committee, designed to help residents, family members, staff, volunteers and health care providers deal with difficult ethical issues that arise in resident care using an 8-step decision-making tool. Decisions with ethical implications are made every day in resident care, such as:

- Uncertainty about how to make decisions for a resident who lacks capacity to make his/her own decisions
- Family not wanting resident informed of what the resident has been diagnosed with
- Conflict regarding what treatments are in the resident’s best interest

Cassellholme is an equal opportunity employer and as such, care may be delivered by an opposite gender caregiver. For more information or to request a consultation with the ethics committee, contact the Ethics Committee Chair at 705-474-4250 ext. 286



## GENERAL INFORMATION

### **ENTERTAINING FRIENDS AND VISITORS**



Friends and family of all ages are welcome to visit the Home. Visiting is permitted between 07:00 – 21:00 hours. Visitors are encouraged to respect these primary visiting hours.

The doors to Cassellholme will be locked outside of these hours.

If visitors require private time and space with residents, arrangements can be made by contacting the Unit Support Assistant. “Do Not Disturb” signs are also available from nursing staff.

Several rooms are available for private family functions, free of charge. Contact the General Store to reserve a room.

### **VISITING PETS & THERAPY DOGS**

Pets and therapy dogs are welcome to visit in the Home if they are on a leash, in good health and monitored at all times.

Please ensure pets have received all required vaccinations. Pets are not permitted in the dining rooms at any time.

### **PARKING**



Free visitor parking is available in the side parking lot adjacent to Cassells Street. Parking is not permitted in designated fire routes or in the main circle at the front entrance.

A handicap/disabled sticker is required to park in the designated handicap spaces to the side of the front entrance.

### **GIFTS**

Cassellholme advises that all visitors check with nursing staff before giving residents gifts of food, candy or beverages, as some residents may have allergies or could be harmful for those on special diets or medications.

Employees are not permitted to accept gifts, monetary or otherwise. Recognition to staff is very much appreciated and staff are more than happy to accept verbal or written appreciation.



## GENERAL INFORMATION

### **ALCOHOL**

Cassellholme is a licensed establishment under the Liquor License Act.

When attending Cassellholme activities or social events, where alcohol is served, residents and visitors may purchase and consume alcohol with a two drink per person limit. Please note that staff are not allowed to purchase or provide alcohol to residents.

Residents may have a small amount of alcoholic beverages in their room for personal use. Residents with continued excessive alcohol use that puts the individual or other residents at risk, may result in the resident being asked to make alternate living arrangements.

### **GENERAL STORE/RECEPTION**

Cassellholme operates a General Store/Reception Area located on the main floor and is open Monday – Friday, 8:30 a.m. – 4:30 p.m. Where staffing permits, the General Store may also be open on occasional Saturdays from 12:00 p.m. to 3:00 p.m.

The General Store stocks a variety of snack foods, gifts and other items for the convenience of residents and visitors.

The Reception Area is the location for resident's safekeeping accounts and general information. Resident safekeeping accounts are not available on Saturdays. The General Store and Reception areas are both closed on statutory holidays.

Additional hot and cold beverages are available for the residents at any time from the kitchenettes on the units. There are also vending machines with beverages and snacks located in the hallway across from the General Store/Reception.

### **PHOTOGRAPHY**



On admission, a digital photo of each resident is taken and added to the database file for identification purposes. Residents may also be photographed or videotaped while engaged in routine activities. Consent is required if a resident is clearly identifiable and the material is to be used in the community.

### **HAIRDRESSING/BARBER SERVICES**



Hairdressing and barber services are available on the main floor Tuesday through Friday. Residents are responsible for the cost of all services received.

Please call 705-474-4250 ext. 269 to schedule an appointment.

Note: The hairdressing and barber services will be closed during facility-wide outbreaks.





## GENERAL INFORMATION

### **TELEPHONE & CABLE TELEVISION**



Telephone service is available through Cassellholme. Contact the Resident Accounts Coordinator for installation and billing agreement.

Television cable hookup is the responsibility of the resident/family.

PLEASE NOTE: All costs associated with these services are the responsibility of the resident/family.

### **MAIL**



The mail is delivered to the General Store/Reception and distributed to the resident units daily.

Stamps are available for purchase at the General Store/Reception during normal business hours.

