



# WELCOME! Package

**DufferinOaks**  
Long Term Care Home

151 Centre Street, Shelburne, ON L9V 3R7

519.925.2140

[dufferincounty.ca](http://dufferincounty.ca)



## MISSION STATEMENT

Dufferin Oaks is a non-profit, long-term care home, owned and operated by the Corporation of the County of Dufferin, dedicated to providing a continuum of the highest quality holistic care for both residents and clients in partnership with the community.

## VISION STATEMENT

Dufferin Oaks strives to be a centre of excellence for non-profit, long-term care programs and community services.

## VALUES STATEMENT

At Dufferin Oaks, we provide non-profit, long-term care programs and services based on the following values:

- Dignity and well-being for our residents and clients
- Respect for each individual
- Multi-disciplinary planning for resident and client focused care
- Quality, cost effective, resident and client centred services
- A workplace focused on team effort and personal growth
- A safe, comfortable home like environment

**CONTENTS**

**MISSION STATEMENT** \_\_\_\_\_ **1**

**VISION STATEMENT** \_\_\_\_\_ **1**

**VALUES STATEMENT** \_\_\_\_\_ **1**

**WELCOME to Dufferin Oaks!** \_\_\_\_\_ **4**

**ABOUT US** \_\_\_\_\_ **5**

**STAY CONNECTED** \_\_\_\_\_ **5**

**RESIDENT’S RIGHTS** \_\_\_\_\_ **6**

    Mandatory reporting \_\_\_\_\_ 7

    Whistleblowing Protection \_\_\_\_\_ 7

    PROBLEMS, COMPLAINTS OR SUGGESTIONS \_\_\_\_\_ 7

    MINISTRY’S CONTACT INFORMATION: \_\_\_\_\_ 7

**KEEPING YOU SAFE** \_\_\_\_\_ **8**

    Emergency Plan \_\_\_\_\_ 8

    Fire Protection and Instructions \_\_\_\_\_ 8

    Evacuation Procedures \_\_\_\_\_ 8

    Nurse Call \_\_\_\_\_ 8

    Infection Prevention and Control (IPAC) \_\_\_\_\_ 9

    Restraints \_\_\_\_\_ 9

**WANT TO GET INVOLVED?** \_\_\_\_\_ **9**

    Resident’s Council \_\_\_\_\_ 9

    Family Council \_\_\_\_\_ 9

    Dufferin Oaks Auxiliary \_\_\_\_\_ 10

    Volunteers \_\_\_\_\_ 10

    Family Meetings \_\_\_\_\_ 10

**COMING & GOING:** \_\_\_\_\_ **10**

**VISITORS** \_\_\_\_\_ **10**

    Visiting Hours \_\_\_\_\_ 10

    Meal Tickets \_\_\_\_\_ 10

    Wi-Fi \_\_\_\_\_ 11

<b>GOING OUT</b>	<b>11</b>
Absences (Leaves)	11
<b>ACCOMMODATION FEES</b>	<b>12</b>
WHAT'S INCLUDED?	12
OPTIONAL SERVICES	13
HOW MUCH ARE THE ACCOMMODATION COSTS?	13
GOVERNMENT BENEFITS	14
RATE REDUCTION PROGRAM	14
NOTICE TO CANADIAN & ALLIED VETERANS OR THEIR FAMILIES	15
<b>TRUST ACCOUNT</b>	<b>15</b>
<b>CONTACT INFORMATION</b>	<b>16</b>
<b>POLICIES</b>	<b>18</b>

**WELCOME to Dufferin Oaks!**

Welcome! We are very honoured that you have selected our Home as your new home. This package contains important information to help make your first day, and every day after, as welcoming as possible. We are happy to make it available to any of your loved ones.

The **first day** is a busy one and you will meet a number of new people. Meetings are held with representatives from our Business Office and Direct Care Team.

The **Business Office meeting** will review this package with you and discuss in detail matters relating to accommodation fees, optional services, trust accounts, etc. and obtain your signature on applicable agreements and forms ([see New Admission Meeting section](#)).

The **Direct Care Team meeting** will focus on your care requirements, preferences, and medications. You are encouraged to participate fully in the development, implementation, review, and revision of your plan of care.

You will also be contacted shortly to schedule your first “**Multi-team Care Conference**” with our “resident care team”, which is an interdisciplinary group comprised of representatives from every department. This team meets on an ongoing basis to plan, develop and evaluate your care and services. We will reach out to schedule your Care Conference with the team within six weeks of your move in, and then at least annually after that. Don't feel you have to wait for your Care Conference! Feel free to contact the Unit Coordinator or the Registered Nurse at any time.

Our **Social Worker** will contact you in the next few weeks to see how you're settling in and to review some more information, including the following policies (copies of these are in the Policy section - **POLICIES**):

- Resident Rights Policy
- Resident Responsibilities Policy
- Family Responsibilities and Expectations Policy
- Complaints Policy
- Advocacy Policy
- Abuse Policy

## ABOUT US

Dufferin Oaks is a non-profit Long Term Care Home owned and operated by the County of Dufferin under standards established by the Ontario Ministry of Long-Term Care. As a Municipally owned home, we are governed by the elected officials of Dufferin County Council and the Health and Human Services Committee.

We are a three story home located in the heart of Shelburne at 151 Centre Street. One hundred and sixty (160) residents call Dufferin Oaks home. There are five separate home areas, each with its own nursing station, dining room, activation room, living room and den. In addition to the living areas in each home area, we feature an expansive lounge area just inside our Main Entrance with convenient access to our gift shop and beautiful courtyard.

A virtual tour video available on our website: <https://www.dufferincounty.ca/dufferin-oaks-long-term-care-home/tour-dufferin-oaks>

## STAY CONNECTED

In addition to this package, valuable information and updates are posted by the main elevators. Please note that as part of our accessibility policy, information is available in alternative formats by contacting our Business Office.



We highly recommend signing up for our email notifications to keep updated on what's happening at Dufferin Oaks. You are in charge of your own subscription, so you can subscribe/unsubscribe/update your email any time you like. Feel free to spread the word to other family members and friends – anyone who wants to keep in the loop on what's happening at Dufferin Oaks!

To sign up go to our website:

<https://www.dufferincounty.ca/services/dufferin-oaks-long-term-care-home>

### Dufferin Oaks E-mail Subscription

Keep up to date on activities and items of interest at Dufferin Oaks such as when our current activity calendar and newsletters are available, upcoming events, etc.

The personal information collected on this form is collected pursuant to the Municipal Act and will be used to share information newsletters with the recipient. Questions regarding this collection should be directed to the Clerk at [clerk@dufferincounty.ca](mailto:clerk@dufferincounty.ca)

Email Address \*      First Name \*      Last Name \*

Group \*

- Resident
- Family Member
- Volunteer
- Staff
- Family Council

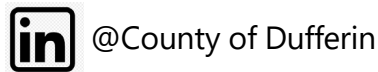
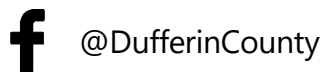
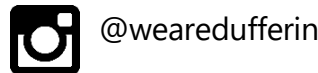
Yes, I give my express consent to receive email messages from Dufferin County.

Thank you for subscribing!

**SUBSCRIBE**

Click on "Dufferin Oaks E-mail Subscription", fill in the info and hit "SUBSCRIBE" and you're done!

You can also follow Dufferin County social media. Follow us for news, updates and more!



### RESIDENT'S RIGHTS

This is your home, and it is essential that your physical, psychological, social, cultural and spiritual needs are met. Dufferin Oaks fully supports the Bill of Rights for all residents at Dufferin Oaks. It's important that everyone (you, your family, volunteers, and staff) recognize and understand these rights. Please review our Resident Rights Policy, in the Policy Section - **POLICIES**, which includes the entire Resident's Bill of Rights.

We recognize that some residents are vulnerable and may be unable to advocate for themselves. As part of our commitment to upholding and protecting the rights of all our residents, we have established an advocacy policy which is available to all residents and their families. See the Policy Section to review our Advocacy Policy - **POLICIES**.

Dufferin Oaks believes that all residents, staff, and volunteers have the right to live and work in an atmosphere and environment that is safe and free from abuse. Abuse is not

tolerated at Dufferin Oaks. However, if abuse does occur, any persons who witness or suspect it are required to intervene to stop the abuse if safe to do so and immediately report it. See the Policy section to review our Abuse Policy - **POLICIES**. Included in this policy is the requirement for Mandatory Reporting and Whistleblowing Protection:



### **Mandatory reporting**

The Fixing Long-Term Care Act (FLCTA), 2021 requires that all individuals (other than residents) who have reasonable grounds to suspect that any of the following has occurred or may occur must immediately report the suspicion to the Ministry of Health and Long-Term Care:

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



### **Whistleblowing Protection**

The Act also stipulates that no person shall retaliate against another person for making such a report or participating in the investigation of a report. This is called "whistle blowing" protection. The home, including any of its staff or Committee of Management, cannot discourage reporting or encourage failure to report.



### **PROBLEMS, COMPLAINTS OR SUGGESTIONS**



Tell us! Please relay your issues and concerns to us. If you have a problem or suggestion - we want to know. Our Complaints Policy (included in the Policy Section - **POLICIES**) provides detailed steps you can follow to lodge a complaint. If you are uncomfortable with these options or are not satisfied with the response you receive, you may forward complaints to:

MINISTRY'S CONTACT INFORMATION:

The Director, Ministry of Health and Long-Term Care  
 Performance Improvement and Compliance Branch  
 1075 Bay Street, 11th floor  
 Toronto ON  
 M5S 2B1  
 Telephone: 1-866-434-0144  
 (7 days a week, 8:30 am – 7:00 pm)



## KEEPING YOU SAFE

### Emergency Plan

The home has developed a detailed emergency plan to deal with fire and other disasters. This plan is tested on a regular basis. Please cooperate and follow instructions during all emergency plan tests.



### Fire Protection and Instructions

We are a non-combustible, sprinklered building with a number of fire protection devices, including smoke and heat detectors, pull stations, automated voice messaging, fire doors, fire blankets and portable fire extinguishers. Fire drills are held monthly. The following are our Fire instructions in case you discover a fire or hear the alarm. These are posted at each pull station and in every resident room.

### FIRE INSTRUCTIONS FOR RESIDENTS AND VISITORS

#### **If You Discover a Fire:**

1. Remove all occupants from the room
2. Close the door
3. Sound the alarm
4. Notify staff of fire location
5. Follow instructions from staff

#### **If You Hear the Alarm:**

1. Residents remain in your room
2. Close windows and doors
3. If not in your room, go to the nearest room/lounge
4. Await instructions from staff



### Evacuation Procedures

Please see the Policy section – **POLICIES** to review our Building Evacuation Procedures Policy.

### Nurse Call

All resident rooms, washrooms and amenity spaces are equipped with a nurse call system. If you need assistance, please pull the call bell cord.

