Welcome to Dufferin Oaks!

This is YOUR home and we encourage you to consider it as such. Please feel free to invite friends and family to visit and participate in our many activities. This booklet has been prepared to help familiarize you with Dufferin Oaks and the services available.
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
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DUFFERIN OAKS INTRODUCTION

a) ORGANIZATIONAL STRUCTURE and ACCOUNTABILITY

Dufferin Oaks is a Non Profit Municipal Long-Term Care Home, owned and operated by the Corporation of the County of Dufferin. The Home is accountable to a Committee of Management comprised of members of Dufferin County Council. The Committee meets monthly with the Administrator to review the operations of the Home.

Programs and services are provided in accordance with the Ontario Long-Term Care Homes Act.

b) HISTORY OF THE HOME

Between 1956 and 1959, Dr. C. W. Schwenger was Medical Officer of Health for the County of Dufferin. On November 12, 1958 he addressed County Council expressing his views on the need for a facility which would provide care for seniors no longer able to manage on their own. County Council in turn, recommended that the incoming Council commence negotiations with the Department of Public Welfare for the erection of a Home for the Aged.

After two years of negotiations with the Department of Public Welfare, the necessary approvals had been obtained and on May 10, 1961 the official sod-turning ceremony occurred on a 10 acre site in the Town of Shelburne. A competition was held throughout the local schools to name this new facility with the winning entry being "Dufferin Oaks". And so it was that Dufferin Oaks opened its doors in 1962 with a capacity of 65 beds. Soon it became evident that additional space was required and in 1966 the first addition of 25 beds and an auditorium for recreation and entertainment was opened.

In 1971, 75 beds, a chapel, a recreation-health center complete with craft and adjuvant rooms and a swimming pool were added. The total
capacity of the "Oaks" was then 165 beds.

It was with much pride and satisfaction that Dr. C. W. Schwenger returned to the "Oaks" on October 21, 1987 to help officiate at the opening of the third addition, the Bouwhuis Wing. Twenty-six beds formerly in the Bryan and Newton Wings were transferred to this area. This allowed ward rooms to be converted to semi-private accommodation. The Seniors Drop-In Centre was relocated to larger space in the new wing and the Oaks’ kitchen was expanded and modernized.

As resident care levels and client expectations increased, the Ministry standards for long-term care facility design changed. In the mid-1990s, the County of Dufferin began to explore options to bring the home up to current day standards. The County elected to build a new 160 bed facility on the existing site. Construction began in 2000 and was completed in 2002. The new three story facility has 5 resident home areas each equipped with its own home center, dining room, lounge, den, and activation space. A secure environment is provided for the cognitively impaired.

c) **THE MEL LLOYD CENTRE**

The Mel Lloyd Centre is the former Dufferin Oaks. The building was named in honour of the former administrator, Mel Lloyd, who worked at the Oaks from 1962 until his untimely death in 2001. Mel was instrumental in developing the home as a focal point of the community and in expanding the role of Dufferin Oaks to serve not just the residents of the home but also to address the needs of seniors in the community. Under his leadership, Dufferin County Community Support Services and the Adult Day Program were introduced.

It was Mel’s vision that, on the opening of the new building, the original
home would take on an expanded community role housing various social, recreational and health programs as well as providing housing alternatives for seniors.

Between 2002 and 2006, the building went through several phases of redevelopment culminating in the building we proudly have today. The main floor is home to Dufferin County Community Support Services, Centre Dufferin New Horizon’s Seniors Club, Shelburne Centre for Health Medical Clinic and Shelburne Physiotherapy Clinic. Office space is also provided for the Wellington-Dufferin-Guelph Public Health Unit, the Alzheimer Society, Dufferin Safe Communities and Service Canada.

The west side of the Mel Lloyd Centre has been developed into McKelvie Burnside Village. This is a 22 unit apartment complex that provides supportive housing for the physically disabled and the frail elderly.