Canada Post boxes are available outside the front entrance.

### **NEWSPAPERS**



The local newspaper is available for purchase from the General Store/Reception, Monday-Friday.

Arrangements may also be made to have specific newspapers delivered, at the resident/family's expense.

### **COMPUTER / INTERNET ACCESS**



There is an internet accessible computer available for resident use, located in the Garden Room on the main floor. Arrangements for residents to access this computer can be made with any of the Activity Staff.

### **RESIDENT NEWSLETTERS**

Cassellholme keeps residents and families informed of special events, changes and updates by publishing a quarterly resident newsletter. Newsletters are printed in February, May, August and November and are sent out with the resident monthly billing. Additional copies are available in the General Store as well as in the information rack in the Administration Hall.

### **PURCHASE OF GOODS & SERVICES FROM OTHER PROVIDERS**

Residents are not required to purchase care, services, programs or goods from the licensee. Residents may purchase such things from other providers, subject to any restrictions by the licensee, under the regulations, with respect to the supply of drugs.

Please be advised that Cassellholme has an arms-length relationship with all external services.



## RISK MANAGEMENT

### SAFETY & SECURITY



Risk Management is an important component of Cassellholme's operation. Risk Management activities include all those strategies designed to reduce and control actual or potential risks to the safety, security, welfare and health of residents, staff, volunteers and visitors. Cassellholme is committed to safety and security to provide a hazard-free environment.

As part of Cassellholme's Risk Management and Security Systems, the building is equipped with video surveillance cameras, electronic door locks and a security company patrolling the Home nightly. Several internal committees are tasked with the oversight of ensuring the safe operation of the Home.

All electrical equipment (eg. radios, TV, lamps, etc) brought in by residents and families must be inspected by the maintenance department to ensure that it is CSA Safety Standards approved before being placed in a resident's room. A fluorescent sticker will be attached to the electrical equipment, signed and dated by maintenance that it has been inspected.

### FIRE REGULATIONS



Cassellholme is fully compliant with fire safety requirements to ensure maximum protection in the event of fire. The Home is divided into zones protected by fire doors, which close automatically in the event of a fire. Heat, smoke detectors and sprinklers are located throughout the building.

In conjunction with the North Bay Fire and Emergency Services, Cassellholme has prepared and maintains an Emergency Preparedness Plan which would be implemented in the event of a major crisis.

Fire procedures are tested on a monthly basis. Fire drills are conducted on each of the 3, 8-hour shifts each month, during which time staff, volunteers, visitors and residents practice clearly defined procedures as if there were a real fire. Silent drills are held during the evening hours.

When a drill is in progress, Cassellholme expects that visitors will take part in the drill and follow the instructions that are given by staff.

Upon hearing the fire alarm, a "Code Red" announcement will be heard over the Public Address (P.A.) System. Residents and visitors will remain in resident rooms, behind closed fire doors and await further instructions from staff. If not in a resident room, residents and visitors will be directed to a safe area. Do not use the elevators during this time.

Remember – **Do NOT Panic** – fire drills are part of the routine at Cassellholme to ensure safety. Do not hesitate to ask questions.





## RISK MANAGEMENT

### **RESTRICTED AREAS**

Access is restricted to residents, family members and visitors in the back hall service area, basement, north and center stairwells, utility rooms and housekeeping closets at Cassellholme to ensure that they are not exposed to hazards.

To access Birch West (2nd floor), Birch North (2nd floor) and Willow (3rd floor) please use the West Stairwell, located in the Administration hallway or the front and back elevators.

To access Cherry Lane please use the West Stairwell in the Administration hallway or the front elevator.

Directions to the West Stairwell - turn left after entering the front lobby to the Administration hallway. The West Stairwell is located on the right-hand side beside the Resident Accounts Office.



Cassellholme takes every measure to ensure a secure building for the safety of residents. Please be mindful of confused residents who may try to exit the building.

The purpose of the Roam Alert System is to allow freedom of movement for the resident while ensuring the safety of the resident.

If a resident wearing a bracelet approaches an exit door, a warning alarm will sound. If a resident goes through a main floor exit door, an alarm will sound. The system will identify which door has set off the alarm and which resident has used the door.

Family members, staff and volunteers are trained in the use of the keypad to deactivate it, so that residents may be escorted outside without the alarm sounding.

