

**A Caring Community** 

A guide to living at Saint Vincent's for

# Residents & Family Members



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# SECTION 1 WELCOME TO SAINT VINCENT'S

# **Message from the Chief Executive Officer**

I am pleased to welcome you to our caring community. Moving into a long-term care facility is a major life event filled with emotions. While we will try to make your transition into our community as easy as possible, we understand that the first days can be overwhelming. This handbook has been developed to provide important information about our facility policies, services, and your rights and responsibilities. If you have questions or concerns at any time, please contact the Clinical RN or Resident Care Manager to guide you. A list of contact numbers is available at the end of this booklet.

Saint Vincent's Nursing Home has been providing excellent care to residents and families for over 50 years. We are here to meet your needs every day and we look forward to getting to know you. We are proud to provide resident and family centred care and to always be open and transparent. We encourage you to become involved in shaping our policies through our Resident and Family Centred Care Advisory meetings that are held monthly.

Again, welcome from the Saint Vincent's Nursing Home team. If there is anything you need, please do not hesitate to ask.

Ken Rehman CEO





# A Caring Community

**Vision** Engaged residents. Meaningful relationships. Moments of joy.

**Mission** We are a resident and family-centred community caring for each other.

**Values** 

Caring We demonstrate compassion, kindness and empathy for each other to

create a welcoming, secure, and comfortable environment.

Collaboration We work together to serve those entrusted to our care by engaging with

residents, family members, employees, physicians, students, volunteers,

health professionals, clergy, external partners, and friends.

Respect We embrace diversity; we demonstrate consideration and politeness as

we seek to understand each other's experiences and perspectives.

Accountability We act with integrity and transparency while holding ourselves and each

other to high standards and the pursuit of continuous improvement.

Safety We are committed to health, well-being, and safety for all members of the

Saint Vincent's Nursing Home community.

# **Privacy Policy**

Saint Vincent's Nursing Home has implemented a privacy policy which is designed to protect the privacy of its residents, employees, families and volunteers. For further information contact the Director of Resident Care at ext. 136.

# **Protection of Persons in Care Act (PPCA)**

Saint Vincent's Nursing Home has always had a strong anti-abuse stance; the Protection for Persons in Care Act provides further safeguards for residents. The Act requires health facility administrators and service providers (including staff and volunteers), and encourages all others (including family and visitors), to promptly report all allegations or instances of abuse to the Department of Seniors and Long-Term Care. You may contact the Department of Seniors and Long-Term care directly or bring your concerns to a member of the management team who can assist with the process.

Under this Act, abuse may be physical, psychological, emotional, sexual, medical, or related to neglect or theft and may be caused by staff, volunteers, family members, visitors or others.

When a report is made an inquiry and/or investigation will be performed by the Department of Seniors & Long-term Care. In addition, Saint Vincent's will conduct an internal investigation. For more information or to report abuse:

# 1-800-225-7225 www.gov.ns.ca/health

# **Resident and Family Rights and Responsibilities**

As a resident or family in the Saint Vincent's Nursing Home community you have guaranteed rights as well as certain responsibilities that ensure we maintain a safe and caring community.

- 1. To Respect and Dignity
  - a. Residents and families have the right to be treated with respect and courtesy in a way that fully recognizes your individuality and ensures your dignity. This means that staff will always speak to you in a polite and non-judgemental manner.
  - b. You have a responsibility to treat other residents, families, volunteers, and staff with respect and dignity.
- 2. No Abuse or Neglect
  - a. Residents and families have the right to be free from abuse and neglect.
  - b. Types of abuse under the Protection for Persons in Care Act as defined in section 3(1) of the Regulations is as follows:
    - 3(1)(a) the use of physical force resulting in pain, discomfort or injury, including slapping, hitting, beating, burning, rough handling, tying up or binding;
    - 3(1)(b) mistreatment causing emotional harm, including threatening, intimidating, humiliating, harassing, coercing or restricting from appropriate social contact;
    - 3(1)(c) the administration, withholding or prescribing of medication for inappropriate purposes;
    - 3(1)(d) sexual contact, activity or behaviour between a service provider and a patient or resident;
    - 3(1)(e) non-consensual sexual contact, activity or behaviour between patients or residents;
    - $\bullet$  3(1)(f) the misappropriation or improper or illegal conversion of money or other

valuable possessions;

- 3(1)(g) failure to provide adequate nutrition, care, medical attention or necessities of life without valid consent.
- c. Residents and families have the responsibility to report abuse and neglect. This can be done by reporting to any manager or directly to the Department of Seniors and Long-Term Care at 1-800-225-7225.

### 3. To a safe environment —

- a. In addition to an abuse free environment, we strive to ensure that residents have a feeling of personal safety, and safety of their belongings. We will ensure that equipment is safe and well maintained and that the environment is free of hazards.
- b. You have a responsibility to report anything that you believe is a safety risk.

### 4. To be restraint free —

- a. As a least restraint facility, we believe in the use of restraints as a last resort in only certain situations. This includes physical, environmental, and chemical restraints. For more information on our policies refer to our pamphlet.
- b. Residents and families have a responsibility to become informed of the risks and benefits of the use (or lack of use) of restraints and to be partners in decisions regarding their use.

### 5. To be informed —

- a. Residents and families have the right to be informed of changes in their care including medication changes, incidents, and wounds.
- b. Residents and families have the right to be informed of changes in Saint Vincent's Nursing Home policies that affect them and to provide input into these policies through the Resident and Family Centred Care Advisory Group.
- c. Residents and families have the responsibility to ask questions about aspects of care and policies that they do not understand.

### 6. To be involved in care —

- a. Residents and families are partners in care and have the right to make informed choices in care decisions. They are the experts in their own care.
- b. Residents and/or their substitute decision maker (SDM) have the right to participate in the development, implementation, review and revision of their plan of care to the extent that they wish.
- c. Families have the right to be present during and to participate in the care of their loved one providing the loved one (or SDM) does not object and safety is maintained.
- d. Residents and families have the responsibility to provide accurate and complete information to the care team.
- e. Residents and families have a responsibility to be patient and understand that care is provided to those whose needs are most pressing. This may result in

delays in responding to their needs.