The lower level of the building houses Dufferin County Community Services and the Ontario Early Years Centre and provides support space for Dufferin Oaks. Space is also provided for the local food bank. The Auditorium is used by Dufferin Oaks as well as many community groups for social and recreational activities.

d) QUALITY IMPROVEMENT

Quality improvement programs at Dufferin Oaks are designed to demonstrate our continual effort to deliver the best possible service to our residents. Quality improvement programs measure the actual process or outcome of providing service and examine ways for continual improvement.
1. ACCOMMODATION

The Home is organized into five resident home areas, each with its own nursing station, dining room, activation room, living room and den. Residents have the choice of private, semi-private or standard accommodation. Private rooms have their own en-suite washroom. Semi-private accommodation is really two private rooms each with a separate entrance to a shared washroom. In standard accommodation, two residents share a room and a washroom. Resident privacy is provided either with a curtain or a wall in the middle of the room.

Dufferin Oaks also provides a home area with controlled exits and a supportive environment for delivering care to residents with cognitive impairment.

Although we attempt to minimize room changes, care needs may require that a resident be transferred to another room or home area. The resident and/or family will be consulted in advance of any such move. Residents wishing a change in room should advise the Unit Coordinator, Director of Care or Resident Accounting Clerk. Your transfer will be arranged when an appropriate room becomes available.

2. WHAT TO BRING WITH YOU

a) CLOTHING

Residents supply all their own clothing. The Home will arrange to have all your clothing labelled upon admission. If, at any time after admission, new clothing is purchased or brought into the home, please leave the clothing at the home area nursing station, to be forwarded to Laundry for labelling.
Clothing is laundered free of charge, but you are responsible to arrange and pay for any dry cleaning. All clothing should be machine washable and dryable. We do not recommend you bring any delicate clothing as our laundry machines are large and industrial. Adaptive clothing will be necessary for residents requiring a mechanical lift. Various clothing companies host sales at the Home throughout the year for your convenience.

The Home cannot assume responsibility for damages to any clothing during the laundering process.

Sometimes clothing does not get marked or labels come off and we do not know to whom it belongs. A lost and found is located in the laundry department. Please check periodically if belongings have gone missing.

Residents and families frequently ask what types of and how much clothing to bring upon admission. The style of clothing is completely up to you, but as outlined above, your everyday clothing should be of "wash and wear" material. On admission you should bring at least seven outfits of clothing. As space is limited, unnecessary items should be removed. Clothing, particularly everyday wear including undergarments, frequently wears out and must be replaced. Please check with the staff periodically to confirm that the present clothing supply is adequate. This is to ensure the residents are attired appropriately at all times.

The following is a list of suggested clothing:

- 7 outfits for day wear (slacks, shirts, skirts, blouses)
- 1 special occasion suit/dress and accessories
- 3 sweaters/jackets
- 7 sets underwear
- 7 pairs hose/socks (knee highs are not recommended)
- 6 nightgowns/pyjamas
• 2 robes
• 2 pairs of slippers
• 1 seasonal coat and accessories
• 2 pairs of shoes

Mending of residents clothing is a responsibility of the family. Laundry staff will identify clothing that needs repair or alterations. These articles will be given to nursing staff to inform family of items that need to be repaired or replaced.

Residents and families may access the household washer and dryers (coin operated) located in McKelvie Burnside Village. Staff will be pleased to direct you to this area.

b) EYEGLASSES, DENTURES, HEARING AIDS, ELECTRIC RAZORS
Residents are responsible for the cost of eyeglasses, dentures, hearing aids and electric razors. These items can be misplaced. Please arrange to have them marked BEFORE admission.

c) FURNISHINGS
Dufferin Oaks provides a bed, bedside table, wardrobe, one chair and bedding for each resident. However, if you wish to bring a few favourite items or small articles of furniture to personalize your room, you are most welcome to do so. Appropriate items include:
• a small dresser
• a favourite comforter for your bed
• a few pictures for your walls, to be hung by maintenance
• a small easy chair – preferably vinyl or leather (no rocking chairs, swivel chairs or foot stools on wheels)
• a small television, a radio, etc. (please provide ear phones)

NOTE: for safety reasons:
• We DO limit the amount of furniture and other personal belongings that you may keep in your room. You, your room-mate and staff must be able to move about the room safely. Resident room sizes do not accommodate love seats, dining room tables or large dressers. These also pose a housekeeping problem as staff cannot move them to clean properly.

• The wardrobe tops are not to be used to display pictures or knick-knacks, or to store boxes or suitcases. Such heavy or breakable items are safety hazards to the residents and staff. Please DO NOT place articles on top of the wardrobes.