### **Infection Prevention and Control (IPAC)**

Hand hygiene with an alcohol based hand rub is the best method to prevent infections. We perform hand hygiene often and encourage residents and visitors to do the same. Wall mounted hand sanitization stations are provided throughout the home. Occasionally medical outbreaks may be declared throughout the home. During these times additional precautions may be implemented, which would be communicated and signage placed. Remind family members and visitors that they should not visit if they feel unwell.

### **Restraints**

Dufferin Oaks is committed to avoiding the use of restraints. A copy of our complete Restraint and PASD Policy is available upon request.

### **WANT TO GET INVOLVED?**

Whether you live here, have a loved one living here, or just want to help out, there are multiple ways to be an active contributor:

#### **Resident's Council**



By virtue of being a resident of the home, all residents are members of the Resident Council and are encouraged and welcomed to attend and participate in meetings. The Council provides a forum for residents to come together to express their views and concerns about matters affecting their lives. Please see the Resident Council Board near the elevator on the main floor for more information, meeting dates and minutes.



#### **Family Council**

Is a group of families and friends working cooperatively to provide support and advocacy, share experiences and seek solutions to collective challenges. All families and friends are encouraged to participate. Please see the Family Council Board near the elevator on the main floor for more information, meeting dates and minutes. For more information, contact our Social Worker.

**Dufferin Oaks Auxiliary**

The Home's Auxiliary is committed to our residents. They operate the Tuck Shop and raise funds that are then used for enhancing resident quality of life. Family members are welcome to join. Please contact the Program and Support Services Manager for more information.

**Volunteers**

Our volunteers are invaluable to us!! They are involved in many different areas within the home including friendly visiting, activity assistants, auxiliary, palliative care, entertainment, etc. The Dufferin Oaks volunteer team is always recruiting! We welcome any resident's family members and friends. Please contact the Program and Support Services Manager for more information.

**Family Meetings**

Family meetings are typically held in the Spring and Fall. They are intended to provide an opportunity for you and your loved ones to come together with us in an open, informal environment. Everyone is welcome.

**COMING & GOING:****VISITORS****Visiting Hours**

Visitors are welcome at any reasonable time. There are typically no set visiting hours. If you wish to see your visitors other than in your room, there are several sitting rooms where you may find privacy. For security reasons, exterior doors are locked at specific times. An intercom button is located at the front entrance (between the two sets of doors on the left-hand side) to alert staff.

Occasionally, visiting may be restricted due to medical outbreaks. Also, family members and visitors should not visit if they feel unwell. Please see the Policies section to review our Visitor Policy – **POLICIES**.

**Meal Tickets**

Family and visitors are welcome to stay for meals, as space permits. Minimum 24 hours' notice must be provided, on a first come, first served basis, to ensure availability and to allow for set up and preparation. Meal tickets are available for purchase from our front desk reception area or from the 1<sup>st</sup> floor registered nurse. Typical mealtimes are: 8:30 a.m., 12:00 p.m. & 5:00 p.m.

## Wi-Fi

Visitors are invited to use our Wireless Public Internet. The current password will be provided with your admission documents and is posted throughout the building. Please note this password is changed on a regular basis.



How to get connected:

1. Ensure your wireless enabled laptop/mobile device is turned on and has its wireless signal/switch activated
2. Go to the available Wireless Network Connection List, as displayed on your laptop/mobile device
3. Navigate to **Dufferin-Guest** from the list and then select Connect. It will then prompt you for network security key. This is where you will enter the password.
4. Accept the "Terms of Service" agreement.

## GOING OUT

Please contact the nursing staff in advance if you are interested in leaving the Home to determine the process and to ensure things like medication requirements, etc. can be met.



## Absences (Leaves)

You are responsible for continuing to pay for your accommodation while on a leave. The Ministry has set maximum durations for various types of leaves. Exceeding these maximums would result in being discharged and having to go through the application process for possible re-admission.

**Casual Leave:** You are entitled to a casual leave of up to forty-eight (48) hours per week. Casual leaves are permitted through the year in addition to vacation or medical/psychiatric leaves.

**Vacation Leave:** A vacation leave of twenty-one (21) days per calendar year is available to all residents.

**Medical Leave:** Medical leave for purposes of hospitalization is available to all residents for up to thirty (30) days at a time. The use of medical leave does not reduce your available vacation or casual leave.

**Psychiatric Leave:** Psychiatric leave of up to sixty (60) days is available to residents for the purposes of assessment, treatment, and stabilization.

## ACCOMMODATION FEES

### WHAT'S INCLUDED?

#### About Long Term Care in Ontario

In Ontario, the Ministry of Health regulates, inspects, and sets out accommodation fees for all long-term care homes. The Ministry requires that all, long-term care homes provide residents safe, consistent, high-quality, and resident-centered care.



Long-term care homes in Ontario are places where adults can live and receive help with most or all daily activities and access to the following services:

- nursing and personal care on a 24-hour basis
- access to health professionals
- individual care plan (reviewed every 3 months)
- shared dining room, TV rooms and other living areas
- furnishings (e.g., bed and chair)
- meals (including special diets)
- bed linens and laundry
- personal hygiene supplies
- medical/clinical supplies
- housekeeping
- individualized religious and spiritual services
- social and recreational programs
- medical services
- assistance with activities of daily living

In particular, Dufferin Oaks provides the following:

- Pharmacy Services
- Lab Services
- Imaging
- Mobile Ultrasound
- Social Worker
- Behaviour Support
- Physiotherapy, Occupational Therapy & Restorative Care programs
- Nurse Practitioners
- Dietitian

Each home area has an attending physician and Nurse Practitioner, who participates in weekly rounds and is on call 24 hours a day. Note: If you wish to retain your own physician, this can be arranged by having them enter into a contract with us. Please discuss this with

the Director of Care prior to moving in. A unit coordinator is responsible for the overall management of nursing care and services on each floor. A registered nurse is available 24 hours a day.



### OPTIONAL SERVICES

Services not included in accommodation fees are referred to as "Optional Services". Optional services are available for a fee and include items like hairdressing, cable TV, internet, telephone, transportation, etc.

Currently Dufferin Oaks does not directly offer or charge for any Optional Services. We have arranged with some third-party providers to offer these services. You are not obligated to use these providers and may opt for the vendor of your choice (excluding medications, which must be supplied by our contracted pharmacy).

Some of these services can be paid through your trust account. More information on Trust Accounts is provided below and discussed in more detail during the Business Office meeting, including information on the current third-party providers and their fees.



### HOW MUCH ARE THE ACCOMMODATION COSTS?

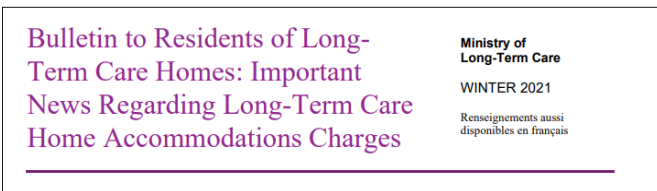
Long-term accommodation costs are set by the Ministry of Long-Term Care and are standard in all long-term care homes across Ontario.

The rates depend on the type of room. At Dufferin Oaks, Private rooms have their own ensuite washroom. Semi-private rooms are similar to private rooms, except that they each have their own entrance to a shared washroom. In Basic rooms, two residents share a room and a washroom, with privacy provided either with a curtain or a wall in the middle of the room.

If you would like a change in the type of room you are in, notify the Director of Care and arrangements will be made for a transfer when a bed becomes available.

A copy of the **current fees** as indicated on the "Ministry Bulletin to Residents of Long-Term

Care Homes: Important News Regarding Long-Term Care Home Accommodations Charges" is provided with your New Admission Documents package. Any time these fees **change**, we will send you a copy of the updated bulletin, 30 days



prior to the change taking effect. A detailed discussion of your specific accommodation fees and payments, along with signing of the Accommodation Agreement and related documents are completed during your meeting with the Business Office.



The Ministry requires that we provide an itemized **statement** of accommodation charges each month. Our current system is unable to provide this statement via email, so it will be mailed to you. If you prefer not to receive this statement every month, please sign the Statement Waiver form. Note: even if you sign this form, you can request a statement, or other account details, at any time by contacting the Business Office.

In addition to the monthly statements, an annual Summary of Accommodation Charges is sent out each spring. There may be **income tax** implications or opportunities relating to these fees. Please consult a tax professional for assistance.

Please note: Dufferin Oaks is a non-profit municipally owned home and does not pay municipal taxes (you may need to know this for income tax purposes).



## GOVERNMENT BENEFITS

There may be government programs available to you. We are pleased to provide information, guidance, and assistance – contact our Resident Accounting Clerk at ext. 5237 at any time.

Depending on your specific situation, the following may be provided and reviewed with you:

- Application for Involuntary Separation
- Application for Guaranteed Income Supplement



## RATE REDUCTION PROGRAM

If you don't have enough income to pay for a basic room (ONLY basic is eligible, NOT private or semi-private), you may be eligible to apply for a subsidy through the Long-Term Care Home Rate Reduction Program. Additional detailed information on the Rate Reduction program is provided in the New Admission Document package and discussed in detail during the Business Office meeting.

If you have questions or wish to submit an application, make sure you have your most recent Notice of Assessment and speak to our Resident Accounting Clerk at ext. 5237. We also encourage you to visit the Ministry website: <https://www.ontario.ca/page/get-help->

[paying-long-term-care](#) or call the Long-Term Care Action Line at 1-866-434-0144 for additional information.

**Deadline Note:** To make sure you get the rate reduction for as many days as possible, be sure you apply **within the first 90 days** of moving into your long-term care home. Also, if you qualify for the program, you need to re-apply annually.



### **NOTICE TO CANADIAN & ALLIED VETERANS OR THEIR FAMILIES**

On behalf of Canadian & Allied Veterans: If you or your loved one are residents of a Long-Term Care Home and are not receiving any help from Veterans Affairs Canada, you may find you have a right to some benefits. Please call 1-866-522-2122 for help.



### **TRUST ACCOUNT**

Upon request, Dufferin Oaks can receive, hold, and administer money for you in a trust account. This trust account can be used to pay for certain goods and services and to allow you access to your personal funds (during Business Office hours, Monday-Friday 0830-1630, excluding holidays). Note: for security reasons, we do not recommend that you keep large amounts of cash on hand or in your room. Itemized statements of your trust account are issued to the designated Billing Contacts quarterly (Jan 31st, Apr 30th, Jul 31st, Oct 31st) or at any time upon request. Deposits into your trust account can be made by cash or cheque, or regular monthly pre-authorized payments.

To authorize payment of invoices from your trust account, we require signed authorization. You can change which items you have authorized for payment through trust at any time by signing a new agreement.

Trust accounts are discussed in detail during the Business Office meeting, and the Resident Trust Account & Petty Cash Trust Money Policy is provided in the Policy section of this package - **POLICIES**. If you have questions relating to trust accounts, please speak to our Resident Accounting Clerk, ext. 5237.



