



*There is Hope: Welcome Guide to Long Term Care Communities*

*About the Cover*



*About the Cover*

*"This painting is one from a series that came out of my use of random colours and brush strokes. I search the pattern for faces. I search through chaos to find the patterns that express my feelings inside. Once I find the face, I create a background. The final product portrays my internal emotions and physical feelings."*

*Dennis Anderson — Cover Artist  
Artist in Residence Program Participant  
Sherbrooke Community Centre  
Self Portrait #2, 2008  
acrylic on canvas*



*Dennis Anderson with Jeff Nachtigall  
Artist in Residence Program  
Sherbrooke Community Centre*

*This guide has been created by Continuing Care and Seniors' Health.  
If you have any questions about the content of this guide, please call our office at 655-8216.*



Now that's a good question! Have the dreams of travel, relaxation, life with the grandchildren become lost in a sea of doctor visits, aches and pains and downsizing?

These are the golden years or at least they can be. Maybe some of you haven't reached the age usually considered golden. Be that as it may, the years ahead can be good years. It depends on you.

As you enter this new phase of your life, remember that people understand that you are afraid of meeting new people and letting go of the familiar. Change is scary. I cannot offer a magic cure to alleviate this fear. We are all afraid, but I assure you that this too will pass.

**1. Information is power.** This booklet is filled with information, read it, study it. It can remove some of the fears. It is an easy read. As you read it, write in the margins. Ask questions. This book will be the key to your new life.

**2. You are entering a community of peers.** You will be welcome. There will be strange, even bizarre behaviours you will encounter. Accept them. In this community you will be required to surrender some of your autonomy which will include loss of privacy, of choice, but not your dignity. Hold fast to your dignity. A person has an innate right to respect and to ethical treatment regardless of race, culture, age or ability. You should experience respect as your due, a positive sense of self-esteem, simply because you are a person.

**3. Care will be provided for the most part in a professional and competent manner.** Don't expect miracles. The people providing care have your best interests at heart. They work very hard. They see every contact as an opportunity to enhance the relationship between yourself and the community. Help them do this.

**4. When you fill out your personal profile (All About Me), don't do it all at once.** Keep it front and center so that it can be amended, added to, reviewed as new ideas are formalized.

**5. Remember to speak of what is beautiful.** As we move into a new situation at a time when stability and order are very important, we become very cautious. Remember people are crying out for intimacy, they want to be appreciated, touched, physically and emotionally. On entering an institution you are very vulnerable so you have to learn to trust. Trust requires faith, not religious faith, but a belief in other people. Otherwise, life in a care home can be very difficult.

**6. Figure out what contribution you can make to this community.** For example, one resident has taken it upon herself to greet everybody with a smile and a handshake. Another one is a very good listener. A third resident offers praise to the people she meets. My contribution is doing what I love to do -- collect and write stories for others to read. Hopefully help them remember. I have computer skills which I am willing to share.

Most important, do not dwell on the reality of the moment. It can overwhelm you. Instead, let the possibilities of this moment encourage you to believe there can be gold in the time ahead. Always remember, that because you are a person you have a right to be. It is not shameful to ask for help. ~ Jack Funk

At the age of 83, Jack Funk had lived with Multiple Sclerosis for 40 years, having lived in a long term care home for the last seven. He authored several books including "IF YOU WAIT—SOMEONE WILL COME", a satirical look at life in that home. Jack's words will continue to have impact and inspire others, having shared his gifts of humour and storytelling. He died on August 22, 2010 in the room that had become home to him.

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*Life is what we make it, always has been, always will be. Grandma Moses*

*Welcome!*

### ***Welcome to Long Term Care Homes within Saskatoon Health Region***

Moving into a long term care home can be an overwhelming experience for many people and their families. Waiting to find out where you will live can be just as unsettling.

Saskatoon Health Region, through the department of Continuing Care and Seniors' Health, has created this guide to help answer some of your questions or concerns. The information within this guide has been compiled by Continuing Care and Seniors' Health.

We recognize that your move means change for you and for your family. You will be settling into a new home and a new community. Your new community will support your health, well-being, comfort and quality of life.

The information in this package provides a general overview of what you can expect as you enter your new home within Saskatoon Health Region.

However, each home may have additional specific guidelines and information not covered in this guide. For example, some homes are designated "scent free" while others are "scent reduced."

We encourage you to ask questions and talk to your care providers about the specific home where you will live. We have created a "notes" section at the end of this guide for you to write down these questions.

This guide will walk you through what to expect before, during and after your move. We have also included commonly asked questions and answers.

We hope you find this useful and we look forward to helping you through this new journey.



*It's about making the move to a long term care facility a simple change of address rather than the loss of home, purpose or identity.*

*Steve Shields and Lavrene Norton  
In Pursuit of the Sunbeam*

## ***Introduction to Long Term Care Homes in Saskatoon Health Region***

Saskatoon Health Region is home to more than 2,000 individuals living in 29 long term care homes. You will hear these sometimes referred to as Special-care Homes. Special-care Home is the legal entity within which long term care services are provided. In this guide, we will refer to them as long term care homes.

Within Saskatoon Health Region, ten homes are wholly owned and operated by the Health Region and 19 homes have a contract with the Health Region to deliver care. These 19 homes are called Affiliates.

Affiliate homes are responsible to a Board of Directors and also to Saskatoon Health Region. All homes focus on providing quality care and providing quality of life for residents.

Just as you have qualities that make you unique, each home has qualities, characteristics, and philosophies that are unique. Some homes have their own vision, mission and values. You will learn more about services unique to your new home and its distinct physical environment upon moving in.

### **Saskatoon Health Region Vision, Mission, Values, and Promise**

Saskatoon Health Region's vision, mission, values and promise reinforce staff and residents' goal to create a community within each of the 29 long term care homes.