- 7. To consent to treatment
  - a. Residents have the right to direct their own care and have the right to accept or refuse care when it does not negatively impact other residents and staff.
  - b. Every resident has the right to 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.
- 8. To privacy
  - a. Every resident has the right to privacy during care including closed door and curtains while care is provided. Staff must knock before entering a resident's room as this is their private space.
  - b. Every resident has the right to privacy of their information. This information will only be shared with those people involved in the care of the resident. Staff will not discuss residents with anyone other than the resident, the identified SDM, and members of the care team unless specifically requested by the SDM or resident.
  - c. Residents and families have the responsibility to respect the privacy of others.
- 9. To have their own belongings
  - a. 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.
  - b. Residents have the right to manage their own money when able.
- 10. Residents have the right to take part in social activities that they enjoy and are able to do, including outdoor activities.
- 11. To have visitors when you wish
  - a. Saint Vincent's Nursing Home does not have set visiting hours.
- 12. To raise concerns or recommend changes in policies and services on behalf of yourself or others without interference and without fear of coercion, discrimination or reprisal, whether directed at the resident or anyone else.

# **Philosophy of Care**

Saint Vincent's Nursing Home has a philosophy of Resident and Family Centred Care (RFCC). We place the resident and family members at the centre of everything we do. Through this approach, we recognize that residents and their families are the experts in care; they are not recipients of care; but rather partners in care who define with us what that care will be. We encourage residents and families to be active in the planning of their care, to participate in care to the extent they wish, and to provide input into facility policies and procedures that affect them through the RFCC Advisory group.

# **Least Restraint Policy**

Saint Vincent's Nursing Home is a least restraint facility. We balance risks while meeting our moral, legal, and licensing responsibility to provide a safe environment for residents, staff, and visitors.

A restraint is any physical, chemical (medication), or environmental intervention that is used specifically to restrict the freedom of movement or behaviour of a resident. It does not refer to equipment requested by the individual for their daily activities, mobility, or comfort. Neither does it refer to drugs used to treat specific, appropriately diagnosed conditions where drug use is clinically indicated to be the most appropriate treatment.

### In our least restraint policy:

- 1. We believe in providing a least restraint environment.
- 2. Restraints are used only under unusual circumstances and when all other possible alternatives prove to be ineffective.
- 3. We believe in the resident's right to free movement and accept that there are inherent risks in least restraint practices, e.g. a resident risk of falls may increase without a restraining belt.
- 4. Risks associated with application/non application of restraints must be balanced with resident and family wishes. Restraints are only temporary or short term measures and never a planned, long-term option.

Restraints will only be used at Saint Vincent's **IF** all of the following are satisfied:

- There is significant risk that the resident or another person would suffer serious bodily harm if the resident were not restrained, AND
- The interdisciplinary team has performed an assessment and alternatives to the restraint have been considered or tried but have not been or would not be effective to address the risks, AND
- The method of restraint is reasonable given the resident's physical and mental condition, and personal history, and is the least restrictive method that would be effective to address the risk, AND
- There is a physician order, AND
- The restraint has been consented-to by the resident or if the resident is incapable, by the substitute decision maker or EPOA with the authority to give the consent, AND
- The benefits of the physical restraint are shown to clearly outweigh the risks of not using the restraint, and there is a documented plan of care that outlines the reasons for the restraint, monitoring requirements, repositioning, reassessments and alternatives to the restraint.

There are times when a restraint is the best option. The goal will always be to find alternatives to a restraint and to attempt those first. Restraint should always be a short term measure.

# SECTION II ADMISSION PROCEDURE

### **Preadmission**

Prior to admission you will receive a phone call from the resident services manager. This call takes approximately 30 minutes and will cover everything from the resident's personal history to medical treatment and daily routines. At this time we will establish a date for the signing of the Residency Agreement. This meeting typically occurs on the business day prior to admission. Ideally an email address should be provided to allow us to email you *a copy* of the Residency Agreement and other important forms to allow you time to review them prior to meeting with the resident services manager.

In addition to signing the Residency Agreement, residents, families or authorized representatives will be given a tour of the facility, including the room available for admission. The Clinical RN for the unit will meet for a preadmission discussion where certain policies will be reviewed and consents for medical care will be signed.

# **Day of Admission**

On the day of admission the resident and their family should arrive between 10:00-11:00 AM, unless another time has been arranged with the resident services manager. You will be brought to your room and be orientated to the floor and staff. The day of admission can be particularly difficult for both the resident and their family, therefore family members are invited to stay with the resident for as long as they wish.

# **What to Bring**

During the preadmission interview the resident services manager will discuss with you the items that you should/may want to bring with you. It is suggested you not bring everything the day of admission; but bring items in as the resident becomes more comfortable with their surroundings and as space permits. All furnishings or electric devices (i.e. lamps or fans) must be first inspected by housekeeping or maintenance for safety (refer to page 15). Please note Saint Vincent's has the right to refuse any item that may be deemed unsafe or unsanitary.

### Required:

- If coming from home, any medications (over the counter and prescribed) or creams used in community,
- Nova Scotia Health Card (MSI),
- Any assistive devices used in community such as wheelchair, walker, CPap machine, O<sub>2</sub> concentrator, etc.,

### Suggested:

• 7-10 days' worth of clothing. This should include clothing the resident is comfortable in at home along with sweaters and a coat (Saint Vincent's will label all clothing). Additional items

- can be brought in based on the resident's needs and storage capacity. Clothing requiring dry cleaning or handwashing is not recommended,
- Shoes or slippers with full backs and non-slip sole,
- Bedspread and/or throw blankets (must be twin sized to accommodate bed). Saint Vincent's provides sheets and pillows,
- Personal hygiene products (Saint Vincent's provides these items, except deodorant), however
  if there is a specific brand of choice it must be provided by the resident/family,
- · Pictures, ornaments and small personal items are encouraged,
- Residents are provided with a chair however if one is purchased it cannot rock, slide or glide. Recommended chairs are firm, yet comfortable seats with full-length arms and high backs for support. Chairs should be no less than 18" from the floor, should be no more than a few inches wider than the resident and made of durable/stain guard fabric,
- Televisions must be flat screen, cannot exceed 32" and must come with a base as they are not permitted to be wall mounted (refer to Televisions section page 24.

### Not Permitted:

- Talcum powder (baby powder) is not permitted due to infection control and the talc making the floors slippery,
- For reasons of liability, any medications that are not supplied by Lawton's Northwood are not permitted in the facility.

### **Accommodations**

Saint Vincent's offers both private and semi-private accommodations. If a resident wishes to move from a semi-private room please notify the resident services manager who will place the resident's name on a transfer list. Please note that medical necessity will be given priority over personal preference when assigning private rooms.