**CONTACT INFORMATION****ADMINISTRATION (BUSINESS OFFICE)**

Hours: 0830-1630 Mon-Fri, excluding holidays

ADMINISTRATOR	BRENDA WAGNER	5233
ASSOCIATE ADMINISTRATOR	DIANE WHITTEN-FRANKS	5239
RECEPTION	MARY TEETER	5230
RESIDENT ACCOUNTING	KARINA SCHMOLL	5237

**NURSING**

DIRECTOR OF CARE	JENNIFER POWER	5244
ASSISTANT DIRECTOR OF CARE	RHONDA WHITE	5261
ASSISTANT DIRECTOR OF CARE	KIM LITTLE	5240
NURSE PRACTITIONER	MARILYN FENDER	5804
NURSE PRACTITIONER	JONATHAN DEWITTE	5805
FIRST FLOOR UNIT COORDINATOR	LINDSAY MCLEOD	5801
SECOND FLOOR UNIT COORDINATOR	REBECCA DUKES	5802
THIRD FLOOR UNIT COORDINATOR	BETH BREADNER	5803
SHELBURNE ORANGEVILLE RN/RPN		5891
MULMUR/MONO RPN		5894
EAST LUTHER/GRAND VALLEY RPN		5892
MELANCTHON/EAST GARAFRAXA RPN		5896
DUFFERIN COUNTY/AMARANTH RPN		5893

**PROGRAM & SUPPORT SERVICES**

MANAGER	ANGIE MATTHEWS	5242
RESTORATIVE CARE COORDINATOR	LINA BENOTTO	5758
FIRST FLOOR ACTIVATION		5257
SECOND FLOOR ACTIVATION		5243
THIRD FLOOR ACTIVATION		5390
PHYSIOTHERAPY/OT		5757
SOCIAL WORKER	JOANNE JORDAN	5260
HAIRDRESSER		5246

**DIETARY**

MANAGER	ERLINDA TALLIM	5236
DIETITIAN	TANJA SCHENKEL	5256

**ENVIRONMENTAL SERVICES**

MANAGER	MEHDI DEGHAN	5263
SUPERVISOR	CHRIS BATCHELOR	5248



**DUFFERIN OAKS LONG TERM CARE HOME**

(519) 925-2140, FAX: (519) 925-5067

151 Centre Street, Shelburne, ON L9V 3R7

[dufferinoaks@dufferincounty.ca](mailto:dufferinoaks@dufferincounty.ca)

**COUNTY OF DUFFERIN (CLERK'S OFFICE)**

(519) 941-2816 EXT. 2503

51 Zina Street, Orangeville, ON L9W 1E5



**The Director, Ministry of Health and Long-Term Care  
Performance Improvement and Compliance Branch**

1075 Bay Street, 11<sup>th</sup> floor

Toronto ON M5S 2B1

**Telephone: 1-866-434-0144**

**(7 days a week, 8:30 am – 7:00 pm)**

## POLICIES



The following policies are included:



- ✓ Building Evacuation Policy
- ✓ Trust Account Policy

These policies have been included and our Social Worker will follow up with you at a later date to review them with you:

- ✓ Residents Rights Policy
- ✓ Residents Responsibilities Policy
- ✓ Family Responsibilities & Expectations Policy
- ✓ Advocacy Policy
- ✓ Abuse Policy
- ✓ Complaints or Concerns Policy
- ✓ Visitor Policy

Note: our policy on Restraints is available upon request.

**COUNTY OF DUFFERIN**

<b><u>TITLE:</u></b> Building Evacuation Procedures-Dufferin Oaks		<b><u>DEPT:</u></b> Dufferin Oaks	
<b><u>EFFECTIVE:</u></b> February 1997		<b><u>MANUAL:</u></b> Emergency Plan	
<b><u>REVISED:</u></b> May 2012		<b><u>SECTION:</u></b> Detailed Implementation Procedures	
		<b><u>POLICY #:</u></b> EM 3-040	
<b><u>AUTHORITY:</u></b> Administrator		<b><u>Administrators Approval:</u></b>	
<b>Review Date &amp; Initials</b>			
<b>H&amp;S Review Date &amp; Initials</b>			

**BUILDING EVACUATION PROCEDURES**

**Alarms/Announcements:** (also see Fire Plan for more detailed instructions)

1. **Fire Alarm - First Stage - Code Red:** (**Do not pull fire alarm during a bomb threat**)  
An automated voice message is paged throughout the building notifying staff of the fire alarm location.
  
2. **Fire Alarm - Second Stage - Code Green:** (**Do not pull fire alarm during a bomb threat**)  
If a fire emergency is found, the fire alarm in that zone will be keyed to second stage and an automated voice message will notify staff of the location of the zone to be evacuated. Those in the fire zone are to evacuate by relocating horizontally or if necessary vertically to a safe area beyond fire doors.
  
3. The entire building can be put into second stage by pushing the **“Total Evac”** at the enunciator panel in the communication room, and an automated announcement will notify staff that a total building evacuation is required. In a non-fire emergency, a page must be made. Announce **“Code Green, evacuate the entire building,** and if necessary any area to avoid (such as in a Bomb Threat)” in order to alert staff of any areas of the building to avoid. Staff responsible for taking the sign in books outside to the Command Center will alert the Charge RN to any evening staff who may be in the MLC. A runner may need to be sent to locate that staff.

**Order of Evacuation:**

1. Relocate or evacuate the residents as instructed to a safe area behind fire doors, outside of building, or to the Mel Lloyd Center as follows:
  - residents in immediate danger
  - ambulatory residents
  - non-ambulatory residents
  
2. If a complete evacuation of the building is required, each department will take the

necessary equipment and supplies needed, including resident census, medical records, emergency kit, etc. The Charge RN is responsible to take a copy of the Resident List and an Emergency Binder.

3. It is important that the first staff member leaving the unit with residents remain outside to account for residents.

### **External Safe Areas:**

1. Once residents and staff are evacuated out of the building, residents should be gathered together in a safe place, generally at the base of the tower from which they were evacuated from the building, unless it is not safe to do so. Staff is to remain at that site with residents for further instructions. Each safe area will keep a complete list of residents, staff and visitors under their care (paper supplies in Emergency Kit), sending a runner or using a companion phone every few minutes to keep the Command Center updated with new arrivals. Do not use companion phones during a Bomb Threat. Another safe area to be considered if necessary is in the MLC or its parking lot.
2. The “**Command Center**” will be established in the front parking lot unless it is not safe to do so. A representative of each Emergency Service and the home will position themselves in this area to share communications. Accounting for all residents and staff will be coordinated in this area. If this area is not available as the Command Center, a paged announcement must be made to indicate the new site so staff is aware.

### **Accounting for Residents/Staff/Visitors:**

1. Ensure all residents, staff and visitors are accounted for. Resident lists are located in each PSW charting area on the water temperature clipboard. Staff and visitor sign in books will be used to account for them.
2. The Command Center is to use the master resident list and check off all residents that have been accounted for at each safe area.
3. After completion of check, a list is made of any residents/staff/visitors, not accounted for. A DOUBLE CHECK must be made with all safe areas for missing people BEFORE commencing search procedure.
4. SEARCH AND RESCUE SHALL BE CONDUCTED ONLY ON THE APPROVAL OF the Fire Chief, Attending Police Officer, Administrator, or designate. Start by searching in the area they were last seen or in the area in which the person has been. Go in pairs, never alone, and with some means of communication (companion phone/walkie talkie, unless during a bomb threat) at all times with safe area and/or command post.

### **Isolation Survival: If you are stranded in the building with no way out:**

1. Stay together and remain calm.
2. Ensure safety of residents and staff to the best of your ability.
3. Try to communicate with outside for help if able to do so safely.
4. Establish an agreed plan of action using whatever means is available to ensure survival of all until help arrives.

<b>TITLE:</b>				<b>POLICY #:</b>		
RESIDENT TRUST ACCOUNT & PETTY CASH TRUST MONEY				AD 4-200		
<b>MANUAL:</b>		<b>SECTION:</b>				
ADMINISTRATION		RESIDENT ACCOUNTING				
<b>EFFECTIVE DATE:</b>		<b>REVISED DATE:</b>		<b>AUTHORITY:</b>		
AUGUST 1982		OCTOBER 2022		ASSOCIATE ADMINISTRATOR		
<b>Initials &amp; Date</b>						

**PURPOSE**

Long-Term Care Homes are required by legislation to establish a trust account for money entrusted to the Home on behalf of a resident and to keep a petty cash for this account. This legislation has further requirements, including the establishment of a written policy and procedures. The purpose of this policy is to ensure that the legislated requirements relating to the trust account and petty cash trust money are met.

**STATEMENT**

Dufferin Oaks will establish and maintain a trust account and petty cash trust account in accordance with applicable legislation.

**PROCEDURE**

1. On admission, residents are provided a copy of this Policy in their information package. They are advised that they may establish a trust account to pay for non-insured goods and services and to allow them access to personal funds.
2. Residents may authorize the home to pay certain bills on their behalf from monies held in trust from their trust account by signing a Trust Account Authorization form.
3. Dufferin Oaks promotes family dealing directly with purchases involving "third party" companies. Should a one-time purchase be required/requested, Dufferin Oaks Administration requires signed authorization of the purchase in question; the resident/SDM to sign the invoice before payment is processed. If the SDM is unavailable to give original signed authorization, Dufferin Oaks will accept an electronic e-mail or scanned document as authorization. Each one-time purchase is handled individually and requires individual authorization. Only residents with Trust Accounts can process one-time purchases under this practice.
4. If there is no trust fund established, a notation will be made on the message centre of the Resident's profile. All invoices will be forwarded to the resident or the Financial Power of Attorney as applicable.
5. The Accounting Clerk for Residents Services maintains a Trust Summary spreadsheet for all residents, which summarizes what services/bills have been authorized for payment. The summary also identifies residents that do not have Trust Accounts. Staff is to refer to this prior to ordering goods

**PROCEDURES**

Step by step instructions for specific procedures for Administration Department tasks are located on Sharepoint: <https://portal.dufferincounty.ca/oaks/admin/Shared Documents/A09 Policies and Procedures>

- or services for a resident to ensure that the purchase has been pre-authorized.
6. Residents can withdraw funds from their trust account at the business office Monday through Friday (excluding statutory holidays) between the hours of 8:30am and 4:30pm. Residents are required to sign a receipt acknowledging that they have received the funds.
  7. Dufferin Oaks will maintain a sufficient amount of cash to meet the daily cash needs of the residents. Three (3) business days notification for cash withdrawals greater than \$200 is encouraged to ensure availability of cash. The resident trust petty cash is replenished monthly or as needed.
  8. Receipts will be provided to the resident/resident representative when they deposit money into their trust account.
  9. All trust funds are placed in a non-interest bearing account.
  10. The home is not permitted to hold more than \$5,000 in a trust fund for any resident at any time and cannot charge for trust fund transactions or administration of the Trust Account. When a Trust account approaches the \$5,000 limit, the resident/SDM will be contacted to ensure the account does not exceed the \$5,000.
  11. The resident/resident representative will be provided with a quarterly itemized trust account statement.
  12. Upon written request, the resident/resident representative may inspect their trust account records at the business office Monday through Friday (excluding statutory holidays) between the hours of 8:30am and 4:30pm.
  13. All trust accounts are audited annually by the municipal auditor.