<i>Our Vision</i>	Healthiest people, healthiest communities, exceptional service.
<i>Our Mission</i>	We improve health through excellence and innovation in service, education and research, building on the strengths of our people and partnerships.
<i>Our Values</i>	We believe that our daily actions, interactions and decisions will reflect: <i>Respect</i> - Recognizing that all people and their needs are important; <i>Compassion</i> - Caring genuinely for others; <i>Excellence</i> - Pursuing quality in all that we do; <i>Stewardship</i> - Demonstrating trust and integrity in our responsible use of resources; <i>Collaboration</i> - Cultivating and honouring relationships to better serve our communities.
<i>Our Promise</i>	Every moment is an opportunity to create a positive experience in the way we treat and care for people, in how we work and interact with each other, and in how we deliver quality service. We promise to seize every opportunity.

### Resident Directed Care

The people living in our long term care homes and their families give us the guidance we need to improve the care we provide and create a place that has the warmth of home.

Resident directed care places residents at the centre of their care by giving them choice. This means residents participate in planning their care. This means encouraging independence and ensuring residents participate in decisions affecting their environment – their home.

We also recognize not all residents are capable of communicating their needs. We will work to honour their past preferences and lifelong habits.



### Respect and Dignity

Respect and dignity are important values in a caring environment. Being considerate, treating each other with honour and interacting in a cooperative manner are expectations of staff, residents and visitors.

Saskatoon Health Region has a Respect and Dignity policy that supports the idea that all people have the right to fair treatment and deserve mutual respect. Tolerance and understanding are also principles to be promoted.

### Disclosure

Effective communication is at the heart of safe and effective care. By communicating openly and honestly, there is greater likelihood for increased trust and satisfaction between residents and the care team.

Saskatoon Health Region has a policy on disclosure which means we are committed to speaking openly, honestly and caringly to a resident when errors take place.

Saskatoon Health Region and Affiliates also believe that residents and their families are entitled to information about the outcomes of tests, treatment, and care. In some cases, poor outcomes are a result of an adverse event. Saskatoon Health Region and Affiliates are committed to respecting the rights of residents and their families to be informed about such events.

What are some examples of disclosure?

*A resident suffering from dementia was struck by another resident and has a cut on her forehead as a result. The RN contacts the resident's key contact person to inform the family of the incident.*

*A resident was given a medication intended for another resident. The RN speaks with the resident to make him aware of the medication error.*

## Long Term Care Regulations

Within Saskatoon Health Region, the departments of Continuing Care and Seniors' Health and Rural Health Services support the care delivery and operations of long term care.

Saskatoon Health Region policies directly impact, guide, and set standards for care delivered in long term care homes in accordance with provincial legislation and guidelines.

Standards are also established by Accreditation Canada. Residents and their families also shape care delivery through information gathered in Quality of Life and Family Satisfaction Surveys. These surveys are conducted every three years.

### **Accreditation Canada**

Accreditation Canada is a not-for-profit organization that provides national and international health-care organizations with an external peer review process. The aim is to assess and improve the services provided based on standards of excellence.

Accreditation Canada processes involve various surveys and site visits to measure the quality of services provided. This includes ensuring homes are putting into place evidence-based practices to enhance resident safety and minimize risk.

### **Quality of Life and Family Satisfaction Surveys**

Every three years, surveys are completed by a randomly chosen group of long term care residents who are representative of all those living in long term care homes. The surveys ask how you rate important parts of your life such as meaningful activity, comfort and dignity.

Surveys are also conducted with family members of individuals living in long term care homes to seek their feedback regarding satisfaction with issues such as communication, environment, daily care and safety.

Results are shared with residents and families. Reports are sent to each home to highlight overall responses and, in collaboration with residents and/or families, develop action plans to address areas where improvement is needed.

## Paying for Long Term Care Homes

Long term care is paid for jointly by the provincial government and by long term care residents. The Ministry of Health continues to subsidize approximately 80% of the overall province-wide cost of long term care. Long term care home residents pay for the monthly resident fee and additional personal expenses.

### Monthly Resident Fee

Residents admitted to long term care homes are charged a monthly resident fee. Long term care homes' fees include room and board, 24 hour nursing care, personal care services and food.



The Monthly Resident fee is made up of two components:

**Standard resident charge** is set by the Ministry of Health within the Government of Saskatchewan. It is the same fee structure regardless of where you live in the province. The standard resident charge increases annually with Old Age Security and Guaranteed Income Supplement benefits.

**Income tested charge** is based on annual reported income from Line 150 of your income tax return. Personal assets (land, houses, bank accounts, etc.) are not taken into account in determining the resident charge.

Your income will need to be confirmed on an annual basis. You will need to provide the most recent year's Notice of Assessment(s) from Canada Revenue Agency or Pages 1 to 3 of the Income Tax Return(s) and each year after. Income may include income from pension, employment, dividends, interest earned on investments, and RRSPs. If no financial information is provided, the resident charge will be assessed at the maximum rate.

If your financial situation changes, a financial review can be requested by Saskatchewan Health: Drug Plan and Extended Benefits Branch.

### Additional Personal Expenses

Residents are responsible for paying for telephone and cable services, transportation, clothing, personal grooming, medications and medical supplies, private foot care services, incontinence supplies, supplies for oxygen therapy, mobility equipment, dental, vision, and prosthetic devices. There are benefit programs that may assist with costs relating to mobility aids, oxygen, ostomy and diabetic supplies, and medications. Eligibility requirements vary according to different programs. You may inquire about these programs when you move in.

Some of these expenses can be claimed as medical expenses. The Canada Revenue Agency has published a list of general expenses that are eligible. This list can be found at [www.cra.gc.ca](http://www.cra.gc.ca) and you can refer to *Frequently Asked Questions* at the end of this guide.

## Preparing for Your Move

### Your Emotions

As you prepare to move into a long term care community you may be wondering about what to expect. There is a time of adjustment involved when we move into a new home. Think back to other times you have moved.

You may remember feelings of sadness about the loss of familiar friends and comforts. You may remember feelings of excitement or hopefulness about the opportunities the new home would provide. You may remember a time in your new place when everything seemed strange and unfamiliar. After a while, the strange and new place became less strange, more known to you, and eventually it became your home.



### Unique Experience

Each person is unique, and your experience of moving into long term care will be unique to you. You are an individual with your own set of strengths and challenges. Perhaps one of your strengths is that you are an outgoing person and you have always enjoyed making new friends. Perhaps one of your challenges is that you are hard of hearing.