Cassellholme is equipped with a Security System on exit doors to allow residents, who may wander, to have the freedom of movement while ensuring their safety. If the alarm should sound, staff have been instructed to respond accordingly.

If a resident continues unsafe behaviour, the POA will be contacted and the resident may require transfer to the secure Cherry Lane unit.

Please do not deactivate the Roam Alert System for any other resident that you are not accountable for. This is a crucial element of Cassellholme's safety practices. Any alterations to this practice could significantly jeopardize the safety of residents.



# RISK MANAGEMENT

## WANDERING / UNSAFE EXIT SEEKING

If wandering is identified as a risk behaviour, staff will design a privacy care plan that will direct the staff on strategies to be implemented to reduce the risk of harm and altercations.

The resident/family will receive education about the “Roam Alert” system that is used in Cassellholme. A consent form needs to be signed by the POA.

## SCENT FREE

Cassellholme is committed to the provision of a safe and healthy environment in accordance with the Home’s occupational health and safety policy. Cassellholme will attempt to provide, wherever reasonably possible, a scent-free environment for both residents and staff.



Cassellholme, wherever possible, eliminates the use of, or substitutes products where scents or other products are known to cause health related problems.

Please do not use scented personal care products, perfumes or aftershave. Others may have severe allergies to scented products.

## LATEX FREE



Cassellholme has a no-latex balloons policy. Allergies are caused by the powder in and outside the latex balloons.

This powder picks up the latex molecules and then spreads it around a room where it may be inhaled and possibly cause an individual who has a latex allergy to have a severe reaction.

We ask that families please use the mylar (foil type) balloons. Mylar balloons are made without latex, last weeks longer than regular balloons and can be **reused** until the self-sealing valve fails.



To deflate a mylar balloon, simply remove all ribbons from the balloon. Insert a common drinking straw into the valve until the air starts to come out. Gently squeeze the balloon and let the air out until flat, remove the straw, fold the flat balloon and store until next use.

## FLOWER ARRANGEMENTS



Residents and staff receive flower arrangements as gifts for various special occasions.

Please ensure when ordering or sending flowers to Cassellholme that arrangements are requested to be made with faint fragrances or no fragrances at all.

Please Note: Lilies and baby’s breath flowers are not permitted in Cassellholme.



## RISK MANAGEMENT

### **SMOKING**

Under the SMOKE FREE ONTARIO ACT, Ontario Regulation – 48/06, smoking is not permitted anywhere inside the building or within nine (9) meters of any entrance to the building. The only designated smoking area, for the residents, is the outside patio area in the Oval Garden. Smoking aprons and fire safety equipment are available in the smoking area. Each resident is cautioned to store their smoking equipment safely.

The Tobacco Control Act prohibits individuals from smoking nine (9) meters from any entrance to the building. Residents who smoke in non-designated areas or otherwise smoke unsafely will receive a letter addressing the violation and the consequences of continuing unsafe smoking practices. Smoking privileges will be restricted. Smoking materials will be confiscated and kept at the nursing station.

For residents who are unable to access the designated smoking area safely, Cassellholme will initiate measures to assist the resident in a smoking cessation program.

### **VALUABLES**

Due to fire and safety regulations, resident rooms cannot be locked.

Jewelry and articles of significant value, either monetary or sentimental, should not be brought to Cassellholme. Large amounts of money should be deposited in safekeeping at the General Store/ Reception. Money should not be kept in resident rooms. Cassellholme does not assume responsibility for missing articles or money.

It is recommended that residents arrange for private insurance coverage (tenant) for loss or damage of personal items while at Cassellholme as this type of coverage is not provided by Cassellholme's liability insurance.

All personal items including dentures, eyeglasses, hearing aides, electric razors must be marked with the resident's name where possible. The serial number of equipment should be submitted to be noted on the resident's file. Concerns about missing items need to be identified as soon as possible to the RN Supervisor or RPN on the unit so that staff may assist in tracing the whereabouts.

### **VISITING HOURS**

Visiting hours are between 7 a.m. to 9 p.m. Visitors are encouraged to respect these primary visiting hours.

For the safety of the residents and staff, the doors to Cassellholme will be locked outside of these hours.

Arrangements can be organized with the RN for exceptions to the visiting hours such as caring for a palliative resident.



