

*Welcome
to
Long-Term Care
at
Niagara Ina Grafton Gage Village*



*Dedicated to providing quality care while
maintaining residents' rights and dignity*

What is a Long-Term Care Home?

There are many different kinds of services that help seniors maintain their health and independence. Long-term care homes are designed for people who require the availability of 24-hour nursing care, high levels of personal care, a setting that can accommodate varying health needs, and supervision within a secure setting. In general, long-term care homes offer higher levels of care and support than those typically offered by either retirement homes or supportive housing.

Government Legislation and Monitoring

There are three types of long-term care homes. Each type is regulated by its own provincial legislation. These are:

- Homes for the Aged and Rest Homes Act (municipal homes for the aged)
- Nursing Home Act (private nursing homes)
- Charitable Institutions Act (charitable homes for the aged)

Niagara Ina Grafton Gage Village (NIGGV) is a charitable home that is affiliated with The United Church of Canada as a legacy incorporated ministry. The Board of Directors is responsible for the governorship of NIGGV. The day-to-day operational responsibilities are delegated to the Chief Executive Officer.

The Ministry of Health and Long-Term Care (MOHLTC) sets standards for care and inspects long-term care homes annually. It also sets the rules governing eligibility and waiting lists. All homes must post and follow a Residents' Bill of Rights. The MOHLTC conducts annual compliance reviews and homes are required to post this report to make it available to residents, families and prospective residents.

Residents' Bill of Rights

Residents of long-term care homes deserve to be cared for in a respectful and compassionate way. They can and should expect their lives to be free from abuse and neglect. Every long-term care home must post the 'Bill of Rights.' It reminds everyone - residents, staff, friends, family, and neighbours - that residents of long-term care homes are valued members of the community.

Long-term care homes are primarily the home of their residents. As such they are to be operated in such a way that the physical, psychological, social, cultural, and spiritual needs of each resident are met. Furthermore, each resident should be given the opportunity to contribute, in accordance with his or her ability to the physical, psychological, social, cultural, and spiritual needs of others. The following rights of residents are to be fully respected and promoted:

Reprinted From: *Long Term Care Facility Manual*,
Ministry of Health and Long-Term Care

- **Every resident has the right** to be treated with courtesy and respect and in a way that fully recognizes the resident's individuality and respects the resident's dignity.
- **Every resident has the right** to be protected from abuse.
- **Every resident has the right** not to be neglected by the licensee or staff.
- **Every resident has the right** to be properly sheltered, fed, clothed, groomed and cared for in a manner consistent with his or her needs.
- **Every resident has the right** to live in a safe and clean environment.
- **Every resident has the right** to exercise the rights of a citizen.
- **Every resident has the right** to be told who is responsible for and who is providing the resident's direct care.
- **Every resident has the right** to be afforded privacy in treatment and in caring for his or her personal needs.
- **Every resident has the right** to his or her participation in decision-making respected.
- **Every resident has the right** to keep and display personal possessions, pictures and furnishings in his or her room subject to safety requirements and the rights of other residents.

- **Every resident has the right** to,
 - i. participate fully in the development, implementation, review and revision of his or her care,
 - ii. give or refuse consent to any treatment, care or services for which his or her consent is required by law and to be informed of the consequences of giving or refusing consent,
 - iii. participate fully in making any decision concerning any respect of his or her care, including any decision concerning his or her admission, discharge or transfer to or from a long-term care home or a secure unit and to obtain an independent opinion with regard to any of those matters, and
 - iv. have his or her personal health information within the meaning of the Personal Health Information Protection Act, 2004 kept confidential in accordance with that Act, and to have access to his or her records of personal health information, including his or her plan of care, in accordance with that Act.
- **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.
- **Every resident has the right** not to be restrained, except in the limited circumstances provided for under this Act and subject to the requirements provided for under this Act.

- **Every resident has the right** to communicate in confidence, receive visitors of his or her choice and consult in private with any person without interference.
- **Every resident who is dying or who is very ill has the right** to have family and friends present 24 hours per day.
- **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.
- **Every resident has the right** to raise concerns or recommend changes in policies and services on behalf of himself or herself or others to the following persons and organizations without interference and without fear of coercion, discrimination, or reprisal, whether directed at the resident or anyone else,
 - i. the Residents' Council,
 - ii. the Family Council,
 - iii. the licensee, and, if the licensee is a corporation, the directors and officers of the corporation, and, in the case of a home approved under Part VIII, a member of the committee of management for the home under section 132 or of the board of management for the home under section 125 or 129,
 - iv. staff members,
 - v. government officials,
 - vi. any other person inside or outside the long-term care home.