Whatever your combination of strengths and challenges may be, there are some things that may affect how quickly you start to feel settled in your new home. If you participated in planning for the move and in making the decision to make the move, you are likely to have a better adjustment.

How long have you known about your move into long term care? If you've known for a long time, you may have started the process of adjusting long before you actually make the move. If you see this decision as the best decision you could make in your present situation, then this will help you to have a better adjustment. If you are willing to work on making your place in your new community your home, this will make your adjustment easier.

### What to Expect

**1. It takes time to feel at home.** It's different for everyone, and it can take from a few months to a few years to feel at home in a new long term care community.

**2. Living in a larger group of people is different than living alone or with a small family.**

People who grew up in large families or who have lived in cooperative housing would likely tell you about their experience of living with larger groups of people. They might say that living in a larger group involves more time waiting one's turn, giving up some privacy, and sometimes going along with things even though we might do them differently if we were on our own.

**3. There are some stages of adjustment.** Each person goes through these stages in their own way and according to their own timetable. You might go back and forth among the stages for a while, or you might seem to be in more than one stage at the same time. The stages are a map of what we may experience, but each person finds their own road on the map.

#### Stage 1: Feeling Overwhelmed

People who move into long term care communities do so because they have had a sudden health crisis and they have become disabled, because their health has been deteriorating, or because a disability has progressed. You have likely had one of these changes. Now you are planning a move or you have just moved into your new community. You may find that you are experiencing too many changes all at once and that you have lost your sense of who you are. This can be an especially stressful time. You may be grieving the loss of your previous home and abilities. Some people have feelings of anxiety, stress and shock.

During this time, people can feel confused, disoriented or fearful. People may feel sadness or loneliness and may cry more than usual. Some people experience changes in eating and sleeping. If you have ever had the experience of grieving before, you may find that you are experiencing many similar emotions now.

#### Stage 2: Learning Your Way Around

Within the first couple of months after a move into long term care, people are often ready to start learning their way around. You may start spending more time out of your room. You may start getting to know other residents and staff. The routines and practices of the home will be more familiar.

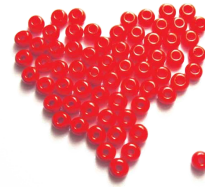
#### Stage 3: Creating Your Place

After you have become more familiar with your new place in long term care, and with the staff and other residents, things can start to get easier. You may find that you have a more positive attitude and that you are working on making new friends. You might be thinking more hopefully about the future.

*We cannot direct the winds, but we can adjust our sails. (Unknown)*

### What Helps?

- ♥ **Take Your Self with You!** If you can, bring a piece of your own furniture, favourite photos, or other meaningful objects that help to make your space your home. Perhaps you have interests or hobbies you can continue.
- ♥ **Maintain Independence.** Continue to do the things you can do, and ask for help to be as independent as you can be. Members of your health-care team can help with adaptations that will enhance your physical independence and communication. Health Region therapists are either on staff in your long term care community, or may come in.
- ♥ **Talk to Someone.** Many people find the emotional adjustment to living in a long term care community difficult at first, even when they know it is the best option available to them. Talk to family members, friends, a chaplain or a counsellor.
- ♥ **Relationships.** It's important to maintain relationships with family and friends. It is also important to work on making new friends with staff and your resident neighbours. Visit in person and on the telephone to help you to stay connected to your sense of self.
- ♥ **Tell Stories and Listen to Others' Stories.** Telling stories helps us to express who we are so that others can know us. Listening to other people's stories helps us to know them. Tell your stories about your last home, your new home and your relationships so that people can get to know you.
- ♥ **Become Involved.** There may be a Resident Council in your long term care home, or perhaps you can start one! Participating in decision making contributes to positive adjustment and can help you to feel more in control of your life.
- ♥ **Be Aware of the Positive and the Negative.** Life in a long term care community offers people the opportunity for a certain kind of independence. Rather than depending solely on the care of family or friends, you can have your care provided by staff. You may find that this makes the time you spend with family and friends more enjoyable. It's important to remember the positive aspects of your move, as well as your sense of loss.



- ♥ **Reflect.** Think about past times when you dealt well with challenges and changes. What did you do that helped? Try to use those skills and ideas now.
  
- ♥ **Give Yourself Time.** It may take time for you to start feeling stronger physically or emotionally. The amount of time is different for each person.
  
- ♥ **Use Humour.** Humour can lighten the day and help to put things into perspective.
  
- ♥ **Use Distraction.** Keep busy with positive things and negative things get less attention.
  
- ♥ **Spirituality or Religious Faith.** Finding a way to feel connected to strength beyond or within ourselves is helpful to many people. You may find this connection through meditation or reflection, through prayer or religion, or through connection with nature.
  
- ♥ **Hope and Joy.** What gives you hope and joy? Aim to keep hope and joy alive in your life.

### **Your Family's Emotions**

If your family member is waiting to move into a long term care community, then you may find yourself experiencing a range of emotions now and into the future. You and your loved one may find that you are coping with uncertainty, waiting and adjusting to a new way of life and new community.

#### ***Before the Move***

People move into long term care homes because their care needs cannot be met in their home or in other community locations. This change in care needs may have happened slowly over time such as in the case of a progressive chronic illness, or may have resulted suddenly and unexpectedly due to an injury from an accident or from a health event such as a stroke. Also, your loved one may be moving into long term care from their home in the community for the first time, or may have experienced multiple moves prior to this one.

In addition to physical care needs, people moving into long term care often have some cognitive changes which cause them to need more emotional support and supervision than is available to them in other settings. These kinds of cognitive changes usually result in families and caregivers taking on many responsibilities which can create stress and sometimes physical or emotional exhaustion. You may be feeling physically or emotionally exhausted now.

Most families experience some mixed feelings about their loved one moving into a long term care community. The process of making the decision and of participating in making plans for the move can be an especially emotional time.

Families may experience feelings of guilt, sadness, loneliness, anger, resentment, shame or failure. At the same time, there may be feelings of relief and peace of mind. You may be experiencing feelings of loss or grief related to the changes in your loved one. At a time when you all deserve to feel supported, your family may find itself dealing with conflict. The conflict may be related to planning and decision making. Conflict may arise out of the emotions stirred up by the situation you all find yourselves in or by the changes in your loved one.