## SERVICES PROVIDED FREE OF CHARGE

### **Programs and services coordinated through the Home and provided free of charge include:**

1. Prescription drugs and treatments listed in the Drug Benefit Formulary. A dispensing fee of \$2.00 per prescription is charged in particular situations
2. Non-prescription drugs, medication and treatment products, and supplies obtained through Ontario Government Pharmaceutical and Medical Supply Service
3. Some special preparations or medical devices may be obtained from the Ontario Drug Benefit Program with special authorization
4. Nursing and personal care is provided on a 24-hour basis, including the administration of medications, treatments and assistance with activities of daily living. Care is provided by Registered Nurses, Registered Practical Nurses and Personal Support Workers
5. Medical care provided by the Medical Director/delegate or your attending Physician. Attending Physicians must meet the standards and criteria for attending Physicians and have a signed agreement with the Home before providing resident care
6. Equipment for general use include: short-term air mattresses, toilet aids and other self-help aids for the activities of daily living
7. Medical devices, such as catheters and colostomy and ileostomy devices
8. Restorative Therapy & supplies (eating devices)
9. Supplies and equipment for personal hygiene and grooming, including skin care lotions, shampoos, liquid soap, deodorant, toothpaste, toothbrushes, denture cups, toilet tissue, facial tissue, combs, razors, shaving cream. In addition, a selection of disposable products to manage incontinence are provided
10. High intensity equipment and supplies are addressed through a special Ministry application for funding request
11. Social, recreational and physical activities
12. Laundry, including labeling, machine washing, drying and delivery of personal clothing
13. Beds, bed rails, bedside table, chair, bedding and linen, fire resistant mattress and pillows. Residents are encouraged to provide any other furnishings (eg. standup dresser, clock, radio, television, bedspread, pictures, etc.) to personalize their room. Please see approved items list on page 6
14. Standard/basic accommodation
15. Cleaning of accommodations
16. Use of appropriate room for family gatherings



## CASSELLHOLME CONTACTS

### **Cassellholme 705-474-4250**

Chief Executive Officer	Ext 233
Chief Financial Officer	Ext 224
Director of Clinical Services	Ext 243
Director of Human Resources	Ext 295
Director of Operations	Ext 290
Nursing Station - Willow Street (3rd Floor)	Ext 254
Nursing Station - Birch Street & Cherry Lane (2nd Floor)	Ext 222
Nursing Station - Apple Street (1st Floor)	Ext 246
Nursing Station - Maple Street (1st Floor)	Ext 249
RN Supervisor - Apple/Maple (1st Floor)	Ext 216
RN Supervisor - Birch Street & Cherry Lane (2nd Floor)	Ext 217
RN Supervisor - Willow Street (3rd Floor)	Ext 218
After Hours - RN Supervisor	Ext 217
Manager - Infection Control/Health & Safety	Ext 293
Manager - Clinical Services	Ext 232
Pastoral Care Coordinator	Ext 225
Rehab Nurse	Ext 253
Manager – Maintenance	Ext 242
Manager – Support Services (Housekeeping & Laundry)	Ext 286
Manager - Support Services (Nutrition & Food Services)	Ext 274
Supervisor - Support Services (Nutrition & Food Services)	Ext 236
Registered Dietitian	Ext 281
Resident Accounts Coordinator	Ext 227
Resident Services Coordinator	Ext 311
Activity Leader	Ext 341
Activity Leader – Maple & Willow Streets (1st & 3rd Floors)	Ext 228
Activity Leader – Apple, Birch & Cherry Lane (1st & 2nd Floors)	Ext 235
Hairdresser	Ext 269
Activities & Adult Day Program Manager	Ext 223
Reception / General Store	Ext 221