### **RELATED POLICIES**

Referenced or relevant policies, if applicable:

- Policy AD 3-105 Resident Admission - Information package
- FLCTA s. 286
- Purchase of Services Agreement, Resident Charges and Trust Account Authorization
- Policy AD 4-230 Trust Account Procedures – Payments
- Policy AD 4-240 Trust Account Procedures – Petty Cash

---

### **PROCEDURES**

Step by step instructions for specific procedures for Administration Department tasks are located on Sharepoint:  
<https://portal.dufferincounty.ca/oaks/admin/Shared Documents/A09 Policies and Procedures>

<u>COUNTY OF DUFFERIN</u>				
<b><u>TITLE:</u> Resident Rights</b>		<b><u>DEPT:</u> Dufferin Oaks</b>		
<b><u>EFFECTIVE:</u> 1976</b>		<b><u>MANUAL:</u> General</b>		
<b><u>REVISED:</u> JULY 2022</b>		<b><u>SECTION:</u> Resident Rights and Responsibilities</b>		
		<b><u>POLICY #:</u> GN 3-120</b>		
<b><u>AUTHORITY:</u> Administrator</b>		<b><u>Administrators Approval:</u></b>		
<b>Review Date &amp; Initials</b>				

**POLICY**

Dufferin Oaks fully supports the Residents' Bill of Rights for all residents and that their physical, psychological, social, cultural and spiritual needs be met.

The rights of residents are to be fully respected and promoted through Dufferin Oak's mission, vision and value statements.

Residents' Rights are to be understood and recognized by all residents, family members, volunteers and staff. For cognitively impaired residents these rights must be shared with a Substitute Decision Maker. Orientation and ongoing education ensures that all staff is aware of these rights and their responsibility to ensure Residents' Rights are respected and promoted.

**RESIDENT RIGHTS**

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



## Residents Rights

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.
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 <https://portal.dufferincounty.ca/oaks/Manuals/A09 DO-GENERAL/Residents Rights - Advocacy/RESIDENT RIGHTS 2022.doc>

## Residents Rights

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.
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 themselves 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.

<u>COUNTY OF DUFFERIN</u>				
<b><u>TITLE:</u> Resident Responsibilities</b>		<b><u>DEPT:</u> Dufferin Oaks</b>		
<b><u>EFFECTIVE:</u> 1976</b>		<b><u>MANUAL:</u> General</b>		
<b><u>REVISED:</u> August 2019</b>		<b><u>SECTION:</u> Resident Right &amp; Responsibilities</b>		
		<b><u>POLICY #:</u> GN 3-100</b>		
<b><u>AUTHORITY:</u> Administrator</b>		<b><u>Administrators Approval:</u></b>		
<b>Review Date &amp; Initials</b>				

## **POLICY**

The Residents' Responsibilities have been developed with input from Residents, Family Members, Resident Council, Volunteers and Staff of Dufferin Oaks.

## **PURPOSE**

To ensure residents' responsibilities are clarified.

## **RESPONSIBILITIES**

1. To observe the rules and regulations of the Home in effect at the time of admission and as altered from time to time.
2. To treat their fellow Residents, roommates, table companions and staff with courtesy and consideration and to bear in mind their rights at all times.
3. To observe at all times the no smoking regulations for their own protection and that of other Residents and staff.
4. To participate always, and with promptness, in fire and disaster drills.
5. To use with care all supplies, linens, and furnishings, just as if they were their own.
6. To provide truthful information to the appropriate Home staff and administration concerning all aspects of their mental, physical and financial status, and to keep them informed of any change in these.
7. To consider that other Residents may require more assistance and more urgently than yourself. One cannot always be served first.

8. To report promptly anything you feel needs attention (i.e. safety hazards, security, or anything you feel is not right).
9. To give the unit R.N., or Director of Care, or any of the administrative staff an opportunity to correct a complaint or grievance by speaking to them directly. If you do not get satisfaction within a reasonable time, write or go to an elected officer of the Residents Council for presentation to the Administrator, or a higher authority.
10. To be fair and respectful to your fellow Residents and the Home staff.
11. To participate in as many of the Home activities as you can. They are planned for the benefit and enjoyment of all. Remember that a busy person is generally a happy person and to keep active and interested in what goes on is a sure way to slow down the process of aging. Keep mind and body active.
12. To leave word, in accordance with Home Policy and when you go out and your expected time of return. This is for your own benefit and safety.

**(M: GENERAL/RES IDENT RIGHTS AND RESPONSIBILITIES/RESIDENT RESPONSIBILITIES)**

<u>COUNTY OF DUFFERIN</u>				
<b><u>TITLE:</u></b> Family Responsibilities and Expectations		<b><u>DEPT:</u></b> Dufferin Oaks		
<b><u>EFFECTIVE:</u></b> 2001		<b><u>MANUAL:</u></b> General		
<b><u>REVISED:</u></b> December 2014		<b><u>SECTION:</u></b> Resident Rights and Responsibilities		
		<b><u>POLICY #:</u></b> GN 3-125		
<b><u>AUTHORITY:</u></b> Administrator		<b><u>Administrators Approval:</u></b>		
<b>Review Date &amp; Initials</b>				

Admission to a long term care facility requires a major social and emotional adjustment for the individual and his/her family. In order to maintain the integrity of Resident and family, the responsibilities and expectations of the family/Resident/ Dufferin Oaks relationship need to be recognized. The Resident is the primary decision maker whenever possible. Families must understand that the Residents' wishes take precedent.

a) **RESPONSIBILITIES OF DUFFERIN OAKS TO FAMILY MEMBERS**

- i) Dufferin Oaks will value and respect family members in the following ways:
- By assuring confidentiality and sensitivity during all interactions with families.
  - By identifying key family members who will provide the care team with information about the special needs and interest of the resident.
  - By offering flexible visiting hours.
  - By encouraging and assisting families to take residents out of the facility where appropriate.
  - By ensuring that staff meets with the family on admission to provide introductory orientation and to receive appropriate information.
  - By ensuring that a care team meeting is scheduled within 6 weeks of admission to evaluate/plan care and to provide a more detailed orientation

- for family members.
  - By ensuring that subsequent care meetings are scheduled at least annually.
  - By providing key family members with a full explanation of procedures requiring consent when the resident is unable to give informed consent.
  - By providing ongoing communication with key family members regarding items such as changes in resident's status, medications etc. as appropriate.
- ii) Dufferin Oaks will recognize the special needs of the family as they relate to residents in the following ways:
- By respectful, considerate and timely communication.
  - By providing social and emotional support and community resource referrals as appropriate.
- iii) Dufferin Oaks will encourage and support family information meetings for the purpose of:
- Facilitating communication of issues and concerns of families.
  - Informing and receiving input from families on future plans, activities, challenges, concerns, etc.
- iv) Dufferin Oaks will inform families of new rules and regulations impacting upon residents and families.
- b) **RESPONSIBILITIES OF FAMILIES TO DUFFERIN OAKS**
- i) To cooperate with staff in addressing the needs of residents, designated family members are to be available in person or by phone.
- ii) To provide identifying information about members of the resident's immediate family as follows:
- Names, addresses and phone numbers of family members.
  - Identification of one family member to be contacted in the event of an emergency.
  - Informing staff when family contact will be out of town and whom to call in the event of an emergency.

- Informing staff of important changes in family status.
  - Moves (new addresses and telephone numbers)
  - Death of key family members
  - Joyous events - births, weddings, anniversaries, etc.
- iii) To relate to staff in a considerate, courteous and cooperative manner.
- iv) To respect the staffs' decision that the needs of other residents may be more urgent than the needs of one's own family member.
- v) To speak to staff members about matters of concern so that they can be understood and resolved as soon as possible.

c) **RESPONSIBILITIES OF FAMILIES TO RESIDENTS**

- i) To maintain the resident role in the family unit by:
  - Communicating by frequent visits, phone calls, notes, etc.
  - Remembering significant events: birthdays, holidays, etc.
  - Participating in Home events with the resident.
- ii) To deliver personal items and adequate clothing according to season in the following ways:
  - By checking clothing for wear and repairs and taking responsibility for same.
  - By storing out of season clothing at home.
  - By providing special personal care items not provided by the Home.
  - By personalizing the relative's room with family pictures, and knick knacks that have meaning for the resident.
- iii) To accept financial responsibility for resident spending money, bills and other financial commitments in accordance with the agreement with the Home.
- iv) To observe the rules and regulations of Dufferin Oaks.
- v) To speak with staff regarding matters of concern. If unsure who to speak to, address your concern with the unit RPN who can direct it appropriately.

<u>COUNTY OF DUFFERIN</u>				
<b><u>TITLE:</u></b> Advocacy		<b><u>DEPT:</u></b> Dufferin Oaks		
<b><u>EFFECTIVE:</u></b> June 1994		<b><u>MANUAL:</u></b> General		
<b><u>REVISED:</u></b> May 2015		<b><u>SECTION:</u></b> Resident Rights/advocacy		
		<b><u>POLICY #:</u></b> 3-040		
<b><u>AUTHORITY:</u></b> Administrator		<b><u>Administrators Approval:</u></b>		
<b>Review Date &amp; Initials</b>				

**POLICY**

Dufferin Oaks recognizes that some residents are vulnerable and may be unable to advocate for themselves because of physical or emotional disabilities, unfamiliarity with procedures, inability to deal with those in positions of authority or language barriers.

As part of our philosophy of care, we are committed to upholding and protecting the rights of our residents, by establishing and supporting an effective advocacy policy which is available to all residents and their families.

**PURPOSE**

1. To recognize and support vulnerable residents.
2. To advocate for a resident(s) who cannot or will not speak for themselves.
3. To ensure residents receive a response to any concerns or questions regarding their care, service or environment of the Home.

**PROCEDURE**

**Instructions to Residents**

1. Choose an advocate who can be either yourself or a person or group of persons whom you trust with your interests (i.e. family member, friend, power of attorney, volunteer, staff member or a trained advocate.)
2. Explain your concern or wish.
3. Agree on a time for a response. During that time your advocate should be trying to resolve your concern with an appropriate staff person – social worker, unit coordinator, registered nursing staff, department manager or Home Administrator (see new Residents' Handbook for current staff names.)
4. If you are still not satisfied, or if you are uncomfortable discussing any matter with the Home's staff you may contact the Chief Administrative Officer, County of Dufferin at (519) 941-2816.