### **Supporting the Move**

When a loved one moves into a long term care home it is because the move is the best or only solution out of the available options. The emotions family members experienced prior to the move may continue along with feelings of relief and sometimes a sense of having abandoned the loved one.

One way to think of these emotions is to consider them as part of a grieving process. We know that the emotions that go along with grieving are part of the process of recovering from a loss.

We know that while the emotions of grief can change our lives for a while, eventually, by accepting the emotions and allowing ourselves to experience and express them, the emotions will settle. Each person's experience and grieving process is unique. Each person finds the way that is right for them.

You may be feeling quite exhausted at the time of your loved one's move and it will be important to find some balance in taking care of yourself while supporting your loved one. If you haven't already asked for more help and support for yourself from other family members, now may be a good time to think about doing so.

### **Visits**

As your family member settles in to their new home, the support and care you provide to them in the long term care community can also ease their transition and help them to adjust to the change.

Regular visits with your loved one are important. Visits in person and on the telephone, letters and cards, all help you to maintain your relationship and help to keep your loved one connected to you and to their sense of self. How often you will be able to visit in person may depend upon your own personal health, finances, the transportation available to you and the distance you live from your family member's long term care community.

Families often see their role as maintaining the well being and dignity of the person who has moved into a long term care community. The type of care and support you provide to a family member who has made the move may change over time.

Throughout your loved ones time in long term care, you will be supporting staff in getting to know your family member. You will be providing information and ideas that will help staff to understand your family member's needs and preferences, and how staff can contribute most fully to your loved one's quality of life. This might feel like a stressful time for you. It will take some time for you to become familiar with the long term care community, the staff and the routines of the home. It is important to talk with staff, to ask questions and to offer ideas.

You may find yourself monitoring quite closely the care your family member receives. As you see staff getting to know your loved one, trust and confidence in care grows. Since you know your loved one best, your visits continue to provide an opportunity to support staff in meeting your family member's care needs.

Planning ahead for successful visits to your family member often helps to ensure the most positive experience for both of you. If visiting is emotionally difficult or there are unpredictable behaviours to consider, you may find it helpful to have a friend or family member join you when you visit. If visiting is difficult in any way, it often helps to talk with staff about strategies to improve the experience.

*References for "Preparing for Your Move—Your Emotions" and "Preparing for Your Move—Your Family's Emotions" can be found at the end of this guide.*

### **Finding Support**

Some long term care communities have family support group meetings, social workers or chaplains on staff. Here are some other resources in the community you may find helpful:

- ♥ *Caregiver Information Centre* - The Caregiver Information Centre is a service of the Saskatoon Council on Aging. (306) 652-4411
- ♥ *Caregiver Support Group* - Saskatoon Health Region social workers with Community Services facilitate this group which runs for 8 weekly sessions. (306) 655-3400
- ♥ *Alzheimer Society of Saskatchewan* - Support services and programs related to all types of dementia. (306) 683-6322



### ***Finding Out Where I Will Live***

Admission to all long term care homes and services is arranged through Client Patient Access Services (CPAS) in the Saskatoon area and through a Home Care Client Coordinator in the rural areas. CPAS and the Long Term Care Placement Team work with long term care homes to ensure that those with the greatest need are admitted to an appropriate place.

A single entry system is used and admission is to the first available bed. Transfers to another home can be requested after admission by contacting (306) 655-4346 for homes in Saskatoon or (306) 365-1434 for homes in rural areas.



### ***Moving into My New Home***

As you move into your new home, you can expect the home to provide you with an environment which will safely meet your care needs while maintaining your dignity and quality of life.

This includes providing you with a personal living space, nursing, and personal care. Laundry, cleaning and meal services are also provided. Medications will be given by nursing staff as they are ordered by the doctor (attending physician).

But your care doesn't stop there. There are many exciting and wonderful services available to you at your new home.

### **Your Rights and Responsibilities**

We want your new residence to be your home. We encourage you to be involved in decisions that affect your life and the care you receive.

You keep the rights that belong to all members of society. Your rights do not change with your move into a long term care home.

As you move into your new community, it is important to respect others and ensure that the choices you make do not interfere with the rights of your neighbours.

In some instances, there may be disagreements. For example, you may enjoy listening to music late into the evening. However, your music may be heard in the hallway and your neighbour prefers to retire early and values her quiet time to rest. *What do you do?*

Talk with your neighbour and reach a compromise. Maybe you will listen to your music only until 9:00 p.m. If you decide to listen to music later than that, you will use headphones so you will not disturb your neighbour.

Open communication, mutual respect and flexibility will be needed to ensure everyone is enjoying their home while still maintaining the joys in their life.

Your home may have documentation outlining your rights as a resident and your responsibilities. Public Legal Education Association (PLEA) has developed a specific bill of rights outlined below. You may wish to use this as a reference.

### **Residents' Rights**

- ✓ You have the right to decide how you want to live and to accept or refuse support, assistance or protection as long as you are not harming yourself or others and have the capacity to make these decisions.
- ✓ You have the right to receive the most effective form of support, assistance or protection in the least restrictive or intrusive manner when you are unable to care for yourself.
- ✓ You have the right to be informed about decisions affecting you and, to the best of your ability, participate in making those decisions.
- ✓ You have the right to be treated with dignity and respect and to be free from harassment, neglect, and physical, emotional or financial abuse.
- ✓ You have the right to receive safe and adequate care. This means that you should receive considerate care in a pleasant environment and have your special needs looked after. Your care should include good personal hygiene and healthy nutritional practices.
- ✓ You have the right to receive medical attention as required. A physician must be on call at all times. In the case of serious illness or accident, your family must be notified.
- ✓ You have the right to have your personal health information treated in a private and confidential manner that is respectful of your best interests.
- ✓ You have the right to privacy insofar as is possible. Part of being treated with respect includes respecting your privacy generally and particularly when receiving medical attention or personal care.
- ✓ You have the right to participate, or not participate, in individual or group activities such as physical and recreational programs.
- ✓ You have the right to attend, or not attend, religious or spiritual services inside or outside of the home.
- ✓ You have the right to leave the home to visit, shop or take part in other social activities unless there is a good reason for refusing such permission.