## RESIDENT BILL OF RIGHTS

### **The Fundamental Principle and the Residents' Bill of Rights under the Long-Term Care Homes Act, 2007**

#### **Home: The Fundamental Principle**

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

#### **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:**
1. **Every resident has the right** to be treated with courtesy and respect and in a way that fully recognizes the resident's individuality and respects the resident's dignity.
  2. **Every resident has the right** to be protected from abuse.
  3. **Every resident has the right** not to be neglected by the licensee or staff.
  4. **Every resident has the right** to be properly sheltered, fed, clothed, groomed and cared for in a manner consistent with his or her needs.
  5. **Every resident has the right** to live in a safe and clean environment.
  6. **Every resident has the right** to exercise the rights of a citizen.
  7. **Every resident has the right** to be told who is responsible for and who is providing the resident's direct care.
  8. **Every resident has the right** to be afforded privacy in treatment and in caring for his or her personal needs.
  9. **Every resident has the right** to have his or her participation in decision-making respected.
  10. **Every resident has the right** to keep and display personal possessions, pictures and furnishings in his or her room subject to safety requirements and the rights of other residents.
  11. **Every resident has the right** to,
    - I participate fully in the development, implementation, review and revision of his or her plan of care,
    - II give or refuse consent to any treatment, care or services for which his or her consent is required by law and to be informed of the consequences of giving or refusing consent,
    - III participate fully in making any decision concerning any aspect of his or her care, including any decision concerning his or her admission, discharge or transfer to or from a long-term care home or a secure unit and to obtain an independent opinion with regard to any of those matters, and
    - IV have his or her personal health information within the meaning of the Personal Health Information Protection Act, 2004 kept confidential in accordance with that Act, and to have access to his or her records of personal health information, including his or her plan of care, in accordance with that Act.





## RESIDENT BILL OF RIGHTS

12. **Every resident has the right** to receive care and assistance towards independence based on a restorative care philosophy to maximize independence to the greatest extent possible.
13. **Every resident has the right** not to be restrained, except in the limited circumstances provided for under this Act and subject to the requirements provided for under this Act.
14. **Every resident has the right** to communicate in confidence, receive visitors of his or her choice and consult in private with any person without interference.
15. **Every resident who is dying or who is very ill has the right** to have family and friends present 24 hours per day.
16. **Every resident has the right** to designate a person to receive information concerning any transfer or any hospitalization of the resident and to have that person receive that information immediately.
17. **Every resident has the right** to raise concerns or recommend changes in policies and services on behalf of himself or herself or others to the following persons and organizations without interference and without fear of coercion, discrimination or reprisal, whether directed at the resident or anyone else,
  - I the Residents' Council,
  - II the Family Council,
  - III the licensee, and, if the licensee is a corporation, the directors and officers of the corporation, and, in the case of a home approved under Part VIII, a member of the committee of management for the home under section 132 or of the board of management for the home under section 125 or 129,
  - IV staff members,
  - V government officials,
  - VI any other person inside or outside the long-term care home.
18. **Every resident has the right** to form friendships and relationships and to participate in the life of the long-term care home.
19. **Every resident has the right** to have his or her lifestyle and choices respected.
20. **Every resident has the right** to participate in the Residents' Council.
21. Every resident has the right to meet privately with his or her spouse or another person in a room that assures privacy.
22. **Every resident has the right** to share a room with another resident according to their mutual wishes, if appropriate accommodation is available.
23. **Every resident has the right** to pursue social, cultural, religious, spiritual and other interests, to develop his or her potential and to be given reasonable assistance by the licensee to pursue these interests and to develop his or her potential.



## RESIDENT BILL OF RIGHTS

24. **Every resident has the right** to be informed in writing of any law, rule or policy affecting services provided to the resident and of the procedures for initiating complaints.
25. **Every resident has the right** to manage his or her own financial affairs unless the resident lacks the legal capacity to do so.
26. **Every resident has the right** to be given access to protected outdoor areas in order to enjoy activity unless the physical setting makes this impossible.
27. **Every resident has the right** to have any friend, family member, or other person of importance to the resident attend any meeting with the licensee or the staff of the home. 2007, c. 8, s. 3 (1)

### **Further guide to interpretation**

- (2) Without restricting the generality of the fundamental principle, the following are to be interpreted so as to advance the objective that a resident's rights set out in subsection (1) are respected:
  1. This Act and the regulations.
  2. Any agreement entered into between a licensee and the Crown or an agent of the Crown.
  3. Any agreement entered into between a licensee and a resident or the resident's substitute decision-maker. 2007, c. 8, s. 3 (2)