• Electrical appliances must first be inspected by our maintenance staff. Residents are not permitted to have kitchen appliances (kettles, toasters, refrigerators, coffee machines, water coolers, etc.), electric heaters or humidifiers in their room.

• The bed must be accessible from all sides and the call bell must be within reach.

• No scatter rugs or mats are permitted.

d) SUPPLIES / EQUIPMENT / MEDICATION

Medication supplies, supplies for personal hygiene, and nursing equipment required for the care of residents are provided by the Home. Residents must bring their own electric razor. Prescription pharmaceutical preparations listed in the Ontario Drug Benefit Formulary are provided to the residents. Residents are responsible for the cost of pharmaceuticals not listed in the formulary.

Limited supplies of wheelchairs, geriatric chairs, canes, walkers, etc., are available for general use by residents. However, if you require such equipment on a permanent basis you are responsible for providing your own. If you need to purchase such items, you will be referred for an assessment.

*Unfortunately due to space limitations and resident safety issues, the home cannot accommodate electric scooters.*
e) HEALTH CARDS
Health cards are required for any hospital or specialist visits. To ensure that it is available when needed, they must be kept with the resident’s clinical record.

3. PERSONAL SERVICES AVAILABLE

a) BASIC CARE, PROGRAMS AND SERVICES INCLUDED IN ACCOMMODATION FEE and MINISTRY FUNDING
• Nursing and personal care on a 24-hour basis, the administration of medications, and assistance with activities of daily living.
• Medical care and restorative care as available in the facility.
• Certain medical supplies and nursing equipment that is necessary for the care of residents.
• Supplies and equipment for personal hygiene and grooming.
• Certain equipment for the short-term use of the resident.
• Meal service, hydration and meals (three meals daily, snacks between meals and at bedtime, special and therapeutic diets, dietary supplements and devices enabling residents to eat with minimum assistance).
• Social, recreational, spiritual and physical activities and programs.
• X-ray and lab services on site
• Laundry, including labelling.
• Bedroom furnishings, bedding and linen.
• Cleaning and upkeep of accommodations.
• Maintenance of a trust account on the resident’s behalf.
• Information package for residents.
• Prescription pharmaceutical preparations listed in the Ontario Drug Benefit Formulary (the government requires residents to pay a small co-payment).
• Suitable accommodation and seating for meetings of the resident/family councils.
• Special preparations or medical devices that may be obtained from the Ontario Drug Benefit Program as interim non-formulary benefits.
• Insured devices, equipment, supplies and services that are available to the resident through certain programs, such as the Ontario Assistive Devices Program (the government covers part of this cost and residents must pay the rest).
• Non-prescription drugs, medication and treatment products, and supplies obtained through Ontario Government Pharmaceutical and Medical Supply Services upon request.

b) **OPTIONAL SERVICES**
Currently, the home does not charge for any services other than the applicable accommodation fee. In the future, should the home offer optional services, only residents who have entered into a separate agreement for the provision of these services will be charged.

Other services are available to residents through third party providers. Charges for these services are in accordance with monthly invoices as provided by the third party providers. Residents can authorize the Home to pay some of these charges (tuck shop, hairdresser, foot care, costs of outings) with money from their trust account. Such charges will be itemized on the quarterly trust account statements. Residents can opt to purchase services from the vendor of their choice. They are not obligated to use those companies/providers who have been selected as preferred vendors by the home. The one exception is medications. These must be supplied by the home’s contracted provider.

i. **Hairdresser / Barber:**
The hairdresser’s hours are posted outside the Beauty Salon on the main floor. Regular appointments can be scheduled with her. Family members can leave a voice mail message by calling (519) 925-2140 ext. 5246.
ii. **Telephone:**
Arrangements can be made with Bell or Rogers to install a telephone in your room. The service charge for installation plus the monthly rate is your responsibility. If you decide to have your own personal telephone, please contact Bell or Rogers for installation. The monthly telephone bills are mailed directly to your billing contact, or may be forwarded directly to you.

iii. **Television & Cable:**
Arrangements can be made directly with Rogers Cable for installation of cable services. Please limit the size of the TV you are bringing in to 42” maximum. For wall mounted televisions, please bring the appropriate size bracket and our maintenance department will hang it for you.

iv. **Tuck Shop:**
Our tuck shop, located on the 1st floor, is operated by our home’s Auxiliary. It is usually open daily between the hours of 2:00 and 4:00 p.m. to provide residents and visitors the opportunity and convenience of purchasing small items in-house. There is a unique selection of giftware that changes on a regular basis.