**Residents' Responsibilities**

- ✓ To give correct information to your caregivers to help plan your care;
- ✓ To ask questions when you do not understand information;
- ✓ To understand that the needs of other people may sometimes be more pressing than your own;
- ✓ To be aware of how your choices affect your health;
- ✓ To pay for services not covered by Saskatchewan Health; for example, some ambulance and drug costs;
- ✓ To meet the terms of policies and practices of the home insofar as they do not infringe upon your individual rights;
- ✓ To be considerate of the rights of others;
- ✓ To maintain independence to the extent possible; and
- ✓ To add as much as possible to the growth of a community for all residents within the home.



*Saskatoon Health Region will be consulting with residents, families and long term care homes to develop rights and responsibilities reflective of our values.*

**Confidentiality**

You may choose to share as much or as little information with your family and friends as you wish. Staff is required to maintain confidentiality when it comes to you and your care. When you move in, you will be asked to name someone as a key contact.

Your key contact may be called in times of emergency and it is up to you to decide what information staff may share with them. For example, you may tell staff that you want them to call a certain person if you fall or your health changes.

You will have a chance to discuss your decision about sharing information with others when you first move into your new home. You may change your mind at any time and just need to make sure your care team is aware of your wishes.

### “Circle of Care”

The “circle of care” refers to people who are involved or have been involved as members of your care team. Here is an example of the “circle of care.”

*John Doe was transferred from Saskatoon City Hospital to Porteous Lodge. Jane, a physical therapist working at Porteous Lodge, wishes to prepare a treatment plan for John as he fell several times while in hospital.*

*John has dementia and is unable to participate in planning and his daughter lives in California and will not be available for a month. Jane knows that to wait until his daughter is available will likely result in John having more falls and he may be hurt. Jane needs more information and notices that Darcie was his physical therapist at the hospital.*

*Jane calls Darcie to see if she can provide details about John’s therapy at the hospital and any suggestions to minimize the risk of John being hurt from a fall.*



### Your Care Team

A care team is a group of people who work with you. They ensure you are cared for as a whole person - your social, spiritual, mental and physical needs are all important.

You and your family are central to your care. You will work in partnership with members of the care team. Care team members may be Special Care Aids (SCAs), Registered Nurses (RNs), Licensed Practical Nurses (LPNs), Registered Psychiatric Nurses (RPNs), nurse practitioners, doctors, recreation therapists or activity directors, food and nutrition staff, environmental service workers and spiritual care providers. There are many other important individuals who work in homes to make them a clean, safe, and comfortable place to live.

Each home is unique in the resources, therapy and services it provides. It is important to ask what is available at your home. Some resources and services may include:

- |                            |                                |
|----------------------------|--------------------------------|
| • Occupational therapist   | • House Doctor (physician)     |
| • Physical Therapist       | • Pharmacist                   |
| • Social Worker            | • Speech language therapist    |
| • Mental Health Services   | • Respiratory therapist        |
| • Dietitian                | • Dentistry Services           |
| • Hairdresser              | • Regional Wound Resource Team |
| • Palliative Care Services | • Behaviour Support Team       |
| • Nurse Practitioner       |                                |

Your care team may also be able to provide assistance in finding private therapists within your community. If you are currently working with any private therapists that you would like to continue with in your new home (such as massage or physical therapists), please speak to your care team to make arrangements. Private therapists provide services independent of the Health Region. You will be responsible for the cost of private therapy services.

### All About Me

If you have been in the hospital prior to moving to a long term care home, staff may have already talked to you about the *All About Me Care Guide*. You may have even completed one. If you have not filled in an *All About Me Care Guide* yet, one will be done with you shortly after you arrive.



*All About Me Care Guide* is a record that describes your needs and preferences as they relate to your care. This will include information such as how much help you need to do tasks in your daily life, when you prefer to rise and rest, and aspects of your spirituality or religion you would like staff to know.

Your *All About Me Care Guide* will become a part of your permanent health care record and will help staff to care for you. This guide is to put residents at the centre of their care by sharing with care providers how they have lived and how they choose to live. The goal is for staff to be able to support your lifestyle, when possible and appropriate.

When it is completed, you will be asked to sign your *All About Me Care Guide*. Your signature shows that you have been a part of planning your care. There may be times when your health or abilities change and your care guide will need to be changed. Usually, your *All About Me Care Guide* will be reviewed with your care team every year around the time of your annual care conference.

However, you may want to discuss changes with members of your care team and you may do so as you wish. For example, if you have enjoyed receiving a phone call from your daughter every Sunday night for the last several years, please share this with staff. By knowing what is important to you, your care team may assist by planning with you for such things to continue.

### Snapshot of Me

Your care team will also ask you questions in order to fill out a document called *Snapshot of Me*. This is to capture important information about you that is not likely to change over time. You will be asked about your medical history, benefit programs that may be assisting you with the cost of supplies and medical specialists who may be involved in your care. Also, staff will ask you to identify contact people, outline when they should be called and what kind of information may be shared with them.

### Resident Photos

When you move into your new home, you will be asked to have your photo taken. Photos serve to assist with identification for medication administration and for resident safety. Your photo will be kept in your chart and may also be placed outside your door. If you feel uncomfortable about your photo being displayed in a public area, please talk with a member of your care team.

### Care Conferences

After you have been in your new home for about six weeks, you will have the opportunity to meet members of your care team. You may wish to have family members or others attend with you. The care conference is for important information to be exchanged between you and your care team so your care now and in the future is the best it can be. Overall, the care conference will be an opportunity to start building a relationship with your care team and helping to provide you with the life you want in your new home.



If you wish to meet with your team earlier than six weeks, discuss this with a member of your care team. In situations when a resident is unable to participate in planning their care, family members will be invited to participate.