5. If you do not wish to be identified, you may submit a written concern anonymously. However if the concern is anonymous, the home will not be able to respond to you directly.
6. If your question/ issue cannot be addressed, please see the complaint policy which is given to all residents on admission and is posted on 1<sup>st</sup> floor by the public elevators on the Information Board.

**RESOURCE OPTIONS:**

The home has retained the services of a social worker to advocate on behalf of residents. Residents, families and staff are encouraged to discuss any concerns with him/her.

In addition, the following options are also available:

**Residents/Family:**

- 1) May approach any staff member and make a request or discuss a concern. If unsure who to approach, you may speak to the RPN on the home area, who can direct your request to the appropriate person as necessary.
- 2) Are encouraged to make suggestions through the Quality Improvement Ideas box at reception.
- 3) May also address concerns or suggestions at Resident Council/Family Council meetings or at meetings such as Food Services, Multi-Team conferences.
- 4) May refer to the home's Complaint Policy which is provided on admission and kept posted by the public elevators on 1<sup>st</sup> floor.

**Staff:**

- 1) Assist a resident by reporting and discussing concern with your supervisor and/or resident's substitute decision maker.
- 2) Use the Quality Improvement Idea box.
- 3) Document concern for advocacy and recommendation.

**EXTERNAL RESOURCES AVAILABLE:**

- 1) Ministry of Health: 1-866-434-0144.
- 2) Advocacy Centre for the Elderly : (416) 598-2656
- 3) Consent & Capacity Board - Ministry of the Attorney General: 1-866-777-7391
- 4) Public Guardian & Trustee: 1-800-366-0335

(M/GENERAL/RES RIGHTS/ADVOCACY)

<u>COUNTY OF DUFFERIN</u>				
<b><u>TITLE:</u></b> Abuse Policy		<b><u>DEPT:</u></b> Dufferin Oaks		
<b><u>EFFECTIVE:</u></b> April 1994		<b><u>MANUAL:</u></b> General		
<b><u>REVISED:</u></b> April 2023		<b><u>SECTION:</u></b> Resident Rights and Responsibilities		
		<b><u>POLICY #:</u></b> GN 3-020		
<b><u>AUTHORITY:</u></b> Administrator		<b><u>Administrators Approval:</u></b>		
<b>Review Date &amp; Initials</b>				

**LEGISLATIVE REFERENCE:**

FLTCA Sections 24-25; Regulations: 103-106

**I. PHILOSOPHY**

Dufferin Oaks believes that all residents, staff and volunteers have the right to live and work in an atmosphere and environment that is safe and free from abuse. We believe in education, support and evaluation of plans of care and services that will ensure this right.

**II. DUFFERIN OAKS POLICY**

**Abuse** of residents is not tolerated at Dufferin Oaks. However, if abuse does occur, **any persons** who witness or suspect it are required to intervene to stop the abuse if safe to do so and immediately report it.

**III. DUFFERIN OAKS RESPONSIBILITIES**

***A. PREVENTION***

1. Elder abuse is prevented by the recognition and respect of the following resident rights:
  - a) Resident Autonomy: The person has the right to determine and control his or her affairs to the full extent of his or her ability.
  - b) Resident Safety: The person has the right to live in safety and security.
  - c) Resident Confidentiality: The person has the right to confidentiality. Information about the person's affairs should be shared with other professionals only as it pertains to providing services to the person or as authorized by the person.
  - d) Resident Dignity and Respect: The person is entitled to have his or her privacy,

- dignity, interests and cultural and religious values respected.
- e) Resident Access to Information: The person has the right to access the information necessary to make meaningful and informed choices.
  - f) Least Restrictive Means: Interventions and service delivery should be the least restrictive of the individual's rights, abilities and personal liberties and the least disruptive of life-style.
2. It is Dufferin Oaks objective to prevent resident abuse by practices which may include but not limited to::
- a) Communicating with and educating persons regarding the home's Resident Abuse Policy and Procedures (see sections Communication and Education below).
  - b) Providing in-services related to understanding and working with the cognitively impaired and frail elderly to staff, volunteers and families
  - c) Promoting staff stress reduction initiatives, such as: educating staff about signs of stress, increasing staff support during stressful times, staff recognition, and social functions, encouraging staff to use community resources when needed, etc.
  - d) Providing staff with the opportunity to change their work assignments if their stress level is escalating.
  - e) Providing opportunities for debriefing, unscheduled breaks and support sessions.
  - f) Ensuring potential employees and adult volunteers 18 years and older provide a current criminal reference check.
  - g) Conducting reference checks for all potential employees or student volunteers less than 18 years of age.
  - h) Ensuring current criminal reference checks are provided for nursing students completing their practical components at Dufferin Oaks.
  - i) Ensuring criminal reference checks are provided for all outside agency workers serving residents at the Home
  - j) Policies are in place regarding employee code of conduct, workplace harassment, violence in the workplace, abuse, reporting of suspected or witnessed abuse, investigation and addressing of abuse.

## ***B. COMMUNICATION***

To ensure that all persons are made aware of Dufferin Oaks **zero-tolerance** policy on resident abuse and to ensure that the policy's expectations are clear, the following will occur:

1. The Abuse Policy will be posted in the main lobby on the family information bulletin board.
2. On admission, a copy of Resident Rights and the Home's abuse policy will be provided. The social worker will discuss with mentally capable residents or family members/substitute decision makers resident rights, the abuse policy, mandatory reporting requirements etc.
3. Some formal agreements/contracts with outside vendors, contractors, etc., may include a statement ensuring compliance with all home policies.

4. The Abuse Policy will be given to outside contractors who have regular direct contact with the residents of the home (e.g. the physiotherapist).
5. The Abuse Policy will be reviewed with students doing placements at the home.

### **C. EDUCATION**

To ensure persons know, understand and adhere to the home's policy and procedures on resident abuse, the following methods will be used to educate and inform:

1. Mandatory education/orientation for all new staff members and volunteers as required by the Fixing Long Term Care Act.
2. Annual education sessions with a review of the abuse policy for all staff as required by the FLTC Act.

***Both orientation and annual training sessions will include:***

- Training on the relationship between power imbalances between staff and residents and potential for neglect and abuse
- Situations that may lead to abuse and neglect and how to avoid such situations

### **D. REPORTING**

1. The Fixing Long Term Care Act, Section 24 requires that all individuals (except residents who may report but are not required to) who have reasonable grounds to suspect that any of the following has occurred or may occur must immediately report the suspicion to the Ministry of Long Term Care.
  - a) Improper or incompetent treatment or care of a resident thus resulted in harm or a risk of harm to the resident.
  - b) Abuse of a resident by anyone or neglect of a resident by the home or staff that resulted in harm or a risk of harm to the resident.
  - c) Unlawful conduct that resulted in harm or a risk of harm to a resident.
  - d) Misuse or misappropriation of a resident's money.
  - e) Misuse or misappropriation of funding provided to the home under the Act.

The home, staff, Committee of Management and professionals providing health, social work or social services will be guilty of an offence if they fail to report.

The Act also states that every person is guilty of an offence who includes in a report to the Director under the above grounds, information the person knows to be false (except incapable residents).

The Act also stipulates that no person shall retaliate against another person for making such a report. It is an offence for the home, including any of its staff or committee of management, to discourage reporting or encourage failure to report or discourage participating in the investigation of a report.

2. The public may call the Long Term Care Action Line (1-866-434-0144) to report or they may report it to a staff member (who must immediately report it to a Registered Nurse or a manager).
3. If Dufferin Oaks knows of or has reasonable grounds to suspect abuse it will:

- a) Immediately report it to the registered nurse or manager who will notify the Ministry of Long Term Care by initiating a online Critical Incident Report Monday to Friday from 8:30- 4:30 excluding holidays or by calling the Ministry's after hours number.
- b) Notify the resident's substitute decision maker and any other person specified by the resident:
  - i. Immediately if abuse or neglect has resulted in a physical injury or pain to the resident or that causes distress to the resident that could potentially be detrimental to the resident's health or well-being.
  - ii. Within 12 hours of becoming aware of any other alleged, suspected or witnessed incident of abuse or neglect of the resident.
- c) Immediately report to the police any alleged, suspected or witnessed incident of abuse or neglect of a resident that may constitute a criminal offence.
- d) Endeavour to protect the identity of the person reporting the abuse as possible. No person who reports incidents of abuse shall be penalized for reporting it unless the person know it to be false (with the exception of incompetent residents.)
- e) Complete the Critical Incident Report within 10 business days of becoming aware of the incident or at an earlier date if required by the Ministry. If the investigation is incomplete at the end of 10 business days, complete an interim report and provide a final report within the specified time by the Ministry (usually 21 days).
- f) Notify the resident and resident's substitute decision maker of the results of the abuse investigation immediately upon the completion of the investigation (unless the Substitute Decision Maker is the alleged perpetrator.)

## **E. INVESTIGATION**

Dufferin Oaks will investigate immediately every report of alleged, suspected or witnessed incident of resident abuse. The home will:

1. Endeavour to protect residents from further harm.
2. Notify a resident's substitute decision maker, or power of attorney for personal care, when abuse of that resident has, or is suspected to have occurred.
3. Conduct an investigation according to the home's procedure GN 3-030.
4. Cooperate fully with any investigation done by the Ministry Long-Term Care and/or police.
5. Submit a final report to the Ministry of Long-Term Care outlining the findings of the investigation and the corrective action taken.
6. Notify the resident and resident's substitute decision maker of the results of the abuse investigation immediately upon the completion of the investigation

## **F. CORRECTIVE ACTION/CONSEQUENCES**

1. Corrective action/consequences will vary according to the outcome of an investigation.
2. Corrective action/consequences will be determined in consultation with the Administrator or delegate, and the County Human Resources Manager as appropriate.
3. Corrective action/consequences may be up to and including dismissal, termination of placement, restriction of visitor privileges, banning of service provider employee and/or termination of contract as applicable.
4. See abuse investigation procedure GN 3-030.

**G. SUPPORT FOR THE PERSONS INVOLVED**

The social worker or other staff may provide counselling and support to individuals involved as appropriate. Additional supports may be accessed through Community Mental Health Association.

**G. EVALUATION**

1. All incidents of abuse will be analyzed promptly to determine what interventions could have prevented the incident and to implement interventions to prevent a reoccurrence in the future.
2. The Home's Quality Services Committee will review incidents of abuse quarterly and complete a detailed review of the home's policy annually to assess its quality and effectiveness. This review will be documented and changes/improvements required implemented promptly.