# SECTION III FINANCES and RELATED INFORMATION

# **Payment of Rates**

Prior to the date of admission, we require the resident, POA or their authorized representative to sign a Residency Agreement. At this time the resident will provide payment for their current month's authorized accommodation charge. A void cheque or bank account information is also required for automatic withdrawal of each month's accommodation charge which is due on the first of each month. The resident services manager will review our admission, payment and pharmacy agreements with you and answer any questions you may have about payment for costs of care. The resident services manager's office hours are 8:00 AM to 4:00 PM Monday to Friday.

If you do not think the assessment of your authorized accommodation charge is accurate, you have the right to request a review. The Eligibility Review Unit of the Department of Seniors and Long-Term Care determines your authorized accommodation charge and their phone number is listed on your Notice of Authorized Charge letter. For assistance please speak to our accounts officer at extension 121.

### **Personal Use and Trust Accounts**

A monthly personal use allowance is provided to residents admitted prior to January 1, 2005 and who receive financial assistance with their costs of care. These funds are kept in a personal trust account. Residents who wish to withdraw funds from their personal use account must go to the accounts officer and complete a withdrawal slip for the amount of cash requested. A resident who withdraws cash on their own is not required to provide receipts for purchases. A designated third party who purchases items for a resident must provide receipts before any funds will be reimbursed. Any expenditures over \$100.00 will be reimbursed by cheque within five business days. It is recommended that residents not keep more than \$20.00 in their room at any given time.

Saint Vincent's can provide Trust Account Services for any resident. This account is established and used for a variety of financial purposes as outlined in the admission agreement. The resident services manager will review the Trust Account Agreement with you upon admission and answer any questions you may have.

### **Over Cost Fund**

All residents admitted to a long term care facility after January 1, 2005, may be eligible for specific items/services under the Department of Seniors and Long-Term Care Over Cost Fund. The two most common are occupational therapy assessments and/or the provision of specialized equipment, e.g. wheelchairs or geri chairs. The staff of Saint Vincent's will normally identify the need for such services or items and the appropriate request forms will be submitted to the

Department of Seniors and Long-Term Care on behalf of the resident. Items or services that are ordered on behalf of the resident without prior approval from the Department of Seniors and Long-Term Care will be the financial responsibility of the resident. Questions about the Over Cost Fund may be directed to the resident services manager.

### **Income Tax and Care Costs**

Residents in long term care facilities are not required to pay for the medical care portion of their care costs. These costs are paid by the Department of Seniors and Long-Term Care. The resident pays a predetermined accommodation cost (room and board). As residents can deduct their room cost as a medical expense on their tax return, a letter identifying the annual care cost is issued by the Director of Finance by February 28<sup>th</sup> of each following year.

# **Specialized Equipment Program**

Specialized equipment i.e. pressure reduction mattresses, wheelchairs, etc. may be accessed through the Health Equipment Loan Program (HELP) which is administered by the Canadian Red Cross. If it is determined that a resident would benefit from a piece of specialized equipment, the physiotherapist will request approval from the Department of Seniors and Long-Term Care Continuing Care for the cost of an assessment by a registered occupational therapist. An assessment will be arranged after approval has been received. The occupational therapist then completes the assessment, prescribes the appropriate equipment, obtains two quotes from local suppliers and forwards all information to Continuing Care for approval. If approved, the Canadian Red Cross supplies the equipment. It's important to note that a) the resident may be assessed a monthly fee based upon their income and cost of the equipment and an agreement must be signed before the equipment is supplied; and b) residents with private insurance must first apply to their own insurance carrier for benefits before being considered for the HELP program.

# SECTION IV GENERAL GUIDELINES

### Infection Control

Infection prevention and control strategies are designed to protect our residents, staff, families and the community. Our staff follow infection prevention and control practices at all times. Control practices include protocols for hand hygiene, immunization of residents and caregivers, protocols for managing staff, residents and families during an outbreak and protocols for caring for residents with communicable diseases.

Hand hygiene is the single most important thing to do to prevent transmission of infection. You will find hand sanitizers located beside the elevators and at strategic locations throughout the home. We ask visitors to use hand sanitizers liberally throughout their visit, but minimally at entry to the home, on each unit (if you visit more than one location) and prior to exiting the home.

Additionally, if you have symptoms of an infection, we ask that you not visit until you are better. Check with your unit if you have any questions.

## What happens if there is an outbreak?

Sometimes, in spite of everyone's best efforts, there may be an infectious disease outbreak at Saint Vincent's. If that happens, your relative is in good hands. We will implement our outbreak management procedures immediately. Our doctors and care team will collaborate with the experts at Nova Scotia Public Health to plan the best way to get over the infection as quickly as possible. It is possible that we may ask family members and visitors to not visit during this time. This is to protect both our residents and their family and friends from the illness. If we ask you not to visit, you can stay in touch by telephone, so that you know how your relative is doing.

# **Visiting Hours**

We believe family members and friends are an integral part of life at Saint Vincent's and we appreciate and support their contributions. As such, we encourage visiting by family and friends and ask that any concerns or questions over visitation (appropriate hours, time of day, and length of visit) be discussed with the licensed nurse on the unit. For more information refer to the *Family Visitation & Presence* pamphlet provided on admission.

# Possession of Food, Alcohol and Cannabis

Family members may bring residents small quantities of non-perishable food. As many residents are on a special diet, please consult with the nursing staff and/or clinical dietitian before bringing in any food. Perishable items may be stored in the unit fridge if room permits. All items must be labeled with the resident's name and dated. As other residents and families have access to the unit fridge we are not responsible for food items that go missing.

# Please inform the nursing staff before bringing in seafood due to severe allergies of some staff and residents.

If a resident wishes to have alcoholic beverages, and/or requires it for medical reasons, a written order must be received from the resident's attending physician. All alcohol is kept in the medication room and is dispensed by our nursing staff. Alcohol purchased for personal use is the financial responsibility of the resident and/or their family.

Recreational cannabis is not permitted to be smoked onsite nor may it be stored at the bedside. If residents wish to use recreational cannabis, family must provide it during a visit and take any remaining product when they leave.

# **Leaving the Premises**

If a family member plans to take a resident off the unit for any period of time, short or extended, they must:

- Notify the unit RN or LPN about where the resident is going and expected time of return;
- Sign a resident pass form to leave the premises (located at the nurses' station).

If the resident is leaving the facility for an extended amount of time (e.g. overnight, vacation, etc.) the unit RN or LPN must be notified three business days in advance to ensure that the resident's medications are prepared to accompany them on their leave.

# **Parking**

Saint Vincent's provides parking on a first come first served basis for families, staff and visitors, with the first row being reserved for visitors only. Those using our parking facilities require a visitor's parking pass, which is obtained from the receptionist. Cars not displaying a parking permit may be ticketed or towed.