Care conferences will be held with you annually unless you choose not to meet. These discussions allow you to share how you are doing and whether your needs are being met. It's also a chance to discuss with your care team how they can help you have the best quality of life possible. There may be other times when you feel it is important to have these discussions with your care team. Approach a member of your care team to ask that a care conference be scheduled.

Members of your care team will share information with you. They may make suggestions, based on their experience and expertise, for you to participate in certain programs, treatments, or activities. Your care team will discuss these suggestions and their benefits with you. It will be your decision on which recommendations, if any, you would like to follow.

During the conference, your care team may also talk to you about the MDS (Minimal Data Assessment) data that has been collected with respect to you and your care.

#### **What is Minimal Data Set Assessment (MDS)?**

Minimal Data Set is an assessment designed to gather information (data) about your strengths, preferences and areas where you may need assistance. The information about you is analyzed by computer software so that you and the care team can use it to plan for your care.

The electronic data that is collected is also sent to the provincial Health Information Solution Centre (HISC). This data does not include your personal information or any information that can identify you. The general information data is then used for program planning and research. The care team will be happy to answer any questions that you have about the MDS assessment.

### **Serious Illness/Sudden Collapse Guidelines (SI/SC)**

Within the first two weeks of moving into your long term care home, you will be invited to meet with staff to discuss and complete a document called Serious Illness/Sudden Collapse Guidelines (SI/SC). This will inform your care team of your health care choices in the event that you suffer a serious illness or sudden collapse and are unable to relay your wishes due to unconsciousness or illness. This document will assist the staff to act quickly in a crisis.

This is very important for you to fill out. Your care team wants to ensure your right to make your own decisions about your health is respected and carried out. Your care team will support you and provide you with information to enable you to make informed health care decisions.

However, some of these decisions may be difficult to think about. Your care team acknowledges the value of family and significant others in supporting you and participating with you in this process. We recognize you may want to seek guidance and support from family or others who are important to you. However, you alone hold the power to determine what constitutes quality of life for you.

#### ***What are my choices?***

There are a few choices to consider. For example, you may choose whether to receive care in your home or be transferred to the hospital in the event of illness. You may choose whether or not you wish resuscitation to be attempted in the event you suffer cardiac arrest.

What is a cardiac arrest?

Cardiac arrest is when an individual has no heartbeat (pulse). When an individual is not breathing and does not have a heartbeat, he/she is clinically dead and a decision must be made on whether or not to perform cardiopulmonary resuscitation (CPR).

What is cardiopulmonary resuscitation (CPR)?

CPR may include pushing on your chest (compressions) and using machines to help or maintain breathing. Sometimes, a defibrillator may be used which applies "electric shock" to the chest area in an attempt to restart a heart that has stopped beating.

You may have seen CPR performed on television and in the movies. Oftentimes, the storyline depicts that the characters are quickly and completely revived. In reality, this most often is not the case.

CPR is most effective in emergency situations where the heart may stop but the person is otherwise healthy. For individuals at the natural end of their lives or when a serious medical illness exists, CPR only works a small percentage of the time.

Even when CPR does work to restart the heart, the individual may often be in worse condition than before and suffer from brain damage due to a lack of oxygen to the brain or broken ribs from chest compressions.

When a heart stops beating, brain death occurs within four minutes. Therefore, CPR should be initiated at the time of onset of the cardiac arrest — the risk of the time delay is that the individual will have sustained brain damage. Most often, if CPR is successful, the individual will require life-support machines, such as ventilators, to attempt to stabilize their condition.

Should an individual living in long term care home state their wish is to receive CPR, emergency medical services will be called to attempt resuscitation in the event of a **witnessed** cardiac arrest.

A long term care home is resident's home and does not provide the level of care available at a hospital. Staff in long term care does not perform CPR. If a resident has expressed a desire to receive CPR, 911 would be called and emergency services personnel would attempt resuscitation, if appropriate.

Even if an individual was in a hospital and went into cardiac arrest, CPR guidelines outline that CPR not be started unless the cardiac arrest was witnessed. If it is not witnessed and someone is in cardiac arrest, there is no way of knowing how much time has passed since the heart stopped beating and if brain death has already occurred.

#### ***How will you decide what to choose for your SI/SC guidelines?***

Personal and spiritual beliefs about death and opinions about how life is defined vary among individuals. For example, some may say "If I can't be awake to visit and enjoy being with my family, that is no life at all!" These choices are difficult to think about and will be just as difficult for your family and/or loved ones to discuss.

But, this is your opportunity to make your wishes known. It may be just as difficult for loved ones to make these choices for you and they may struggle with determining and communicating what you truly want.

In the end, you alone must make decisions for yourself that honours your spirit.

As individuals approach the natural end of their lives, it may be important to spend time with loved ones in private surroundings and for a peaceful environment in which to pursue spiritual fulfillment.

It may also be important for you to be cared for in a familiar environment by care providers whom you trust and know well. If this is the case, you may opt to stay in the home and receive continuing care which is aimed at supporting a natural and comfortable death as life draws to a close.

Many measures to relieve pain and symptoms are available. If you choose to remain in the home, your care will be overseen by your doctor. For some people, comfort care will simply mean high-quality nursing care.

In the event of a serious illness from which you are unlikely to recover, you may wish to stay in your long term care home, receive comfort care measures and avoid aggressive interventions and hospital transfers.

#### **What if you decide you want to go to the hospital if you are seriously ill?**

In modern health care, many interventions are available. In an intensive care unit, aggressive life-prolonging interventions such as blood and fluid transfusions, medications and ventilators may be used. The choice whether or not to receive these treatments is up to you.

It is helpful to decide in advance what measures you would be willing to accept should such an illness occur and document these wishes in Advance Health Care Directive.

What is an Advance Health Care Directive?

An Advance Health Care Directive (AHCD) is a legal document in which people write down requests about their future treatment. An AHCD comes into effect when a person is no longer able to speak for themselves. This is known as being 'without capacity' to make decisions. You may have had discussions with your loved ones about your wishes, but this document legally makes those wishes known to your entire care team and helps your decision maker to ensure your wishes are followed.

For individuals living in long term care homes, an AHCD ensures your wishes are recorded and known to physicians and health-care workers especially if you wish to be cared for in the hospital. If you already have completed an AHCD prior to moving to a long term care home, it is important to provide staff with a copy.