- **Every resident has the right** to form friendships and relationships and to participate in the life of the long-term care home.
- **Every resident has the right** to have his or her lifestyle and choices respected.
- **Every resident has the right** to participate in the Residents' Council.
- **Every resident has the right** to meet privately with his or her spouse in a room that assures privacy.
- **Every resident has the right** to share a room with another resident according to their mutual wishes, if appropriate accommodation is available.
- **Every resident has the right** to pursue social, cultural, religious, spiritual and other interests, to develop his or her potential and be given reasonable assistance by the licensee to pursue these interests and to develop his or her potential.
- **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.
- **Every resident has the right** to manage his or her own financial affairs unless the resident lacks the legal capacity to do so.
- **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.

- **Every resident has the right** to have any friend, family member, or other person of importance to the resident attend any meeting with the licensee or the staff of the home.

Accessing Long-Term Care

Community Care Access Centres (CCACs) are provincially funded local agencies that provide information about care options. The CCACs were established by the MOHLTC in 1996, to help the public access government-funded homes, community services, and long-term care homes.

All applications to long-term care homes are coordinated by the local CCAC. Once a person's eligibility is determined, the next step is to choose a maximum of three homes to apply to. The local CCAC will provide lists and information about homes in the area. The CCAC can also provide more detailed information about how to apply for and select a home, and also how to prepare for a move to a home.

Anyone requiring relocation to a long-term care home in the Niagara Region must contact Community Care Access Centre (CCAC) - Niagara Branch for assessment and determination of eligibility. This includes individuals residing in NIGGV rental or life lease units. For those choosing NIGGV, CCAC sends a completed assessment to the Director of Resident Care for review.

At times the home may not be able to accommodate an individual. Usually, this is because the nursing resources and/or physical environment cannot accommodate the needs of the individual at the time of referral.

Long -Term Care Services at NIGGV

Long-Term Care Services at NIGGV is dedicated to providing quality care while maintaining residents' rights and dignity. This is achieved through a committed Board of Directors, staff, volunteers, residents, and their family members.

The goals of Long-Term Care Services are to:

- promote a resident's independence in accordance with his/her ability to manage care;
- continuously monitor and maintain the health status of every resident; and
- continuously monitor and improve the quality of care provided.

Long-Term Care Services strives to:

- provide skilled, qualified, and experienced professional and non-professional staff;
- maintain open communication with staff, family members, and residents;
- recognize the talents and expertise of staff and encourage/support staff in their educational endeavours;
- provide and maintain the facility and technology necessary to accomplish departmental goals; and

- recognize and support volunteers and students as a significant contributing resource.

Our concern and commitment to meet the needs of our residents motivates our service.

Accommodations

40 private care suites, each with a large bathroom, are located in "B" Building. It is important that every resident has a 'home-like' atmosphere in his/her care suite. Therefore, a resident may furnish his/her own suite by bringing treasured pieces from home, such as a bedside table, dresser, lamp, and a comfortable chair. Electric beds, bed linens, and towels are provided by the facility. Furnishings must allow for safe ambulation for residents, as well as a safe environment for staff to complete their duties. Cable TV is included, but arrangements for a telephone must be made privately through Bell Canada.

Accommodation Rates

The MOHLTC provides funding for homes. The amount paid by residents for their accommodation is called a 'co-payment'. NIGGV offers long-stay accommodations, i.e. accommodations that are obtained for an indefinite period of time.

The monthly co-payment rates are:

- Basic - \$1,619.08
- Private - \$2,166.58

Some long-stay residents in basic accommodation may be eligible for a rate reduction. NIGGV can provide a rate reduction application form to a resident to complete.

If a resident's income is not sufficient to pay the basic accommodation rate, there is a subsidy available to reduce the accommodation rate. Subsidies are only available for basic accommodation.

Health Care

The focus of our health care is to enable every resident to be as independent as possible. This is determined in interdisciplinary conferences with the resident, family members, nursing staff, physician, and other members of our team. A plan of care is developed for every resident and reviewed on a regular basis with input from all disciplines, including the resident and family members. The pharmacy program is guided by the standards and policies of the MOHLTC. Medications must be obtained from the facility's contracted service provider. A clinical pharmacist is available as a resource for staff, residents, and family members.