# How to Respond to a Fire Alarm

Upon hearing the fire alarm bells volunteers and family members should remain where they are and await further instructions from the nursing staff on the unit.

### **Over the Counter Medications**

Saint Vincent's provides a limited supply of over the counter medications. These medications are generally used on an as needed basis. The resident will be billed directly by the consulting pharmacy for regularly scheduled medications (including over the counter pills) and therapies not covered by Pharmacare. The following is a list of the as needed medications currently provided:

## **Analgesics**

- Acetaminophen 500mg tablets
- Acetaminophen 325mg tablets
- Acetaminophen 160mg/ml liquid
- Acetaminophen suppository

### Laxatives

- Bisacodyl 10mg suppository
- Senokot
- Lactulose liquid
- Microlax enema

### Anti-emetic

- Dimenhydrinate (Gravol) 50mg tablets
- Dimenhydrinate suppository

### Skin/hair/other

- Bioderm ointment
- Nizoral Shampoo
- Polysporin eye drops
- Almagel
- Bronchophan expectorant

# **Safety and Security**

Saint Vincent's, through participation and active support from the Board of Directors, senior leadership, the JOH&S Committee and all staff, acknowledges that a culture of safety is a guiding principle in the provision of appropriate care for residents and a safe work environment for all. Our goal is to provide a safe and secure environment for residents, family members, visitors, employees and volunteers associated with the delivery of care. To that end, steps must be taken to ensure that rooms are oriented in a manner that supports safety. The Clinical RN/LPN will be happy to discuss the resident's particular needs and make recommendations that will provide for their safety and comfort.

### **Purchases**

Saint Vincent's supplies basic furnishings for resident rooms as well as items for personal hygiene such as toothpaste, soap, etc. The following list gives examples of items for which residents will be required to pay:

- Transportation taxi, ambulance, etc.
- Fans
- Specific brands of shampoo, (unscented) lotion, soap, toothpaste, deodorant, etc.
- Night lights
- Batteries
- Mirror (in addition to the one provided)
- Repair/cleaning of personal furnishings
- Comforters (other than those provided)
- Medical supplies not provided (i.e. compression stockings, braces)
- Cable, telephone and internet.

# **Smoke-Free & Scent Reduced Environment**

Smoking, including the use of e-cigarettes, is prohibited anywhere on the property, including in vehicles parked on the premises. This policy applies to residents, employees, volunteers and

visitors. Saint Vincent's is a scent-reduced environment and as such we request that all staff, residents and visitors limit the use of fragrances and perfumed personal care products due to sensitivity by staff and other residents. Due to their high perfume, lilies and other fragrant flowers are not permitted.

# **Electrical Appliances**

All electrical appliances need to be CSA approved and inspected by maintenance staff prior to being taken to a resident room. The number of electrical appliances that can be maintained in a resident room should be kept to a minimum to ensure a safe environment. Typically, permissible appliances include a lamp, television, radio, etc. Appliances with heating elements, including but not limited to kettles, heating pads, electric blankets, are not permitted for safety reasons. Individual bar fridges are not permitted in resident rooms. Residents should contact their Clinical RN/LPN for more information if needed. Proper maintenance of all electrical equipment is mandatory. Maintenance staff may be able to initiate repairs in-house or make arrangements for outside service or replacement as required, at the expense of the resident. In compliance with the Nova Scotia Fire Code we do not allow extension cords in our facility. As an alternative we recommend a power strip with its own circuit breaker. If you have any questions or concerns regarding the suitability of a power strip, please see our facility maintenance staff.

### **Resident Room Decoration**

Saint Vincent's will endeavour to accommodate resident preference when decorating rooms including the positioning of personal furniture. However, safety considerations will always be given priority over personal preference.

### **Resident's Valuables and Loss of Personal Effects**

Saint Vincent's does not assume responsibility for the loss of money or breakage (or loss) of valuables including hearing aids, dentures and eye glasses. If personal property, money or valuables are missing, please report it immediately to the Clinical RN/LPN. It is recommended that jewellery or other items of sentimental value be kept offsite.

# **Identification of Personal Belongings**

The seamstress at Saint Vincent's labels all residents' clothing upon admission. Please remember to take new clothes to the seamstress for labelling. The seamstress will also mend and repair resident's clothing as necessary. All pictures and personal items should be labeled prior to bringing them to Saint Vincent's.

# SECTION V GENERAL INFORMATION

# **Family Responsibility**

Saint Vincent's realizes the importance of continued family involvement in the care of a loved one. It is the expectation of Saint Vincent's that the family will continue to provide support to the resident. The resident and their family members are encouraged to play an active role in the development of the resident's care plan and are invited to participate in events and activities at Saint Vincent's. If accompaniment is necessary, family members will be expected to escort their relative to medical appointments and social events outside of Saint Vincent's.

### **Residents' Council**

Saint Vincent's Residents' Council is an organization to which every resident may belong. Residents' Council meets monthly to share information and to discuss problems or concerns that residents wish to raise. This is an opportunity for residents to be kept up to date on any activities that are going on within the nursing home.

# **Resident & Family Centred Care Advisory Committee**

The Resident and Family Centred Care Advisory Committee serves in an advisory capacity, making recommendations on matters that impact the experience of residents and their families at SVNH. All residents, families and staff are invited to attend any or all meetings. Meetings are held monthly in the chapel.

### Responsibilities:

- Inform and make recommendations about the implementation and evaluation of the strategic plan,
- Actively promote and create new and unique opportunities for communication, collaboration and partnering among residents, families and staff,
- Identify and support opportunities for improvement within SVNH from the resident and family perspective,
- Review quality reports on the resident experience,
- Celebrate and share milestones and successes.

Agenda and minutes are emailed to families and residents who have provided their email address. A paper copy will be posted on the information bulletin board outside the Nutrition Services office as well as in the elevators. Minutes can also be found on our website.

# **Resident Care Conference (IRCC)**

The Resident Care Conference promotes a resident and family centred approach to the care planning process that ensures appropriate care and treatment is planned based on the resident's needs, wishes, medical status, and capabilities. It ensures the care planning process is timely,

systematic and comprehensive and incorporates input from residents, families and all disciplines. Care is planned by the interdisciplinary team, which includes: Clinical RN (facilitator), resident, family, LPN, resident services manager, recreation, chaplain, clinical dietitian, and physiotherapist. The post admission care conference will be held within 6-8 weeks of admission and then yearly thereafter for each resident. Other care conferences may be held if there is a significant change in the resident's status.

The resident/SDM will be notified of these meetings through a written invitation via email (for those who provide an email address) or regular post. Documentation on the discussion items and goals of care will be emailed/mailed to the resident/SDM following the meeting.