#### **If you already have an advance health care directive, why should you complete an SI/SC guideline?**

If you already have an Advance Health Care Directive, you should also complete a Serious Illness/Sudden Collapse (SI/SC) Guideline. Completing an SI/SC Guideline will ensure that staff at the home can act quickly in a time of crisis, guided by your wishes.

**peace.** *It does not mean to be in a place where there is no noise, trouble or hard work. It means to be in the midst of those things and still be calm in your heart.* (author unknown)

### Bringing Personal Belongings to Your New Home

Your comfort is important to feeling at home in your new surroundings. Your room should be a reflection and an extension of you.

You will be provided with a bed and a closet with shelving. Some homes provide additional furnishings such as a bedside table. Discuss with the home how much room you will have for personal furniture items. Space and safety for movement of residents and equipment need to be considered. But if you have room, you may wish to bring small pieces of furniture such as your favourite chair.

Bring small personal items and pictures. You may wish to ask about hanging things like shelving or pictures on the wall so staff can ensure your safety.

*You may want to consider obtaining insurance for your personal belongings.*

While most homes have common areas where television may be watched, you may wish to bring your own to have in your room. If you would like to bring any electronic appliances, please make sure they are CSA approved. Ask about authorization for personal electrical appliances prior to using them in your new home.

Should you wish to bring valuables, please speak with staff about securing these items.

Long term care homes are unable to accept responsibility for damage or property loss. You may also wish to consider obtaining insurance for belongings.

#### Other items you may wish to bring:

- Toiletries (Toothbrush, toothpaste, favourite shampoo, etc). Ask what items the home provides.
- Clothing (Please discuss clothing labelling once you move to your new home. You will not be charged for this service.)
- Comforter/Bedspread for your bed
- Your own pillow
- Non-skid footwear
- Radio or small CD player (must be CSA approved)
- Lamp (must be CSA approved)
- Books/magazines

## *Life in My New Home*

When we think of places to live, it is important to distinguish between housing and home. While housing meets the human need for shelter, home fulfills needs beyond that. Home nurtures growth and spirit. We strive to create an atmosphere that feels like home and are committed to assisting you to feel at home as much as possible. Please feel free to let staff at your home know how best to assist you.

You will be encouraged to be as independent as you can be. When and how you get up each day will depend on your abilities and preferences. You will become a part of the community, along with your neighbours who will also need varying degrees of help with certain things. You will have help with the things that you need help to do. This may mean help with bathing, grooming, going to the bathroom, getting around and eating. Your room will be your private space. You are entitled to privacy in your room and your privacy will be respected.

Homes offer a variety of activities and programs which you may choose to participate in such as music programs, pet visitation and holiday celebrations. There may be opportunities to go on group outings with others from the home. Ask at your home what activities, programs, and outings are available to you.



## **Spiritual, Cultural and Emotional Well-Being**

Who you are and what makes you special and unique will not change and will be honoured in your new home. Your individual cultural, spiritual, and religious beliefs will be respected.

### ***Spiritual***

We recognize that every person has personal values and spiritual beliefs. For some, religion and faith are central to who they are. For others, spirituality may not be based upon religion, but may be identified or expressed through an appreciation of nature. There are several long term care homes within Saskatoon Health Region that are affiliated with specific religions. However, individuals living in these homes do not have to belong to that specific faith. Every home is committed to respecting a resident's values and spiritual beliefs and offers service to every person.

Some homes may have chaplains, spiritual care staff, or may have individuals that visit from the spiritual care community to support residents' spiritual needs. Some homes offer various services which may include interdenominational services. You may choose to attend services offered in your home. You may choose to maintain contact with leaders and/or individuals from your own faith-based community and may wish to continue to attend their services.

**Cultural**

Like all communities, people living and working in our long term home communities represent various cultural and ethnic backgrounds. Saskatoon Health Region promotes and respects the rights of individuals and encourages that all interactions occur in a cooperative manner. This ensures a caring environment for all members of our community.

**Emotional**

Your emotional well-being is important to your overall health. Moving into your new home may create feelings such as fear, sadness, and loneliness. Feeling isolation from family and familiar surroundings, sleep cycle changes, pain, illness and changes in family roles may lead to changes in your mood and behaviour. When you move to your long term care home, you will be asked about your mood and behaviour patterns as well as how your care team may be able to support your emotional well-being.

**Visiting**

Maintaining relationships with family and friends is an important part of your well-being. Visitors are welcome and there are no restrictions. We encourage children to visit as well. Couples will be supported as much as possible to continue experiencing being a couple.

At night, the outside doors may be locked in certain homes. Please check with your care team about receiving visitors at night.

You may also want to ask whether there is the option to host celebrations such as birthdays at your new home. Some homes have a room or an outdoor area that may be used for private family gatherings.

You may choose to continue to go out with family and friends. Please inquire with your care team about the process in your home and, for safety and security reasons, inform a member of your care team before you leave the home. Some homes may have sign-out sheets to avoid any unnecessary alarm if a resident cannot be located.

*An Elder is still in pursuit of happiness, joy and pleasure, and his/her birthright to these remains intact. Moreover, an Elder is a person who deserves respect and honour and whose work is to synthesize wisdom, from long life experience and formulate this into a legacy for further generations. Barry Barkan, Live Oak Institute*

### Resident/Family Councils

Some homes have active Resident/Family Councils that add to the operation of the home through different activities such as fundraising and advocacy. These activities are aimed at improving life for the residents.

The biggest benefit of having councils is it encourages residents and staff to work together toward improving the experience of those living in the home. They may take their concerns, wishes and resolutions to management of their home. Councils assist by sharing important information and play a part in making decisions about things that affect their day to day lives. Council members are usually chosen to be on the council by other residents.

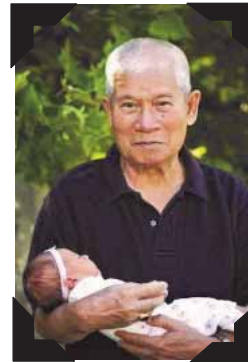
If you are interested, ask whether your home has a Resident/Family Council and how you can become a part of this group.