v. **Postal Services:**
Residents may purchase stamps and post mail from the business office. Mail is delivered on a regular basis.

vi. **Resident Vehicles:**
Residents with a valid driver’s licence wishing to bring their own vehicle must notify administration prior to admission, and a designated parking spot will be provided.

vii. **Transportation:**
Families are responsible for transporting residents to outside appointments. If Home staff or volunteers are required to provide
transportation, the resident is responsible for all related costs.

viii. **Dental Hygiene Services:**
Outside companies do provide varying dental screening, hygiene and treatment services on a fee for service basis. Advise the registered staff in your home area if you would like to access these services.

ix. **Denturist:**
A denturist visits regularly to repair and fit dentures. Appointments can be made through the registered nursing staff.

x. **Foot Care:**
Foot care services are provided through a third party on a fee-for-service basis.

xi. **Outings**
Recreation staff often plans outings for residents. There may be some costs related to admission fees or restaurant meals. These are the responsibility of the resident.

### 4. **DIETARY SERVICES**

There are dining areas within each home area for residents. A Registered Dietitian will assure the residents' nutritional needs are met through regular, modified and therapeutic menus, specific to diet restrictions and food preferences.

Three meals daily are complimented with nutritious snacks, available between meals and at bedtime, in accordance with Canada's Food Guide. Family and visitors are welcome to stay for meals as space permits. Meal tickets can be purchased from our front desk reception area or from the registered nurse. Please give 2 hours’ notice to allow for set up and preparation time.
Residents are expected to eat meals in the dining rooms. Meals are served at approximately the following times:

- **Breakfast:** 8:30 a.m.
- **Lunch:** 12:00 p.m.
- **Dinner:** 5:00 p.m.

5. **HEALTH CARE SERVICES**

a) **CARE PLANNING**
Individual care plans are developed for each resident. Developing the resident care plan requires the interdisciplinary co-operation of staff members from all departments, the resident, members of the family, Pharmacist and the attending Physician. This group forms the Resident’s Multi Care Team and meets within 6 weeks of the resident’s admission, and annually thereafter to develop and review the resident’s care plan. Next-of-kin / representatives are an important part of the care team. In the event of a resident injury or change in resident status, the home will contact the next of kin/representative designated as the first contact.

b) **PHYSICIANS**
Each home area has an attending physician to provide medical care for each resident and each physician does rounds weekly. Should an emergency arise, a physician is on call 24 hours a day for the home to call should an emergency arise. If a medication is ordered, it can usually be delivered with 24 hours to the home. If on admission a resident wishes to retain their own physician, the physician must enter into a contract with Dufferin Oaks, agreeing to his/her responsibilities to meet Ministry and home standards.

The Home's advance directive information (Goals of Care) is distributed to all residents and/or families on admission. We respect a resident's choice for supportive care and comfort measures only, opting for no
heroic measures. Residents and/or families should feel free to discuss this issue with the registered nurse, Director of Care or the physician.

c) **NURSING STAFF**  
Registered practical nurses on each home area are responsible for coordinating your care and administering treatments and medications. In addition, a unit coordinator (registered nurse) is responsible for the overall management of nursing care and services on each floor. A registered nurse is available 24 hours a day. Personal support workers provide assistance with activities of daily living.

d) **NURSE PRACTITIONER**  
A nurse practitioner is available five days per week. She/he works collaboratively with both the physicians and staff to provide holistic health care and health promotion. Part of his/her is the diagnosis and treatment of episodic illnesses, the monitoring of chronic illnesses and health assessment. Staff or the physician may refer residents to the nurse practitioner for assessment or residents may also request a visit. If on admission a resident wishes to retain their own nurse practitioner, the nurse practitioner must enter into a contract with Dufferin Oaks, agreeing to his/her responsibilities to meet Ministry and home standards.

e) **SPECIALISTS**  
If your physician feels that an appointment with a specialist is required, family will be notified and arrangements discussed. Families should be available to provide transportation for outside appointments. In the event they are unable to do this, there are alternatives that can be arranged on a fee-for-service basis.

f) **PSYCHO-GERIATRIC RESOURCES**  
To help our residents with responsive behaviours, we have a Register Practical Nurse (RPN) who is a Behaviour Support Champion in-house Monday to Friday. We also have a
Psycho-Geriatric Resource Consultant available for consultation who will visit on-site with referral.

g) SOCIAL WORKER
We have contracted with an outside company for the provision of social work services. The social worker is on site three days per week. The social worker’s role is primarily resident advocacy. She assists residents and families in their adjustment to the long-term care setting and helps residents and families access needed support and health services. The social worker also assists residents and families with relationship issues.