# **Spiritual Participation**

Spiritual care is provided through a variety of services to meet the needs of the residents as requested whether it be spiritual support, visitation, palliative care or worship services.

Visitation by the resident's own clergy or spiritual care representative is very much encouraged. However, it is much appreciated for such visitors to identify themselves with the staff or pastoral care department when they visit so that they are aware the residents' spiritual needs are being met. It is also recommended that church representatives leave their contact information with the nursing staff, should they wish to be notified in the event of an emergency.

Family members are encouraged to accompany their loved ones to worship service when possible. Worship service times are listed on the monthly recreation calendar and reminder signs are posted on the units on the day of the service. Residents are welcome to attend any worship service of their choosing. Unavoidable cancellations will be posted on our website.

# Hospitalization

When a resident of Saint Vincent's is hospitalized, their accommodations may be held for a period of 30 days. Arrangements must be made and permission granted by the Department of Seniors and Long-Term Care to hold a bed past 30 days. If you have any questions, please contact the resident services manager.

# **Funeral Arrangements**

Saint Vincent's believes that the quality of life is a fundamental issue for everyone and it respects the wishes of each resident in regard to their care when death is imminent. Saint Vincent's strongly encourages residents and their families to consider prearranged funerals. Questions about funeral arrangements can be discussed with the Clinical RN on the unit.

### **Personal Care Directives**

Anyone in Nova Scotia with the mental capacity to understand what they are writing is able to prepare a personal care directive. This directive is used to establish instruction for personal care decisions, i.e. health care, comfort, recreation. This does not include or give authority for financial decisions. The purpose of this directive is:

- 1. It allows individuals to appoint a decision-maker to make a personal care decision on their behalf should they become incapable of making the decision.
- 2. It allows individuals to set out instructions or general principles about what or how personal decisions should be made when they are unable to make the decision themselves.
- 3. It provides for a hierarchy of decision-makers to make decisions regarding health care, placement in a continuing care facility and home care where the individual has not prepared a personal care directive in relation to those decisions. In the event a Personal Care Directive is not in place, a statutory decision-maker is established through rational hierarchy.

The resident services manager is available to discuss what options are available.

# **Substitute Decision Maker (SDM)**

Pursuant of section 2(j) of the *Personal Directives Act*, a substitute decision-maker is put in place after a person has been deemed to lack capacity and does not have a Personal Care Directive identifying a decision-maker. Substitute Decision Makers (SDMs) must be either the spouse or the closest blood relation to the resident as established in the SDM hierarchy of relations. The identified SDM must have been in personal contact with the resident within the last 12 months. If for any reason a person does not wish or cannot act as an SDM and is the closest relation they must write a letter stating such. If no person can be identified the resident will then fall under the Public Trustee. For any further questions surrounding decision-making please contact the Clinical RN or the Resident Care Manager on the unit.

### **Advanced Care Directives**

A resident or substitute decision-maker will be asked to complete an advanced care directive within 24 hours of admission. This document offers choices about medical care, hospitalization, etc. The RN/LPN on the unit is available to discuss this directive with you. Once completed the document is then put in the resident's chart and reviewed by the attending physician who may wish to discuss your choice with you. An advanced care directive may be changed at any time by the resident or substitute decision-maker. The advanced care directives will be reviewed with you annually at the Resident Care Conference and/or if the resident has a change in health status.

### **Palliative Care**

Palliative care at SVNH is resident-centred care that aims to relieve suffering and improve the quality of life for the resident and their family. The plan of care would address the physical,

psychological, social, and spiritual needs of both the resident and family through the dying process and continue to provide support into bereavement.

### Palliative Care will:

- Focus on resident centred care with services planned and provided in accordance with the values and wishes of residents and their families,
- Emphasize quality of life of the resident and symptom control, while respecting their dignity and privacy,
- · Require an interdisciplinary approach,
- Include the participation of residents/families in all decisions concerning them. To make
  informed choices, they must be clearly informed as to their condition and the various options
  open to them,
- Is needed the greatest by a resident who is expected to die within the next year.

Our goal is to provide comfort and compassionate care for the dying resident and their loved ones. The Clinical RN on your unit will be able to discuss our palliative care policy with you further.

### **Ethics Committee**

The Ethics Committee is a multidisciplinary forum which helps to support ethical practice at Saint Vincent's through education and consultation/review of ethical issues.

The responsibilities of the committee are:

- To provide an avenue for residents, families and staff to seek guidance in addressing an ethical dilemma.
- To develop and implement a framework for ethical decision-making which facilitates a thorough review of an ethical issue in an open and collaborative manner.
- To develop policies and procedures to support an ethical organization which are evidencebased and reflect best practice.
- To identify educational needs to promote ethically sound practice for committee members, staff, residents and families. To provide educational opportunities to address these needs.
- To apply an ethics lens in the development and/or review of clinical and administrative policies and procedures.
- To act as a resource and support research initiatives conducted within the organization.

The committee meets monthly and includes staff from all departments and disciplines. Resident and family participation is strongly encouraged.

# When a Resident is Discharged

When a resident is permanently discharged for any reason, it is very important to prepare the vacated room for a new admission as soon as possible. All personal belongings must be removed from the room within 24 hours. If this is not possible please notify the nursing staff who will arrange to have it prepared for pick-up on your behalf. Personal items may be stored for up to one week. Due to space limitations any possessions remaining in storage after one week will be donated and/or disposed of. All electronic donations must be approved by the Facility/Maintenance Manager.

There is a \$25 disposal fee for privately-owned electronics or furniture left at the home which will be included in any money owing in the resident's account. Due to the Privacy Act, staff at Saint Vincent's are not authorized to contact the service provider to terminate phone or extra cable services on behalf of a resident. Therefore, the family is responsible for contacting the appropriate provider upon discharge. The digital cable box and remote is to be left in the room to be retrieved by maintenance staff.

### Pets on the Units

Saint Vincent's is a pet friendly environment. We recognize the emotional and social value of pets to many residents; therefore, pets are permitted on the units. In order to ensure the safety of residents and staff, persons bringing pets into the facility must ensure their pet is on a leash or contained at all times; pets must not be in the lounges/dining rooms or the Windsor Room during meal service and pets are not allowed in the main floor kitchen area. Pets must not be left unattended with a resident. Please ask the RN/LPN on the unit if there are any allergy issues you need to be made aware of prior to visiting with a pet.