### **Enforcement by the resident**

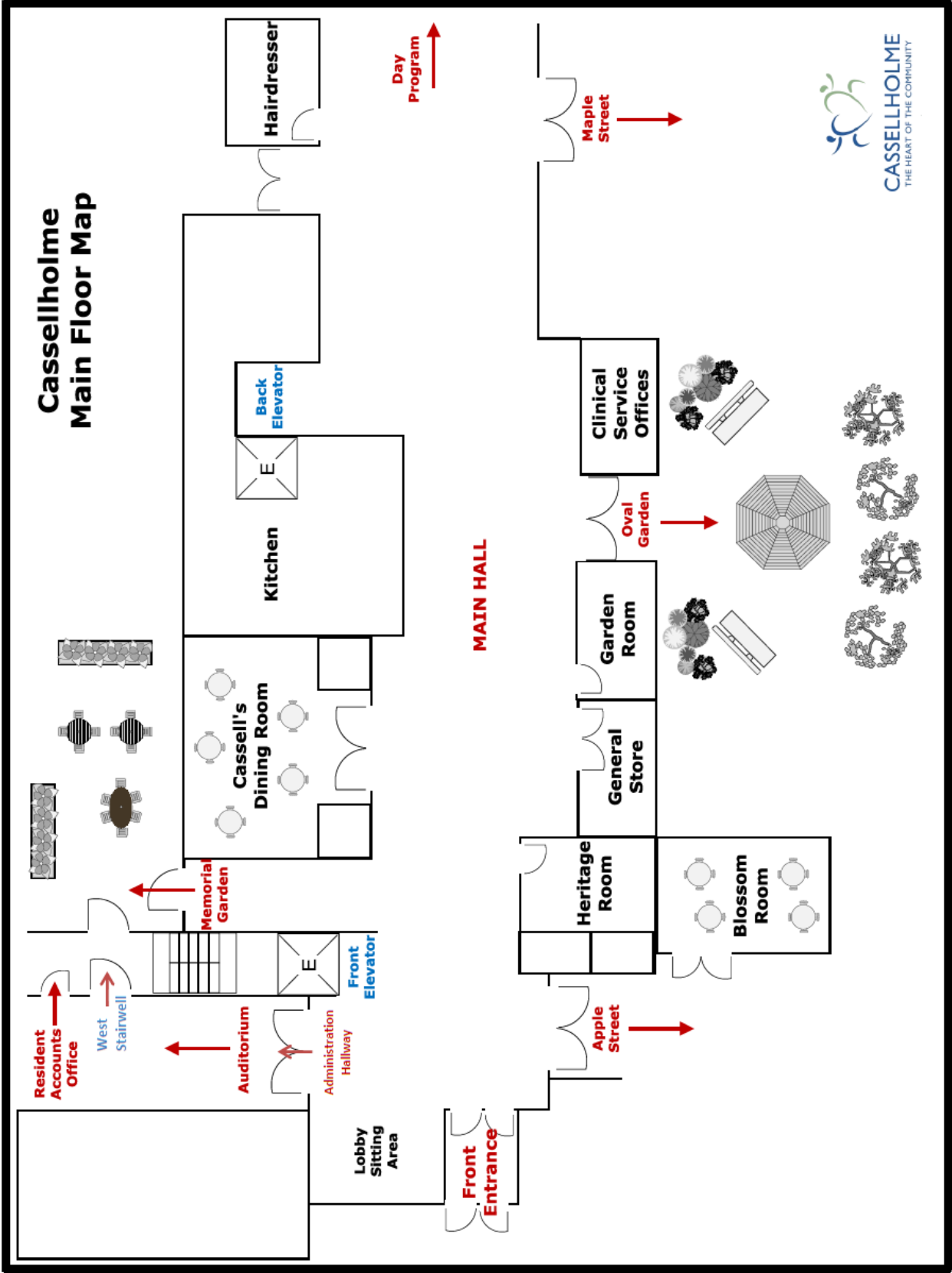
- (3) A resident may enforce the Residents' Bill of Rights against the licensee as though the resident and the licensee had entered into a contract under which the licensee had agreed to fully respect and promote all of the rights set out in the Residents' Bill of Rights. 2007, c. 8, s. 3 (3)

### **Regulations**

- (4) The Lieutenant Governor in Council may make regulations governing how rights set out in the Residents' Bill of Rights shall be respected and promoted by the licensee. 2007, c. 8, s. 3 (4)



# MAP - MAIN FLOOR





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