6. PROGRAM & SUPPORT SERVICES

The Program and Support Services Department encompasses Activation, Spiritual, Restorative Care, and Volunteer Programs. It is managed by the Program and Support Services Manager.

a) ACTIVATION
Activation staff is responsible for ensuring creative and therapeutic programs; special events, entertainment, and outings are organized to meet the needs, preferences and abilities of all residents. Residents are actively encouraged to participate in activities, although it is the resident’s final choice to participate. A calendar of activities is posted in resident rooms if they desire. Extra calendars and a monthly newsletter are available at the Family Information Centre on the first floor. Daily activities are posted outside each activation room and each dining room. Calendars and the monthly newsletters are also available on line at www.dufferincounty.ca.

b) SPIRITUAL PROGRAMS
Interdenominational services are held weekly. Clergy and lay people of the local Ministerial Association conduct these services. We also offer a wide range of other spiritual programs such as communion services,
hymn sings, devotions and prayer groups.

c) **RESTORATIVE CARE**
The primary purpose of restorative care is to restore, or rehabilitate in order to maintain or improve functioning, independence and well-being. The home contracts with an outside provider for physiotherapy and occupational services. They provide a full range of restorative and rehabilitation services including assessment for mobility equipment and adaptive devices.

d) **VOLUNTEERS**
Our volunteers are invaluable to us!! They are involved in many different areas within the home including friendly visiting, activity assistant, auxiliary, palliative care, entertainment, etc. Dufferin Oaks volunteer team is always recruiting! We welcome any resident’s family members and friends.

7. **BUSINESS OFFICE AND MONEY MATTERS**

a) **BUSINESS OFFICE**
The business office is located adjacent to the main entrance. It is open weekdays excluding holidays between the hours of 8:30am and 4:30pm. The staff will provide you and your family with general information about the Oaks, answer any inquiries or direct you to the appropriate person.
The Administration office maintains information for each resident, including next-of-kin and contact person in case of emergency. It is most important that the office is informed of any changes in names, addresses and telephone numbers.

We request both a copy of your Power of Attorney for Personal Care and a copy of your Power of Attorney for Property. These documents help us to ensure your affairs are handled as you wish.
b) **ACCOMMODATION CHARGES/APPLICATION FOR RATE REDUCTION**

Charges for accommodation are set by the Ministry of Health and Long-Term Care annually. Residents/families will receive written notification of all current rates at the time of admission and of any rate changes thereafter. There are three rates as follows:

i. Standard Accommodation - Basic Rate

ii. Preferred Accommodation - Semi Private Room Rate

iii. Preferred Accommodation - Private Room Rate

Depending on your income, you may qualify for a rate reduction for standard/basic accommodation. The resident or family is required to complete the application for rate reduction form and submit it to the Ministry of Health and Long-Term Care for approval. To apply for a rate reduction, you will need a copy of the resident’s Notice of Assessment under the Income Tax Act (from Revenue Canada) for the most recent tax year. If you should have any questions about the rate reduction process, please contact the Resident Accounting Clerk (519-925-2140 ext. 5237). She is available Monday through Friday 8:30am – 4:30pm. After hours, you can leave a voice message. A copy of the approved rate letter will be printed for the resident/resident representative and kept on file.

There are no rate reductions available for preferred accommodation. If you would like a change in the type of accommodation, notify the Director of Care and arrangements will be made for a transfer when a bed becomes available.

Accommodation charges are paid in advance and are due the date of admission for the current month and the first of the month thereafter.