### **Social Media**

Social media offers a way for residents to connect with family and friends who may not be able to visit as often as they may wish to. From time to time photos are taken of residents at functions and posted to the Saint Vincent's Nursing Home Facebook page or our website. Upon admission you are asked to sign a blanket approval form to allow us to use any photos we deem tasteful and appropriate. Written notice is required should you wish to opt out of this agreement.

### **Gifts**

Saint Vincent's is committed to being a professional and ethical workplace and as such its employees and volunteers are not permitted to accept tips or gifts (including gift cards) from residents or family members. Non monetary items such as flowers, candy or baked goods to be shared among employees, are acceptable.

# **Family Gatherings**

The boardroom on the 2nd floor is available should you wish a larger space than the resident's room for a family function. To book the boardroom see the receptionist. As space is limited, the room is reserved for Saint Vincent's functions during regular office hours Monday through Friday.

# **Complaints Procedure**

At Saint Vincent's we value open, honest conversations. We invite and welcome feedback from you as a means of improving the service that we offer, this includes any concerns or complaints that you may have.

Concerns and complaints should be brought to the attention of a registered staff as soon as possible. The Clinical RN and Resident Care Manager for the floor are generally available during regular business hours, but there is always a responsibility RN on duty who will be happy to ensure that concerns or complaints are addressed and brought to the attention of the appropriate manager. As well, our department managers are available for questions and concerns related to their areas.

We will attempt to address the issue directly but if it is not resolved or you wish to discuss further, please do not hesitate to contact the Director of Resident Care or the CEO.

Residents may also voice concerns or complaints during Residents' Council meetings, and everyone is encouraged to use the comment box in the lobby should you wish to remain anonymous or are not able to connect with the correct member of our team.

There is sometimes a reluctance by families or residents to report concerns for fear of retribution. Although understandable, we are hopeful you will trust us with your concerns. Any negative behaviour experienced after making a report should be shared with the Director of Resident Care; it is contrary to our code of conduct and will not be tolerated.



# SECTION VI SERVICES FOR THE RESIDENT

# **Care by Design (Medical Services)**

Residents may keep their family physician after admission to the nursing home providing their physician is willing to make required visits on a regular basis <u>and</u> provide after hours calls. Saint Vincent's does provide access to a physician on each nursing unit for residents whose family physician will not follow them after they are admitted. The unit physician collaborates with the care team on a weekly basis (or more often as required) to meet residents' medical needs (e.g. medication assessments, comprehensive geriatric assessments, etc.).

# **Extended Care Paramedic (ECP)**

Residents at Saint Vincent's have access to enhanced on-site health care from highly trained paramedics which may avoid unnecessary trips and long waits in the hospital emergency room. In consultation with the nursing home physician and the care team, the ECP can deliver some of the same care at the resident's bedside in the nursing home that is provided in the emergency department (e.g. intravenous fluid, suturing, assessment after a fall, pain management, etc.). This service would only be contacted in non-emergency situations. A resident requiring emergency medical treatment would be transported to the emergency room immediately.

### **Consultant Pharmacist**

Pharmacy services are provided by Lawton's Northwood. Lawton's provides a wide range of professional services to help achieve rational drug therapy for residents and to enhance resident outcomes and quality of life. A consultant pharmacist, a pharmacist who provides advice on the use of medications by individuals or within an institution, is assigned to work at Saint Vincent's. The pharmacist is available for medication reviews, focused drug reviews, over the counter medications management, in-service training, staff training and orientation, committee and policy development, quality assurance evaluation, accreditation, drug information services, resident assessments and medication monitoring. Pharmacists help to optimize outcomes through prevention, detection and resolution of drug related problems.

You may contact Lawton's Northwood at 902-453-6886 (ext. 2) should you have any questions regarding these services or their accounts department at 902-454-0110, should you have any questions regarding your Lawton's statement.

### **Nutrition Services**

SaintVincent's strives to provide a pleasurable and supportive dining environment that promotes resident enjoyment, safety, comfort, independence and dignity. Meal service is provided to all

residents in the dining room/lounge on each unit. Nutrition Services have staff on each unit on a daily basis. The kitchens on each unit are supplied with snacks and refreshments for the residents. Nursing staff provide assistance with afternoon and evening snacks. Family/friends may utilize the lounges outside of meal hours as available.

# **Telephones**

All resident rooms are equipped with a telephone jack. Staff at Saint Vincent's are not authorized to contact the service provider to connect a resident's telephone; therefore the resident or a family member is responsible for contacting Bell Aliant or Eastlink and to ensure direct payment to the phone company.

# **Televisions**

All rooms are equipped with one cable television outlet per person. The residents are asked to place their television within six feet of the outlet in order to eliminate the safety hazards associated with long cables. Basic cable service is available for a charge to all residents and must be initiated by the accounts officer. A digital cable box plus remote will be provided. Those wishing to have additional premium packages must contact Eastlink Cable directly to arrange for installation and direct payment. For resident rooms, Saint Vincent's accepts flat screen TVs only, up to 32".

### Internet

Our facility is equipped with a WIFI network for all residents and guests to use free of charge. The network name is SVGuest and the password is 2080windsor. Please note that the strength of the WIFI signal may be reduced in some rooms.

### **Postal Service**

All personal mail is delivered to the nursing station on the unit. Mail to residents should be addressed as follows:

Name of Resident, Room # Saint Vincent's Nursing Home 2080 Windsor Street, Halifax, NS B3K 5B2

Postage for outgoing mail may be purchased through the accounts officer between 9:00 AM and 4:00 PM, Monday to Friday.

Canada Post will not accept personal mail redirected from a nursing home. The family must change the address of any such mail at the source.

# **Emailing a Resident**

Family members and friends of a resident may send electronic messages to a resident by accessing the "email a resident" section on our website at https://svnh.ca/contact. All such messages will be printed and delivered to the resident by the next business day.

# **Newspaper Delivery**

If a newspaper is desired, the resident or family member is responsible for contacting the service provider and to ensure direct payment of the bill. Once received by reception, the newspaper is delivered to the resident's room.

# **Laundry Services**

Personal laundry service is provided to all residents; but family members are responsible for any item that requires special laundering.

# SECTION VII CONTRACTED SERVICES

For liability reasons Saint Vincent's Nursing Home reserves the right to allow or not allow a service provider on the premises other than those listed below. If a resident requires a contracted worker on site, prior approval from management is required. The following contracted services are licensed, insured and authorized by Saint Vincent's Nursing Home to provide services to our residents.

### **Hair Salon**

Saint Vincent's has a hair salon located on the first floor. If you wish to take advantage of this service, appointments can be made directly with the hairdresser or by phone at ext. 118. Regular working hours are 9:00 AM to 3:00 PM Tuesday through Friday. The fee for the service is posted in the salon and may be deducted from the resident's trust account.