**APPENDIX A - DEFINITIONS**

In this policy, the following words or terms have the following meanings:

**Definition: "Zero-Tolerance Policy"**

A "Zero-Tolerance Policy" means a policy that:

- Builds awareness of and educates to achieve the goal of elimination of abuse
- Allows no exceptions
- Tolerates no abusive behaviour
- Requires strict compliance and enforcement

"Zero-Tolerance" means within this policy, that Dufferin Oaks shall:

- Uphold the right of the residents to be treated with dignity and respect within their home, and to live free from abuse and neglect
- Neither abuse, nor allow the abuse of any resident in the home by staff or volunteers, nor condone the abuse of any resident by any other person(s) at the home
- Provide information and education regarding abuse and the prevention of abuse
- Treat every allegation of abuse as a serious matter
- Investigate every allegation of abuse
- Take corrective action, including sanctions or penalties against those who have committed abuse against a resident
- Report to the Ministry of Long-Term Care every suspected or confirmed incident of abuse
- Make effort to eliminate abuse through the quality and risk management programs

**Definition: "Abuse"**

“**Abuse**” of a resident means any action or inaction, misuse of power and/or betrayal of trust or respect by a person against a resident, that the person knew or ought to have known, would cause (or could reasonable be expected to cause) harm to the resident’s health, safety or well-being.

Abuse includes, but is not limited to:

- Physical Abuse
- Sexual Abuse and Sexual Assault
- Emotional Abuse
- Verbal Abuse
- Financial Abuse
- Exploitation of a Resident’s Property or Person
- Neglect
- Prohibited Use of Restraints
- Measures Used to Discipline a Resident

**Definition: “Physical Abuse”**

“**Physical Abuse**” means the use of physical force by a person against a resident that is contrary to the resident’s health, safety or well being, and that injures, or inflicts pain or discomfort, on the resident.

Physical abuse may include, but is not limited to:

- Assault
- Forced confinement
- Slapping
- Pushing
- Pinching
- Beating
- Twisting
- Shaking
- Burning
- Providing care to residents with excessive force (more than necessary to provide the care)
- Administering or withholding a medication for an inappropriate purpose
- Physical force applied to a resident by another resident that causes injury

**Definition: “Assault”**

“**Assault**” is defined as:

- Attempting to apply force to a resident, or threatening (by act or gesture) to apply force to a resident, in such a way that the resident can “reasonably” expect the threat or action to be carried out
- Intentionally applying excessive force to the resident, directly or indirectly, without the resident’s consent
- A physical attack on the resident

**Definition: “Sexual Abuse”**

“**Sexual Abuse**” of a resident may include but is not limited to:

- Any non-consensual sexual intercourse or other form of non-consensual physical sexual relations, with a resident
- Any non-consensual touching of a resident that is of a sexual nature. This does not include touching, remarks or behaviour of a clinical nature that is appropriate to the provision of care
- Behaviour or remarks of a sexual nature towards the resident that are unwanted by the resident, including remarks that are sexually demeaning, humiliating, exploitative or derogatory
- Any situation in which a staff member begins a sexual relationship with a resident
- Sexual assault of the resident

**Definition: “Sexual Assault”**

“**Sexual Assault**” of a resident is an assault that is committed under the circumstances of a sexual nature, such that the sexual integrity of the resident is violated against their will

**Definition: “Emotional Abuse” may include but is not limited to:**

- (a) any threatening, insulting, intimidating or humiliating gestures, actions, behaviour or remarks, including imposed social isolation, shunning, ignoring, lack of acknowledgement or infantilization that are performed by anyone other than a resident, or
- (b) any threatening or intimidating gestures, actions, behaviour or remarks by a resident that causes alarm or fear to another resident where the resident performing the gestures, actions, behaviour or remarks understands and appreciates their consequences.

**Definition: “Verbal Abuse”**

“**Verbal Abuse**” is verbal communication to a resident that is threatening/intimidating or degrades a residents self worth/dignity that may include, but is not limited to:

- Swearing at a resident
- Name-calling, cultural or racial slurs
- Threats or insults
- Shouting at a resident
- Belittling, degrading, infantilization
- Sarcasm, taunting
- Intimidation

**Definition: “Financial Abuse”**

“**Financial Abuse**” means any misappropriation of misuse of a resident’s finances or property. Financial abuse may include, but is not limited to:

- Theft or unlawfully withholding a resident’s money, pension, securities etc.
- Fraud, forgery and extortion
- Using Power of Attorney, Substitute Decision-Making authority, or a family relationship in a manner that is detrimental to the resident or the resident’s care and/or personal well being.

**Definition: “Neglect”**



“**Neglect**” means the failure to provide the care and assistance required for the health, safety or well being of a resident. “Neglect” includes a pattern of inaction that jeopardizes the health or safety of one or more residents.

Failure to report suspected or witnessed abuse may also be deemed to be neglect.

**Definition: “Prohibited Uses of Restraints”**

“**Prohibited Uses of Restraints**” means:

- Any use of a restraint that is prohibited by the Ministry’s Least-Restraints Policy, including the use of a restraint on a resident for convenience or to punish or discipline a resident, or
- Any use of a restraint that is not in accordance with the Ministry’s Least-Restraint Policy.

**Definition: “Disciplinary Measures”**

“**Disciplinary Measures**” means any measures taken to discipline or punish a resident

**Definition: “Staff”**

“**Staff**” of Dufferin Oaks Home for Seniors includes, for the purposes of this policy, except where otherwise indicated, any permanent and contract, full-time and part-time:

- Employees
- Physicians
- Agency staff
- Contracted health-care professions
- Paid trainees
- Students under clinical placements

This definition does not imply or create an employer/employee relationship where none exists, and it is used solely in the context of this policy to clarify that abuse will not be tolerated from any source.

**Definition: “Substitute Decision-Maker”**

“**Substitute Decision-Maker**” (SDM), in relation to a resident, means, depending on the context, one or more of the following:

- The person who would be authorized under the *Health Care Consent Act*, to give or refuse consent to a treatment on behalf of the resident, if the resident were incapable of making decisions with respect to the treatment under the Act,
- The person who would be authorized under the *Health Care Consent Act*, to make a decision concerning a personal assistance service on behalf of the resident, if the resident were incapable of making decisions with respect to the personal assistance service under the Act,
- The person who is authorized under the *Substitute Decisions Act* to make decisions concerning the resident’s property, or
- The person who is authorized under the *Substitute Decisions Act* to make a decision concerning the resident’s personal care, if the resident is incapable of making the decision.

**Definition: “Any/All Persons”**

**“Any/All Persons”** means Dufferin Oaks residents, staff, volunteers, family members, substitute decision makers, and any other persons entering the home.

**Definition: “Power Imbalance”**

**“Power Imbalance”** means:

- Residents have less power than staff as they are dependent on staff for their care and safety.
- By the nature of this relationship, this makes the resident vulnerable to the power and control the staff has over the resident’s life.
- Staff are to be aware of this power imbalance and make every effort to avoid misuse of power.
- Any misuse of the power imbalance may be considered abuse.

**M/General/Resident Rights - Advocacy/Abuse Policy 2023**

<b><u>COUNTY OF DUFFERIN</u></b>					
<b><u>TITLE:</u>      Complaints</b>			<b><u>DEPT:</u>      Dufferin Oaks</b>		
<b><u>EFFECTIVE:</u>      January 1993</b>			<b><u>MANUAL:</u>      General</b>		
<b><u>REVISED:</u>      May 2022</b>			<b><u>SECTION:</u>      Resident Rights and Responsibilities</b>		
			<b><u>POLICY #:</u>      GN 3-160</b>		
<b><u>AUTHORITY:</u>      Administrator</b>			<b><u>Administrators Approval:</u></b>		
<b>Review Date &amp; Initials</b>					

**LEGISLATIVE REFERENCE:**

FLTCH Act: Sections 21- 23, Regulations: 100 - 103

**POLICY**

On admission, each resident/representative is informed in writing of the process for lodging complaints regarding the home. The complaint process will also be posted on the Family Information Board.

**PROCEDURE FOR LODGING A COMPLAINT**

1. There are a variety of ways in which a complaint can be heard. The following methods are encouraged and communicated to residents/representatives:
  - Discussing the issue directly with a staff member
  - Discussing the issue with a manager
  - Discussing the issue with the Residents’ Council
  - Discussing the issue with the Administrator
  - Completing a Client Issue Form – located at reception
  - Contacting the Long Term Care Family Support and Action Line toll free at 1-866-434-0144
  - Sending a letter, by mail to:
    - Director
    - Long Term Care Inspections Branch

Long Term Care Operations Division  
119 King St W. 11<sup>th</sup> Floor  
Hamilton, ON L8P 4Y7

- Contacting the Patient Ombudsman by calling toll free 1-888-321-0339

**WHISTLE BLOWING PROTECTION:** The Fixing Long Term Care Homes Act provides protection for people who report concerns. This protection is called whistle blowing protection. It guarantees that there shall be no threat or retaliation, in any form, against anyone who makes a complaint or who participates in the investigation of a complaint.

### **RESPONDING TO COMPLAINTS**

1. All staff is to accept complaints via telephone, face to face contact, card/letter, e-mail, or other delivery methods.
2. Recipients of the complaint will respond immediately to address the issue if possible. If the person receiving the complaint is not able to address the issue, they will notify the appropriate manager providing the following information:
  - a) Resident's name
  - b) Family member's name
  - c) Date and time of complaint
  - d) Nature of complaint
  - e) Contact information of the complainant, if available
3. The Manager will:
  - a) Investigate and resolve the complaint where possible, and provide a response within 10 business days of the receipt of the complaint. Where the complaint alleges harm or risk of harm including, but not limited to, physical harm, to one or more residents, the investigation shall be commenced immediately.
  - b) Provide a response to complainant within 10 business days. For those complaints that cannot be investigated and resolved within 10 business days, an acknowledgement of receipt of the complaint shall be provided within 10 business days including the date by which the complainants can reasonably expect a resolution. A follow-up response shall be provided as soon as possible in these circumstances. Anonymous complaints cannot

be replied to.

- c) The response provided to a person who made a complaint shall include,
    - i. the Ministry's toll-free telephone number for making complaints about homes and its hours of service and contact information for the patient ombudsman under the *Excellent Care for All Act, 2010*,
    - ii. an explanation of,
      - A. what the licensee has done to resolve the complaint, or
      - B. that the licensee believes the complaint to be unfounded, together with the reasons for the belief, and
    - iii. if the licensee was required to immediately forward the complaint to the Director under clause 26 (1) (c) of the Act, confirmation that the licensee did so.
  - d) Document and inform Administrator of action taken.
  - e) Log complaint on the Complaint Log on the Management Drive/M04 Complaint Log/. ***Verbal concerns that can be resolved within 24 hours need not be entered in the Complaint log and a written response is not required.***
4. If the resident/representative is not satisfied with the response provided:
- a) The manager will refer the complaint and response to the Administrator or designate for prompt follow-up.
  - b) The Administrator or designate will review all information with manager and involved parties.
  - c) A resident/family interview may be arranged.
  - d) The Administrator or designate will provide a response within 10 business days of notification of resident/representative's dissatisfaction with manager's response.
  - e) Update Complaint Log on the Management Drive/M04 Complaint Log/.

**Reporting to the Ministry by the Home**

All complaints that alleges harm or risk of harm, including, but not limited to, physical harm, to one or more residents shall be reported immediately to the Ministry as per clause 26 of the Act. Complaints of this nature shall be reported through the Critical Incident Reporting Portal.