Legislation requires that we provide monthly statements of accommodation charges. If you do not wish to receive these, please
advise the accounting clerk in writing.

c) **TRUST ACCOUNTS**
   The Oaks will, upon request, establish a trust account for a resident on admission. The home is not permitted to hold more than $5,000 in a trust account for any resident at any time. Trust accounts are managed by the Home, and enable you to access information and monies during regular office hours. You may authorize the administration staff to automatically pay some third party invoices (i.e. hairdresser, tuck shop, foot care) on your behalf. Quarterly trust account statements are mailed to the resident or designated billing contact. To establish a trust account, you will need to meet with the Resident Accounting Clerk (519-925-2140 ext. 5237). She is available Monday through Friday 8:30am – 4:30pm.

d) **PRE-AUTHORIZED PAYMENT PLAN (PAPP)**
   Through our Pre-authorized Payment Plan (PAPP) an automatic monthly payment can be established to pay monthly maintenance fees as well as maintaining a balance in the trust account. For more information on setting up this feature, contact the Administration staff.

e) **FINANCIAL ASSISTANCE**
   There are a number of government financial programs available to citizens aged 60 years and over. The Administration office will be pleased to provide you with information regarding these.

f) **VALUABLES**
   The Home cannot be responsible for the loss of valuables. Residents are advised to keep only small amounts of money on their person. If you have jewelry or other valuables, we urge you to give them to your family for safekeeping. Valuables can also be left at the business office.
8. VISITING HOURS / GOING OUT

a) VISITING HOURS
Visitors are welcome at any reasonable time. There are 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. If your visitors would like to have a meal with you, they may do so for a nominal fee. The nursing staff or the front desk receptionist will make the necessary arrangements. Dietary requests 2 hours notice in order to accommodate visitor meals.

Occasionally, visiting may be restricted due to outbreaks of respiratory or flu-like illness. See Section 19-Infection Control for more information.

b) GOING OUT
As this is your home, you are free to come and go as you wish. If you are going out, let the staff on the home area know where you are going and when you will return. Please sign the in and out book available at each home centre. When you return, please let us know that you are back. If you are going out overnight or for a holiday, notify the Registered nurse on the home area, at least 24 hours in advance so that medication can be provided for you as necessary.

For security reasons, exterior doors are locked at specific times. Should you return when the doors have been secured, push the intercom at the front entrance (between the two sets of doors on the left hand side). A staff member will respond and open the door for you.
9. MINISTRY POLICY REGARDING RESIDENT LEAVES

a) CASUAL LEAVE
You are entitled to a casual leave of up to 48 hours per week. Casual leaves are permitted through the year in addition to vacation or medical/psychiatric leaves.

b) VACATION LEAVE
A vacation leave of twenty-one (21) days per year is available to all residents. Vacation leave can be used only in the calendar year in which it is granted and is not cumulative.

c) 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.

d) PSYCHIATRIC LEAVE
Psychiatric leave of up to sixty (60) days is available to residents for the purposes of assessment, treatment and stabilization.

e) RESIDENT CHARGES DURING LEAVES
During a leave of absence, you are responsible for the standard charges. This includes accommodation (basic or preferred) and any authorized purchase of other services. The government will continue to fund the nursing and personal care and program components during a leave of absence. If your condition or care needs require absence from the facility beyond the available medical or psychiatric leaves, you shall be discharged from the home. To re-enter the facility, you or your representative must contact the Community Care Access Centre.
10. SAFETY AND SECURITY

a) SMOKING

In accordance with the Smoke Free Ontario Act and Ministry of Health regulation 613/94 under the Tobacco Control Act, smoking is not permitted within Dufferin Oaks or within 9 metres of an entrance to the home.

Resident and visitor smoking are only permitted in the designated smoking area outside the front entrance.

A resident is only permitted to smoke in the outside designated smoking area if he/she has been assessed to be a safe smoker.

b) ELECTRICAL APPLIANCES

All electrical appliances must be C.S.A. approved and checked by our maintenance staff to ensure that they are safe before you are allowed to use them in your room. Appliances (kettles, coffee machines, microwaves, refrigerators, water coolers, humidifiers etc.) are not permitted in resident rooms. You may use them in resident access centres adjacent to the dining rooms. Numerous outlets are provided in all resident rooms. Please do not use extension cords, octopus plugs, etc. Television and phone cable should not prevent safe movement in your room. If you need to have a longer cable to ideally position your television or phone, arrange to have maintenance secure it to the baseboard or wall.