### **Dental Services**

Saint Vincent's has a dental suite in the medical clinic on the 3<sup>rd</sup> floor. Residents who wish to see, or are referred to a dentist may do so by contacting the RN on the unit.

### **Foot Care**

Saint Vincent's contracts out specialized foot care to a preferred provider. If you require or are advised to seek specialized foot care, contact information is included in your admission package or available from the resident services manager.

# Massage Therapy

A qualified massage therapist from Massage On-Site Therapy (MOST) visits Saint Vincent's on a weekly basis. A brochure is included in the admission package or available from the resident services manager.

# SECTION VIII DEPARTMENTS of SAINT VINCENT'S

### Office of the Chief Executive Officer

The CEO's office is located on the first floor. The CEO is responsible for the efficient functioning of the facility. Residents and families may arrange an appointment through the executive assistant to discuss questions or issues that may arise.

# **Support Services**

Support Services is comprised of both Nutrition Services and Environmental Services for the facility. Nutrition Services is committed to providing high quality food and nutritional services as an essential and integral part of the total facility.

Environmental Services is responsible for a variety of services: every day cleaning, linen, laundry, and general help in the resident rooms. Our on site seamstress is responsible for mending and marking clothes with name tags. The seamstress is located on the first floor. Normal working hours are 8:00 AM to 4:00 PM Monday to Friday.

The support services office is located on the main floor across from the kitchen. A supervisor is available daily from 7:00 AM to 7:00 PM.

### Maintenance

The Maintenance Department provides a wide variety of services for residents and family members, as well as staff and volunteers. These services are provided by ensuring the efficient operation of the physical plant and associated equipment; providing repair and consultation services for all areas of the building and contributing to the overall safety.

Any questions, requests or special requirements that you may have can be directed to the Maintenance Department through the RN/LPN on the unit. The office of the Facility/Maintenance Manager is located on the first floor adjacent to the laundry room. Normal working hours are 7:00 AM to 3:00 PM Monday to Friday.

### **Resident Care Services**

The nursing staff is comprised of registered nurses (RN), licensed practical nurses (LPN), personal care workers (PCW) and continuing care assistants (CCA). In collaboration with other members of the care team, the residents and their families, the nursing staff is committed to the provision of quality resident care based on the resident's needs and preferences.

The Clinical RN on each unit is responsible to ensure the continuity and quality of resident care on their unit. They are key in building relationships with residents and families.

The Resident Care Managers are responsible for the safe and competent delivery of care and for the management of resident care services and personnel with their assigned unit(s). They provide leadership and direction in creating an environment that supports Resident and Family Centred Care.

The Director of Resident Care is responsible for the overall performance of the Resident Care Department consisting of nursing services and therapeutic services.

Registered staff are on duty 24-hours a day, seven days a week, to provide nursing and supervisory care. PCW/CCAs comprise the largest number of nursing staff on the unit and are instrumental in the provision of activities of daily living for the resident.

Any concerns or issues regarding care should be directed initially to the RN/LPN on the unit for immediate attention. The Clinical RN can be contacted to discuss any concerns regarding care planning, needs and preferences.

### **Pastoral Care**

Spiritual Care is provided by a full-time chaplain, a part-time Roman Catholic Priest and volunteer clergy from the community.

Anglican, Baptist, Presbyterian, Roman Catholic and United Church services are scheduled for residents as available. Residents of all faiths and denominations are supported through pastoral care visits, if requested.

The recruitment, training and coordination of palliative care volunteers is managed through pastoral care. Our chapel, a unique feature of Saint Vincent's, is located on the 2<sup>nd</sup> floor through the solarium. The pastoral care office is located on the 2<sup>nd</sup> floor outside the solarium. Office hours are Monday through Friday 7:30 AM to 3:30 PM or call ext. 116 for an appointment.

# **Physiotherapy**

The physiotherapy department is located in a well equipped, bright room on the 4<sup>th</sup> floor. All new residents are assessed by the physiotherapist within the first two weeks. Those residents with a change in function secondary to injury or medical status are also re-assessed and monitored. Treatment or general exercise classes may be recommended. Additional referrals may be made through the RN/LPN or resident/family request. You may contact the physiotherapy department at ext. 123.

# **Occupational Therapy**

The occupational therapy department will work with residents and families to complete requests for specialized equipment. They share an office with physiotherapy and may be contacted at ext. 123.

# **Recreation Therapy**

The recreation therapy department provides a range of leisure programs that are designed to meet the residents' physical, social, emotional, intellectual and spiritual needs based on their preferences and abilities.

The recreation therapy department strives to engage each resident in stimulating and meaningful activities, tailoring recreation care plans to the person's interests, preferences and abilities. The recreation staff ensures continuous assessment, review and revision of these plans as the resident's abilities and interests change. The recreation staff understands that a resident's participation and engagement in group or one-on-one activities can be an important way to support independence, provide a sense of accomplishment, and a sense of self.

Residents are provided with a recreation therapy calendar each month that outlines a schedule of programs, special events and community outings. The monthly calendars are also posted on the SVNH website at https://svnh.ca/news-and-events.

Families and friends are welcome to support and attend the various programs. We encourage you to discuss your leisure preferences with the recreation staff on your unit.

The recreation therapy office is located in the south wing of the first floor and open 8:00 AM - 4:00 PM Monday to Friday and from noon to 4:00 PM Saturday. You may contact the recreation department at ext. 119.

# Music Therapy

The Music Therapist works in collaboration with the recreation therapy department and the interdisciplinary team to support residents' goals using music. Group programs are offered on the units, and individual sessions are provided on a referral basis, following assessment. Music can help with adjustment, social interaction, emotional expression, communication as well as physical and cognitive goals. The Music Therapist hours are Monday and Thursday 8:00 AM to 4:00 PM and can be reached at ext. 119.

# **Resident Services**

Our resident services manager is your first point of contact upon admission. They are available to assist with issues such as the transition to a long term care facility for residents and their families, requirements for acquiring special needs or applying to the specialized equipment/ over cost program, and resident advocacy. The resident services manager acts as a liaison between residents, nursing staff, administration, government or private agencies. The office of the resident services manager is located in the south wing of the first floor and available from

8:00 AM to 4:00 PM Monday through Friday. You may contact the resident services manager at ext. 113.