Every licensee of a long-term care home who receives a written complaint with respect to a matter that the licensee reports or reported to the Director under section 28 of the Act shall submit a copy of the complaint to the Director along with a written report documenting the response the licensee made to the complainant under subsection 108 (1).

**Analysis of Trends**

1. The Administrator or designate will review and analyze the complaint log quarterly.
2. The results of the review are reported to the home Quality Services Committee and considered in determining what improvements in the home are required.

**(M: GENERAL/RES-RIGHTS/COMPLAINTS)**

<b>COUNTY OF DUFFERIN</b>				
<b>TITLE:</b> Visitor Policy		<b>DEPT:</b> Dufferin Oaks		
<b>EFFECTIVE:</b> June 2021		<b>MANUAL:</b> General		
<b>REVISED:</b> March 2023		<b>SECTION:</b> Residents Rights and Responsibilities		
		<b>POLICY #:</b> GN 3 - 200		
<b>AUTHORITY:</b> Administrator		<b>Administrators Approval:</b>		
<b>Review Date &amp; Initials</b>				

## **POLICY**

The Fixing Long Term Care Homes Act (FLTCA) supports the resident’s right to receive visitors of their choice and to be able to consult in private with any person without interference. The purpose of this policy is to provide guidance and direction for staff in supporting residents with visits from family and friends while maintaining the safety of the other residents and staff in the Home.

Residents will be supported to receive and have visits from family and friends of their choosing limited only during outbreak situations where, in the opinion Public Health, limiting visits in the Home is in the best interest of the residents for a duration determined by the outbreak protocols.

## **DEFINITIONS**

**Essential Caregiver**- FLTCHA, 2021, s. 267 (4) definition of an essential visitor is a person who:

- Is a caregiver or support worker who visits the Home to provide support to the critical operations of the Home or to provide services to residents;
- A person visiting a very ill resident for compassionate reasons, including but not limited to, hospice services or end of life care

- A government inspector with a statutory right to enter a LTC Home to carry out their duties

**General Visitor** - Any other member of the public who is visiting the resident for social purposes

**Those Not Considered Visitors** - LTC home staff, volunteers and placement students are not considered visitors as their access to the home is determined by Dufferin Oaks.

## **PROCEDURE**

### **VISITORS DURING NORMAL OPERATIONS**

- a) Visitors must adhere to any current surveillance screening and testing in place at the time of the visit as required by the Ministry of Long Term Care, Medical Officer of Health or local Public Health unit;
- b) All visitors and essential caregivers entering the Home must comply with any requirements for Personal Protective Equipment deemed necessary (ie – masks, face shields etc)
- c) Typical visitation hours are from 0900 am to 2100 hrs. Visitors outside of those times are permitted but should make every attempt to respect resident meal times and when residents retire at night, especially when a resident is in shared accommodations.
- c) There is no limitations on visits for end of life residents, but considerations are required to respect the residents sleep and privacy needs when in shared accommodations.
- e) All visitors must sign in and out of the Home and include, their name, contact information, the date and time of the visit and the name of the resident they visited.
- f) All visitors are expected to adhere to the Visitor Guidelines when visiting within the Home.

### **VISITORS DURING OUTBREAK**

- a) During an outbreak of a communicable disease or an outbreak of a disease of public health significance, an epidemic or a pandemic, general visitors may be restricted
- b) Essential Caregivers will be permitted to visit the resident to which the caregiver designation is assigned except where applicable directives, orders, guidance advice or recommendations from the Chief Medical Officer of Health or a medical officer of health appointed under the Health Protection and Promotion Act advises otherwise;
- c) During an outbreak, visiting hours may be adjusted, except in end-of-life situations;
- d) All Infection Prevention and Control guidelines will be followed by anyone entering the Home



## DESIGNATION OF ESSENTIAL CAREGIVERS

- Caregivers must be at least 18 years of age.
- Residents or their Substitute Decision Makers (SDM) are able to designate as many Essential Caregivers as they wish. The designation is to be made in writing to the Home by emailing the Manager of Program Support Services or Designate. A list of caregiver designations will be readily accessible to staff. The decision to designate an individual as a caregiver is entirely the remit of the resident and/or their substitute decision-maker and not the home.
- A resident and/or their substitute decision-maker may change a designation in response to a change in the resident's care needs that are reflected in the plan of care or on the availability of a designated caregiver, either temporary (e.g., illness) or permanent.
- Examples of caregivers include family members who provide meaningful connection, a privately hired caregiver, paid companions and translators.

**Education** The following topics will be required components of the training and education of Essential Caregivers:

- Video entitled How to Wear a Medical Mask  
<https://youtu.be/adB8RW4I3o4>
- Video entitled Just Clean Your Hands – Public Health Ontario  
<https://youtu.be/mcSi1a9pldk>
- The Chain of Infection  
<https://youtu.be/IBX3jj2uUjo>
- Basic Principles for Feeding with Dysphagia  
<https://youtu.be/NX-v3ES0FO>

## PROCESS FOR RESCINDING VISITING PRIVILEGES

a) Unacceptable behaviour on the part of a visitor, such as loud and disruptive behaviour, verbal abuse, physical abuse, violence, interference with the care of a resident and infringement of the visitor guidelines for visitors will not be tolerated, and may result in visiting restrictions, visiting prohibition, or legal action.

b) Visits may be ended at the discretion of the Home's Management Team after repeated non-adherence provided the Home has explained all applicable requirements and expectations to the visitor

c) Any decision to temporarily prohibit a visitor will be made after all other reasonable efforts to maintain safety during visits has been exhausted. The decision to prohibit visitation will be communicated to the visitor in writing and a record will be maintained at the Home including length of restriction and requirements that need to be met before resuming visits.

(M/General/Residents Rights/Visiting Policy)

General visitors younger than 14 years of age should be accompanied by an adult and must be able to follow all applicable infection prevention and control (IPAC) precautions that are in place at the Home.

Dufferin Oaks reserves the right to limit the number of visitors or visits at any time based on the spread of COVID-19 in the community and any risk factors that community transmission may present to the residents of the Home.

## **6.0 Screening Requirements**

ALL types of visitors will be subject to these screening requirements:

- Visitors will be actively screened on entry for symptoms and exposures for COVID-19, and will not be admitted if they do not pass the screening.
- Visitors will also be required to attest that they are not experiencing any of the typical or atypical symptoms of COVID-19

In addition, there are additional screening requirements for certain types of visitors:

**6.1 Support Workers** are required to pass active screening and receive a negative result from a rapid test as per the posted schedule of the home.

**6.2 Caregivers** are required to pass active screening and receive a negative result from a rapid test as per the posted schedule of the home.

**6.3 General Visitors** are required to pass active screening but are not required to be rapid tested for outdoor visits. General Visitors who are permitted to visit a resident indoors are required to receive a negative result from a rapid test prior to visiting the resident.

## **7.0 Personal Protective Equipment (PPE) and Education**

All Visitors will wear appropriate PPE for the circumstance of their visit and will participate in the required education as per this policy. At a minimum, appropriate PPE for a visitor is a surgical/procedural mask for the duration of the visit and eye protection (face shield or goggles) if they are in direct contact with a resident and not able to maintain a minimum six foot distance (if partially immunized or unimmunized).

**7.1 Essential Visitors** The Home is responsible for providing surgical/procedure masks, gloves, gowns and eye protection (i.e. face shield or goggles) for essential visitors as required in Directive #3.

**7.2 General Visitors** Homes are responsible for providing surgical/procedure masks for general visitors for indoor visits as required in Directive #3.

**Important note:** If at any time, the Home is not able to provide the appropriate PPE to a visitor, then the visitor will not be able to enter the Home.

**7.3 Education** The following topics will be required components of the training and education of caregivers and general visitors:

- Video entitled How to Wear a Medical Mask  
<https://youtu.be/adB8RW4I3o4>
- Video entitled Just Clean Your Hands – Public Health Ontario  
<https://youtu.be/mcSi1a9pldk>
- The Chain of Infection  
<https://youtu.be/IBX3jj2uUjo>
- Basic Principles for Feeding with Dysphagia  
<https://youtu.be/NX-v3ES0FO>

## 8.0 Managing Safe Visits

### 8.1 Caregivers

If at any time, the Home cannot accommodate the number of caregivers requesting access, the Home will reserve the right to put a schedule in place for caregivers in order to provide fair and equitable access to all those who are requesting visits. Caregivers will be notified in advance of any scheduling change to their visits and will be expected to comply with the changes so that everyone has a chance to visit. The Home will not place unreasonable limits on the number of caregivers on any given day, but these limits may change from time to time based on the rate of community transmission and spread for the safety of the residents and staff.

### 8.2 General Visitors

Dufferin Oaks has the discretion to require general visitors to:

- Schedule their visits in advance for indoor (if permitted) and/or outdoor visits.
- Limit the length of the visit; however, each visit will be at least 30 minutes long.

- Limit the frequency of visits; however, The Home will allow at least one visit per resident per week.

When scheduling visits, Dufferin Oaks will consider the:

- Needs of residents, including their clinical and emotional well-being.
- The total number of visitors in the home.

**8.3 Supervising Visits** The Home is not required to supervise visits however, it is the policy of the Home to have the discretion to supervise visits in order to manage health and safety during visits (e.g., monitoring the flow of visitors to ensure sufficient physical distancing can be maintained, supporting residents during the visit, etc.). Where the Home needs to supervise visits, the supervision will be implemented in a manner that respects the resident's right to communicate in confidence, receive visitors of their choice and consult in private with any person without interference under paragraph 14 of subsection 3(1) of the LTCHA.

#### **8.4 Types of Visits**

- **General** visits (when permitted) will take place in the Resident's room or outdoors. General visits are scheduled by accessing the online booking system at [www.dufferincounty.ca](http://www.dufferincounty.ca). Visitors will enter through the main entrance of the Home and be screened on arrival.
- **Caregiver** visits will take place in the resident's home area in the resident's room and dining area. The courtyard area can also be visited during times that outdoor visits are not occurring. Fully immunized caregivers may assist in the Dining Room and attend activities

### **9.0 Non-adherence by Visitors**

**9.1 Responding to Non-Adherence by Visitors** There will be a process in place for responding to non-adherence by visitors in the Home and it is made in alignment with Directive #3 and this policy. The Home will first:

- Provide strategies for supporting visitors in understanding and adhering to the Home's visitor policy.
- Recognize visits are critical to supporting a resident's care needs and emotional well-being.
- Consider the impact of discontinuing visits on the resident's clinical and emotional well-being.
- Reflect and ensure it is proportionate to the severity of the non-adherence.

Where the Home has previously ended a visit by, or temporarily prohibited a visitor, they will specify any education/ training the visitor may need to complete before visiting

the home again in order to protect residents, staff and visitors in the home from the risk of COVID-19.