For safety reasons, personal electric heaters are not permitted. If room temperature is a concern, please report to Maintenance staff. Temperatures will be monitored and if auxiliary heat is required, the home will provide it.

c) FIRE AND OTHER EMERGENCIES

The home has developed a detailed emergency plan to deal with fire and
other disasters. This plan is tested on a regular basis. Residents must cooperate and follow instructions during tests as well as real emergency situations. As part of the admission process, you will receive instructions on fire procedures. Fire instructions are posted at each pull station and in each resident room. Fire drills are held every month where you will learn what to do in case of real fire. Please note our home is sprinklered.

d) **FURNITURE ARRANGEMENT**
For health and safety reasons, hanging objects directly above the head of a resident’s bed is prohibited. Likewise, no objects are to be stored, and/or displayed on top of the wardrobes. This standard eliminates the chance of objects falling and causing injury. In addition, the bed must be placed so that it is accessible from three sides with the call bell within reach.

e) **COMMUNICATION/SECURITY DEVICES**
   i. **Nurse Call:**
      All resident rooms, washrooms and amenity spaces are equipped with a nurse call system. When you pull the cord, a signal sounds at the home centre and a dome light comes on outside your room. A speech module in the room allows the nursing staff to communicate. However, staff must come to the room to cancel the call and the dome light.
   
   ii. **Telephones:**
      To eliminate excessive cords in resident rooms, cordless phones are recommended.
   
   iii. **Door Alarms:**
      All stairwell and exterior doors are on an alarm system that is connected to the nurse call. Doors that are used frequently during the day can be silenced to minimize disturbance to residents.
   
   iv. **Resident Identification:**
      For identification purposes, all residents are provided with an identification bracelet. In addition, a photograph of the resident is
included in the clinical record.

f) RESTRAINTS
Restraining devices will be used only as “last resorts” where there exists “imminent risk” of harm to the resident or others, only after careful consideration by a regulated health professional and only after determining that available alternatives would not prove adequate. Only the least restrictive restraint will be used. Safety precautions and a high degree of care are required in the use of the restraining device. If it is determined that a restraint is needed, consent will be required from the resident/resident representative. The Registered Staff or business office will be pleased to provide you with a copy of our restraint policy on your request.

11. RESIDENT RIGHTS/ADVOCACY

Dufferin Oaks fully supports the Bill of Rights for all residents at Dufferin Oaks. Dufferin Oaks is the home of these residents and as such, it is essential that the physical, psychological, social, cultural and spiritual needs of each resident be met.
The rights of residents are to be fully respected and promoted through Dufferin Oaks’ mission, values and philosophy.
On admission, the following will be provided and discussed in detail with each resident/resident representative:
• Resident Rights and Responsibilities
• Family Expectation and Responsibilities
• Dufferin Oaks Abuse Policy

12. INFORMATION SHARING

In addition to the handbook, valuable information and any updates for residents and family are regularly posted on the information boards by the
main elevators. If you wish a copy of anything posted, the business office would be happy to make you a copy. Check the boards often to keep current.

Please note that as part of our accessibility policy, any information that is posted or is provided to you or your representative is available in alternative formats upon request. Please see our business office for assistance.

For email notification of events and general information at Dufferin Oaks, you may also sign up to our email subscriber list and have emails sent directly to your inbox. Notices of upcoming events and important information as well as links to the latest newsletters and calendars are posted. Contact the Business Office if you wish more information.

13. FAMILY MEETINGS

Family meetings are scheduled on a regular basis. These are very informal and are designed to provide an opportunity for family members to collectively express concerns/suggestions to management and for management to inform families of current issues and events. Everyone is encouraged to attend. Notices of meetings are sent to the designated family representative and it is their responsibility to inform other interested parties.

14. FAMILY COUNCIL

The Dufferin Oaks Family Council exists to serve the residents of Dufferin Oaks and is dedicated to improving the quality of life for all residents by promoting an atmosphere of sensitive caring and support among staff, friends and family.

The Family Council usually meets monthly and all families are encouraged to participate. Notices and minutes of meetings are posted on the
15. **DUFFERIN OAKS RESIDENTS’ COUNCIL**

Dufferin Oaks has a very active Residents’ Council. The Council provides a forum for residents to come together to express their views and concerns about matters affecting their lives. Meetings are held monthly with the exception of August and December. Minutes of meetings are posted on the Resident/Family Council Board near the elevator on the main floor. All residents are encouraged to attend. Consult the activity calendar for dates and times of upcoming meetings.