### **Clinical Dietitian**

The clinical dietetic manager works as a member of the resident care team to provide optimal nutritional care for each resident appropriate to their health requirements, personal needs and quality of life. Shortly after a resident is admitted, the resident and/or SDM will be visited by the clinical dietitian to assess their nutritional care needs. Nutritional care plans are developed in keeping with the resident's likes/dislikes, personal choices and cultural preferences. The clinical dietitian also provides nutritional counselling and education sessions for residents/SDMs as required.

The office of the clinical dietetic manager is located on the 1st floor across from the kitchen and is available Monday to Friday from 8:00 AM to 4:00 PM and may be contacted at ext. 104.

### Volunteers

Volunteer services at Saint Vincent's has a team of over 60 individuals as well as community groups assisting in many areas. These include friendly visiting, meal assistance (training is provided) assistance with recreation therapy activities, escorts to medical appointments, pet visits, religious services and special events. Additional volunteers are always appreciated and welcomed.

To register or to obtain more information please contact the recreation therapy department at ext. 119 or via our website at https://svnh.ca/careers/volunteer/. The recreation therapy office is located in the south wing of the first floor. Regular working hours are Monday to Friday, from 8:00 AM to 4:00 PM.

### Saint Vincent's Foundation

Saint Vincent's Nursing Home Foundation was established in 1991 to receive monetary gifts for funding the development of the facility. Donations to Saint Vincent's through memorial gifts, bequests, etc. provide "little extras" to help brighten the days of the residents. All gifts to the Foundation are acknowledged with a receipt for income tax purposes and families of those honoured through memorial gifts are informed of the names of the donor.

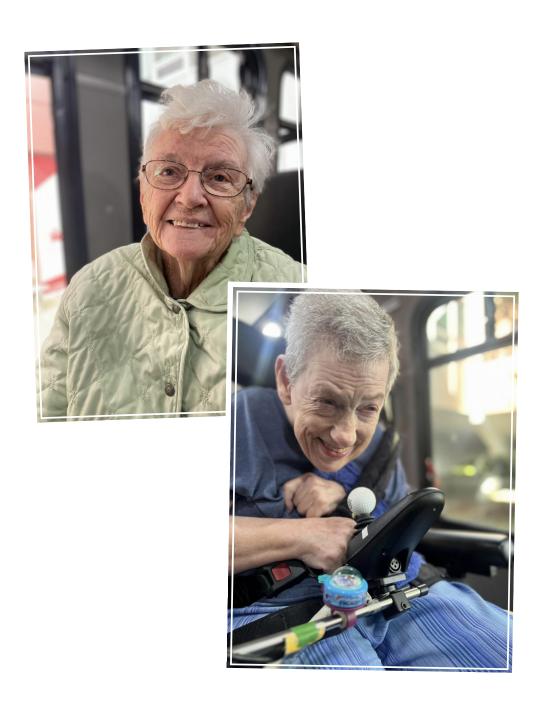
For more information or to make a donation contact the executive assistant at ext. 112 or the home page of our website at https://svnh.ca/donate.

# Gift from the Heart Fundraising Campaign

As a private not-for-profit accredited nursing home solely financed through daily accommodation rates, we require the help of the community to help support our commitment

to promote quality of life for all our residents. In order to have the funds necessary to maintain the excellent standard of care that has become synonymous with Saint Vincent's, an annual fundraising campaign was established in 2001. Each year a committee determines the focus of the project based on the needs of the residents.

The annual *Gift from the Heart* fundraising packages are mailed/emailed in early December and donations are welcomed by the executive assistant. Tax receipts are issued for all donations.



# **Directory**

The following is a list of the various departments and where they are located. The phone number for the main switchboard that connects all offices is **902-429-0550**.

| Department                            | Floor | <b>Extension</b> |
|---------------------------------------|-------|------------------|
| Chief Executive Officer               | 1     | 103              |
| Director of Finance                   | 1     | 133              |
| Director of Operations                | 1     | 125              |
| Director of Resident Care             | 1     | 136              |
| Accounts Officer                      | 1     | 121              |
| Chaplain                              | 2     | 116              |
| Dietitian                             | 1     | 104              |
| Facility/Maintenance Manager          | 1     | 131              |
| Support Service Supervisors           | 1     | 124              |
| Hair Salon                            | 1     | 118              |
| Laundry/Seamstress                    | 1     | 127              |
| Resident Care Manager, Unit 2         | 2     | 143              |
| Resident Care Manager, Units 3 & 4    | 4     | 139              |
| Resident Care Manager, Units 5 & 6    | 6     | 126              |
| Resident Services Manager             | 1     | 113              |
| Occupational Therapist                | 4     | 123              |
| Physiotherapist                       | 4     | 123              |
| Recreation Therapy/Volunteer Services | 1     | 119              |

# **Nursing Stations**

| Unit | Direct Line  | Extension |
|------|--------------|-----------|
| 2    | 902-407-0829 | 117       |
| 3    | 902-407-0831 | 128       |
| 4    | 902-407-0834 | 137       |
| 5    | 902-407-0836 | 129       |
| 6    | 902-407-0837 | 115       |

# **Commonly used Acronyms at SVNH**

(not a complete list)

| ADL        | Activities of Daily Living                      |
|------------|---|
| AP         | Adult Protection                                |
| CBD        | Care by Design                                  |
| CC         | Continuing Care                                 |
| CCA        | Continuing Care Assistant                       |
| CEO        | Chief Executive Officer                         |
| CQI        | Continuous Quality Improvement                  |
| DSLTC      | Department of Seniors and Long-Term Care        |
| DOC        | Director of Resident Care                       |
| DVA        | Department of Veteran Affairs                   |
| ECP        | Extended Care Paramedic                         |
| EMC        | Emergency Medical Care (Ambulance)              |
| ESW        | Environment Services Worker                     |
| FSS        | Food Service Supervisor                         |
| HELP       | Health Equipment Loan Program                   |
| IT         | Information Technology                          |
| LPN        | Licensed Practical Nurse                        |
| LTC        | Long Term Care                                  |
| MAiD       | Medical Assistance in Dying                     |
| OH&S       | Occupational Health & Safety                    |
| OT         | Occupational Therapist                          |
| PCW        | Personal Care Worker                            |
| PT         | Public Trustee                                  |
| RCC        | Resident Care Conference                        |
| RCM        | Resident Care Manager                           |
| RFCC       | Resident & Family Centred Care                  |
| RN         | Registered Nurse                                |
| SDM        | Substitute Decision Maker                       |
| SEA        | Single Entry Access                             |
| SVNH or SV | Saint Vincent's Nursing Home                    |
| WHMIS      | Workplace Hazardous Material Information System |
|            |   |

# **NOTES**

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|------|