Medical guidance is provided by the Medical Director. A resident may choose his/her own physician provided that the physician is willing to adhere to the expectations of NIGGV. Other available health services include physiotherapy, occupational therapy, speech therapy, optometry, and geriatric outreach programs. These services are incorporated on an individual basis.

Services

Services include:

- Laundry
- Personal hygiene supplies
- Medical/clinical supplies and devices
- Housekeeping
- Dietician
- Physiotherapy
- Pastoral Care

Optional services include:

- Hairdressing (fee)
- Foot Care (fee)
- Dry Cleaning (fee)
- Optician's Visit
- Banking
- CNIB (office on site)

Nutrition

Meals are provided in the Dining Room and are served to residents by the dietary staff. Nursing staff is also available during meal times to assist residents. The Food Services Department is able to provide most special diets. A Registered Dietician assesses all residents on an ongoing basis. As a member of the interdisciplinary team, the Dietician regularly provides input for the plan of care for every resident.

Family and friends are welcome to join residents in the Dining Room at any meal. Meal tickets may be purchased from the Administration Office during regular office hours (Monday-Friday from 9 am to 5 pm) or from volunteers at the volunteer desk in the Atrium (weekends from 11:15 am to 12:15 pm and 4 to 5 pm).

In addition to the meals, snacks, coffee, tea, and juice are provided three times each day (mid morning, mid afternoon, and evening).

Activities and Recreation

Keeping fit and involved takes many avenues at NIGGV. For some residents, specific therapeutic activities assist in maintaining health; for others, this is met by a general blend of physical, psychological, social, cultural, intellectual, and spiritual activities.

The activity calendar offers many choices each week, including outings. Family members are welcome to participate in any program.

Activation Therapists plan the activities and recreational programs. The Activation Therapist, under the direction of the Director of Resident Care, is responsible for assessing each resident to determine the programs and events that will meet an individual's physical, social, emotional, and spiritual needs. As part of restorative care, the therapist assists residents with mobility and various types of exercise. The therapist arranges entertainment programs, services, and bus outings (nominal fee). The therapist assigns and schedules volunteers and students to assist with resident-centred activities.

NIGGV is very proud of its Snoezelen Room, which is located in the long-term care area. Snoezelen is a multi-sensory experience. Sounds, smells, lights, vibrations, and touch combine together to help provide stimulation and promote relaxation. Research has shown that Snoezelen is a benefit to those who suffer from dementia and Alzheimer's by providing stimulation and relaxation. Snoezelen can successfully excite a person's senses when they are bored and irritable, even when they lack intellectual capabilities. Snoezelen can also successfully soothe those agitated, restless, and confused people who have difficulty relating to the environment.

Pastoral Care

The Pastoral Care Program is conducted by the Pastoral Care Coordinator, under the direction of the Chief Executive Officer. The Coordinator is responsible for providing religious and spiritual care to a resident and his/her family through ongoing pastoral visitation and spiritual counselling. The coordinator is responsible for completing a Spiritual Profile for each resident.

Environmental Services

Our housekeeping and maintenance staff are dedicated to maintaining a clean safe environment. Each care suite is cleaned regularly, and personal furnishings and belongings are carefully maintained.

Safety

Each care suite is equipped with a modern communication system. Every resident wears a badge that when pushed by the resident alerts the staff that assistance is required.

Leaves of Absence

When a resident leaves the building, he/she must inform nursing staff and sign out in a book located at the Nurses' Station. Medication can be sent with the resident if it is warranted. The MOHLTC guides this facility in regards to the length of absences from the facility. Leaves are categorized as Casual, Vacation, Medical, and Psychiatric. In order to facilitate an overnight leave of up to 48 hours, nursing staff requires a minimum of 48 hours' notice. If a leave is to start on a Monday or Tuesday, nursing staff must be informed prior to noon on the Friday before. If the leave is to be greater than 48 hours, one week's notice is required. Hospitalization is considered medical leave and a resident's bed in long-term care will be held for up to 21 days per hospitalization. Keep in mind that if a resident's insurance is funding part or all of the private accommodation in long-term care, it may not cover private or semi-private hospital accommodation at the same time as the bed is being held in long-term care.

Contact Information

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