16. **DUFFERIN OAKS AUXILIARY**

The Home's Auxiliary is committed to our residents. They organize social activities, raise funds for resident's comfort, operate the tuck shop and volunteer their time to ensure individual resident’s needs are met. Family members are encouraged to become a member of this organization.

17. **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. Department Heads are available weekdays. On weekends, please talk to the Registered Nurse. Client Issue Response forms are provided at the main entrance. You may submit your concerns in writing if you wish and staff will respond within ten working days.

Staff is expected to advocate on behalf of all residents. If you have a concern that your rights are being compromised, please bring it to the attention of a staff member. If you are unsure who to approach, speak with the RPN (Registered Practical Nurse) on the home area who can direct you appropriately.
If you are uncomfortable with these options or are not satisfied with the response you receive, you may forward complaints to:

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)

18. MANDATORY REPORTING

The Long-Term Care Homes Act 2007, Section 24 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 (contact information listed above):

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

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.
19. INFECTION CONTROL

WHAT IS INFECTION CONTROL?
Infection Control is the practice by which the facility prevents and manages infections. Infection Control principles are included in all aspects of providing care for all residents.

WHAT IS THE BEST METHOD OF PREVENTING INFECTIONS?
Hand hygiene with an alcohol based hand rub is the best method to prevent infections. In order to protect residents from infections, staff performs hand hygiene often. We encourage residents and visitors to do the same.

For your convenience, wall mounted hand sanitization stations are provided at reception and when entering each home area. The hand sanitization solution is applied and rubbed directly to your hands. There is no need to remove this solution with water after it has been applied. Please use these sanitization stations every time you enter and leave the home.

WHY DOES STAFF SOMETIMES WEAR GLOVES, GOWNS AND MASKS?
It is sometimes necessary to take additional control measures. Therefore, gloves, gowns and masks may be worn to protect the residents and staff from potential infections.

WHY MIGHT I BE ASKED NOT TO VISIT THE FACILITY?
Family members may be asked to only visit their loved one or not to visit the home during an infectious disease outbreak. The purpose is to prevent the spread of an illness and to protect you and your family. Also, family members and visitors should not visit if they have a cold, fever, vomiting, or diarrhea.

WHAT IMMUNIZATIONS SHOULD SENIORS AND VISITORS RECEIVE?
Immunization is important for all seniors. It is especially important for
individuals who are frequent visitors in a long-term care facility. It is recommended that seniors receive:

- A single dose of tetanus and diphtheria booster every ten years
- A pneumococcal vaccine at the age of 65 and over, and a one-time booster 5 years after the first injection; and
- Flu shot for influenza each fall

The influenza vaccine is the single most effective way of preventing the flu. Please check with your doctor or local Public Health Unit for more information or to receive your free flu vaccine each fall.

**REMEMBER, IMMUNIZATION IS NOT JUST KIDS STUFF!**

**SHOULD I BRING IN TREATS OF FOOD?**

Food is carefully monitored in the facility to prevent any possible food poisoning. We ask that you do not leave perishable food in a resident’s drawer, but instead label the food with the resident’s name and the date the food arrived so that staff can place it in the refrigerator for safe keeping. It takes all of us working together to prevent infections and thus protect the residents.
## 20. STAFF DIRECTORY

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<tr>
<th>DEPARTMENT/ POSITION</th>
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<tr>
<td>ADMINISTRATION</td>
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<td>JENNIFER POWER</td>
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<td>RHONDA WHITE</td>
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<td>MARILYN FENDER</td>
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<td>REBECCA HALL</td>
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<td>BETH UPRICHARD</td>
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<td>SHELBURNE ORANGEVILLE RN/RPN</td>
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<td>HOUSEKEEPING/LAUNDRY MANAGER</td>
<td>BELINDA ZEGGIL</td>
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<tr>
<td>FACILITIES MANAGER</td>
<td>KEVIN NORRIS</td>
<td>5263</td>
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**DUFFERIN OAKS TELEPHONE NUMBER** (519) 925-2140

**DUFFERIN OAKS FAX NUMBER** (519) 925-5067

**COUNTY OF DUFFERIN (CLERK’S OFFICE)** (519) 941-2816 EXT. 2503

**GENERAL E-MAIL:** dufferinoaks@dufferincounty.ca