The Home will consult with the Residents' Council and the Family Council in the Home on procedures for addressing non-adherence by visitors.

**9.2 Ending a Visit:** The Home has the discretion to end a visit by any visitor who repeatedly fails to adhere to the home's visitor policy, provided:

- The home has explained the applicable requirement(s) to the visitor;
- The visitor has the resources to adhere to the requirement(s) (e.g., there is sufficient space to physically distance, the home has supplied the PPE and demonstrated how to correctly put on PPE, etc.); and
- The visitor has been given sufficient time to adhere to the requirement(s).

Dufferin Oaks will document all instances where they have ended a visit due to non-adherence on the resident chart.

**9.3 Temporarily Prohibiting a Visitor** Dufferin Oaks has the discretion to temporarily prohibit a visitor in response to repeated and flagrant non-adherence with the home's visitor policy. In exercising this discretion, Dufferin Oaks will consider whether the non-adherence:

- Can be resolved successfully by explaining and demonstrating how the visitor can adhere to the requirements.
- Is within requirements that align with instruction in Directive #3 and guidance in this policy.
- Negatively impacts the health and safety of residents, staff and other visitors in the home.
- Is demonstrated continuously by the visitor over multiple visits.
- Is by a visitor whose previous visits have been ended by the home.

Any decision to temporarily prohibit a visitor should:

- Be made only after all other reasonable efforts to maintain safety during visits have been exhausted;
- Stipulate a reasonable length of the prohibition;
- Clearly identify what requirements the visitor should meet before visits may be resumed (e.g. reviewing the home's visitor policy, reviewing specific Public Health Ontario resources, etc.); and,

- Be documented by the home. Where the home has temporarily prohibited a caregiver, the resident and/or their substitute decision-maker may need to designate an alternate individual as caregiver to help meet the resident's care needs.

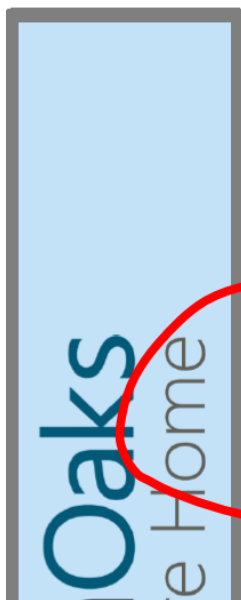
## **10.0 Accessibility Considerations**

Homes are required to meet all applicable laws such as the *Accessibility for Ontarians Disability Act, 2005*. <https://www.ontario.ca/laws/statute/05a11>

**NEW ADMISSION – BUSINESS OFFICE MEETING**

During the New Admission Meeting with the Business Office we:

- review this Welcome! package with you, including detailed discussion on:
  - ✓ Accommodation fees
  - ✓ Rate Reduction program (Basic accommodation rooms only)
  - ✓ Payment arrangements
  - ✓ Optional services and third-party providers
  - ✓ Setting up a trust account
- collect items from the “What to Bring With You” list we sent to you when we heard you were moving in:

**What to bring with you:**

For security, please ask your loved ones to take care of your **valuables**, rather than bringing them with you.

**Note about labelling:** We will label everything for you when you get here, including your clothing.

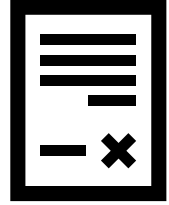
- Health Card**
- Completed Family Information Assessment Form**
- Powers of Attorney** for both Personal Care and Property, if applicable.
- Void Cheque:** for setting up Pre-Authorized Payment.
- Income Tax Notice of Assessment (BASIC Accommodation rooms only):** A government subsidy may be available to individuals admitting to Basic Accommodation. Bringing your most recent Notice of Assessment will help speed up this application process. More information on the Rate Reduction Program will be discussed during

- document Contact information for your loved ones;
- obtain your signature on applicable agreements and forms (see “Documents for Signing” section);



**Documents for Signing:**

We will review several documents with you. Some will require your signature; some will be optional, depending on your situation.



The following “New Admission” documents will require your signature. Copies are included in this package:

- **Notice and Consent:** Outlines legislation and our responsibilities in maintaining the confidentiality and security of your personal health information. This form also includes acknowledgement that your photo may be displayed in media. If you do not wish your photo to be shared you can indicate that on this form.
- **New Admission Meeting Acknowledgement:** this is a summary of our meeting acknowledging the information we have provided.

The following documents will also require your signature. They will be prepared and brought to the meeting to review with you:



- **Accommodation Agreement**

(2 copies will be signed – 1 for you, 1 for our file):

This agreement is required by the Ministry and pertains to accommodation fees and what services are included.



- **Purchase of Services Agreement**

(2 copies will be signed – 1 for you, 1 for our file):

This deals with Optional Services and Trust Account matters. If you choose to establish a trust account there may be additional items to discuss and forms to fill in, including a Trust Account Authorization (Form A of the Purchase of Services Agreement) and referral forms for third-party providers, as applicable.



# Dufferin Oaks Long Term Care Home

## Notice and Consent

### Keeping Your Personal Health Information Private is Important to Us

Dufferin Oaks provides you with a broad variety of healthcare services. To meet your needs and serve you well Dufferin Oaks needs to know personal health information about you.

have a right to know how we collect, use and disclose personal health information. You have a right to expect that, to the best of our ability, personal health information held by Dufferin Oaks remains accurate, confidential and secure.

Dufferin Oaks is committed to maintaining the confidentiality and security of personal health information and we have implemented practices to further safeguard your information. These practices are aligned with the Ontario Ministry's Personal Health Information Protection Act (PHIPA).

Dufferin Oaks collects, uses, discloses and stores information about you and your health. This information is collected to help provide health care or payments for health care. This includes:

Your contact information and the contact information of your next of kin or an individual who is authorized to act on your behalf  
 Information about your health, health care history and the health care that you have been given  
 Information about payment for your health care including your Ontario Health Card number

*We use this information and share it only with those who need to know that information. For instance, we use it to:*

- Make decisions about the types of services you need
- Provide direct patient care
- Communicate with other service providers
- Monitor provision of services and evaluate your response to services provided
- Administer services, strategic planning, quality control and Accreditation surveys, research, teaching, risk management, allocate resources within the organization, and verify eligibility for services
- Verify eligibility for payment by the Ministry of Health and Long-Term Care
- Meet legal and regulatory requirements including Ministry inspections

**NOTE:** If you do not object, we will:

- Use your name and address as part of our fund-raising activities
- Disclose your name and location to a person representing your religious organization if you provide us with information about your religious affiliation.
- Take your photograph for identification purposes, ensuring safety & security of our residents, understanding that some photographs taken during social activities may be displayed or published in the media.
- Respond to inquiries from family and friends confirming your presence in the facility, your room number and provide information on your general health status
- Electronically share your assessment data with the Ministry of Health and other health service providers, who need to review the assessment data in order to provide services to you.

**These are your rights:**

You may see or have access to, or receive a copy of your personal health information

You may ask us to correct your resident record

Your personal health information is private. Unless sharing it with others is permitted or required by law, we cannot and will not give out any of your personal health information without your consent.

You may ask questions or make a complaint to Dufferin Oaks’ Privacy Officer about our information management practices.

If you would like to know more about how your personal health information is collected, used, stored, and disclosed or to make a complaint about our information management practices contact our Privacy Officer, at (519) 925-2140 ext. 2500.

**Express Consent**

I, \_\_\_\_\_, have reviewed the above summary of information relating to Dufferin Oaks’ Notice. I have had an opportunity to have questions answered regarding the Notice and feel that I have a reasonable understanding of the Notice. I hereby authorize the collection, use and disclosure of my personal health information by Dufferin Oaks in order to facilitate the provision of care and service to myself and for specific, related purposes as detailed in that Notice.

Resident/Client name (Print) \_\_\_\_\_

DOB (mm/dd/yyyy) \_\_\_\_\_

Signature \_\_\_\_\_

**If the Resident/Client is unable to sign:**

Name of Substitute Decision Maker (SDM) \_\_\_\_\_

Relationship to Resident/Client \_\_\_\_\_

Signature of SDM \_\_\_\_\_

Name of Witness to signature (print) \_\_\_\_\_

Signature of Witness to signature \_\_\_\_\_

Date of Signature \_\_\_\_\_

Photograph preference:     YES     NO     INTERNAL ONLY

Copy of this Notice & Consent provided to the Resident/Substitute Decision Maker: Initials \_\_\_\_\_

## New Admission Meeting Acknowledgement (SAMPLE)

Your signature below acknowledges that the following information has been provided:



Note: to help find these items in the Welcome! Package, we have included where they can be found, and indicated them with this symbol.

- ✓ Mission Statement (*page 1*)
- ✓ The Residents' Bill of Rights (*page 6 & POLICIES*)
- ✓ Family Council (*page 9*)
- ✓ Resident's Council (*page 9*)
- ✓ Veterans Affairs contact information (*page 15*)
- ✓ Dufferin Oaks Contact Information (*page 17*)
- ✓ Safety & Security, including:
  - Fire information, (*page 8*)
  - Evacuation information (*page 8 & POLICIES*)
- ✓ Complaint Information, including:
  - Home's complaint procedures and contact information. (*page 7 & POLICIES*)
  - Ministry's complaint procedures and contact information, including hours of service. (*page 7, Complaints Policy in POLICIES*)
  - Mandatory Reporting (*page 7 and Abuse Policy in POLICIES*)
  - Whistle blowing protection (*page 7 and Abuse & Complaints Policies in POLICIES*)
- ✓ Accommodation fees, including:
  - Basic Care, Programs & Services included in Accommodation Fee (*page 12 & Accommodation Agreement*)
  - Current rates (*New Admission Documents package - Bulletin from Ministry on current fee structure & Accommodation Agreement*)
  - Rate reduction program (*page 14 & New Admission Documents package*)
  - Fees During Absences/Leaves (*page 11 & Accommodation Agreement*)
  - Statements (*page 14 & New Admission Documents package - Statement Waiver*)
- ✓ Optional Services (*page 13 & New Admission Documents Package - Accommodation Agreement, Third-party referral forms*)
- ✓ Trust Accounts (*page 15 & POLICIES & New Admission Documents Package - Purchase of Services Agreement & Form A, Resident Charges & Trust Account Authorization*)

Policies: (**POLICIES**)

- ✓ Building Evacuation Policy
- ✓ Trust Account Policy

Provided for follow up by the Social Worker at a later date:

- ✓ Residents Rights Policy, which lists The Residents' Bill of Rights
- ✓ Residents Responsibilities Policy
- ✓ Family Responsibilities & Expectations Policy
- ✓ Advocacy Policy
- ✓ Abuse Policy, which includes:
  - Mandatory Reporting
  - Whistle blowing protection
- ✓ Complaints Policy
- ✓ Privacy Policy

---

Resident Name (Please Print)

---

Resident/Substitute Decision Maker Signature

---

Dufferin Oaks Staff Signature

---

Date



**NOTES/OUTSTANDING ITEMS:**