### Family

Family members play an important role in long term care homes and they can be of great help to you and your care team. Families can become part of your new community by volunteering or becoming a member of the family/resident council.

Your family may also contribute to your new home in others ways such as:

- Sharing information with staff about your past routines and preferences. This is especially important when you may not be able to provide this information yourself;
- Assisting in the communication of information if there is a language or cognitive barrier;
- Visiting and phone calls by family members may reduce stress for residents. Both offer the comfort of familiarity. Family contact is important for ongoing health and well-being of residents;
- Adding social and emotional meaning by treating residents with special attention, favourite foods and activities;
- Assisting with specific tasks such as laundering special items, opening mail, helping at mealtimes or purchasing clothing items;
- Taking residents on outings.



### Physician Care

Persons living in a long term care home will not need to leave the home to get basic medical care such as medication orders, immunizations and basic prescribed treatment. Many homes have specific physicians who work with individuals living there. All homes have physician services although arrangements for physician attendance may vary.

Once you move into your new home, ask about physician and/or nurse practitioner attendance and find out what services are available. If you prefer or are able to keep your family doctor, it may be possible to do so. But to care for you in your new home, your doctor will need to have privileges for your long term care home and will need to be willing to see you regularly for your ongoing care needs.

You may still choose to attend appointments at physician clinics or hospitals. You or a family member is responsible for arranging transportation. If you need assistance, a family member or friend will need to go with you to appointments.



### Prescription and Non-Prescription Drugs

Your care team within your new home will obtain and administer any prescription and non-prescription medications, including immunizations and prescribed treatments ordered by your physician or nurse practitioner.

### Dental Care

You should still see a dentist yearly. The dentist will check that your teeth & gums are healthy and will also check for oral cancer. Research shows that 25% of oral cancers which can affect any part of your mouth occur in people with no known risk factors.

Even if you wear dentures, you should still see a dentist. Your dentures will be checked to be sure they are fitting properly. Ill-fitting dentures make eating difficult which can lead to weight loss and dehydration. Your dentures should also be properly marked for identification. Please ask what services are available when you move to your new home.

### Smoking

Saskatoon Health Region has implemented a Tobacco and Smoke-Free Policy. This policy outlines that tobacco products are not allowed inside any health service facility operated or funded by the Health Region or on the grounds of these facilities. Some long term care homes may have a designated area for smoking.

If you smoke, inquire about the smoking policy and location for smoking specific to your home. Saskatoon Health Region has a program to assist those who wish to quit smoking and support will be provided to you should you wish to participate.

## Food

Proper nutrition plays a significant role in wellness. We strive to provide nutritious, safe and high quality food. Each person is unique, and individual food preferences will be considered.

You can expect:

- A variety of safe, nutritious food prepared by qualified individuals who have been trained in food safety techniques;
- Proper texture of foods to match your chewing and swallowing abilities;
- Consideration for your special food and diet needs;
- Appropriate meal time assistance from a team of trained individuals;
- Access to beverages and snacks outside of meal times;
- Access to a Registered Dietitian, as requested.



A pleasant dining experience is vital to enjoyment and quality of life for residents. Meal times are important times for socializing. Ask at your home whether family and visitors may join you and what arrangements need to be made.

You may enjoy gifts of food brought to you by family and friends. However, food from outside can present a food safety risk if proper preparation, handling and storage are not observed. Ask family or friends to refer to the brochure "Food for Loved Ones" for further information.



## Pets

Animals have been found to benefit people socially, psychologically, and physiologically. To that end, some homes have resident pets or have regular pet therapy and visitation programs.

If you have allergies, phobias or dislike of pets, you may notify the care team at your home and they can indicate this on your *All About Me Care Guide*. This can allow them to make reasonable and practical efforts to prevent unwanted contact with pets.

If you or a family member has a pet that you wish to visit in your new home, please speak to a staff member before planning a first visit.

## General Safety

We want you to feel safe in your new home. We have programs in place to help ensure your safety.

**Monthly Fire Drills** – Your home will have monthly fire drills. This is to ensure that homes are adequately equipped and able to safely respond in the event that a fire should ever occur.

**Hand Hygiene** – Preventing the spread of germs is a joint effort between staff, volunteers, residents, friends and family.

Hand hygiene, a very simple act, is the most important and effective way to prevent the spread of infection or an outbreak from occurring. Hand hygiene protects everyone including residents, staff and visitors from germs.

*What is hand hygiene?* Hand hygiene is a general term that refers to either hand washing or using alcohol-based hand sanitizer. Both methods of hand hygiene need to be done correctly and at the right time in order to be effective.

*When should hand hygiene be performed?* Visitors should always clean their hands before and after visiting a resident, upon entering and leaving the care home and after using the restroom. You should perform hand hygiene before and after you eat, drink, smoke or when you assist someone with these tasks. Hand hygiene is also important after you cough, sneeze or use a tissue.

There are times when hand washing (cleansing with water) is essential:

- When your hands are visibly dirty.
- Before you eat.
- After you use the restroom.
- If there is a sign posted to wash your hands with soap and water.
- After you visit a resident with *Clostridium difficile*.



*Alcohol-based hand sanitizer kills more germs on hands than soap and water and is safe to use in all other circumstances.*

### Hand Cleansing with Water

1. Wet hands under warm running water.
2. Rub liquid soap all over hands for 15 seconds.
3. Rinse hands under warm running water.
4. Dry hands with a paper towel.
5. Turn the tap off with the paper towel (remember your hands were dirty when you turned the tap on).
6. Dispose of paper towel in a garbage container.

### Hand Cleansing with Hand Sanitizer

1. Apply approximately one teaspoon of sanitizer to your palm (one pump).
2. Cover each area, rub vigorously and interlace fingers.
3. Rub hand sanitizer all over hands, including your wrists, thumbs and between your fingers for 15 seconds.
4. Rub until your hands are dry. Do not use a towel to dry your hands.

There are critical moments when staff must clean their hands:

- To protect you and your environment from harmful germs carried on hands, staff should practice hand hygiene when entering your room, before touching you, or before touching any object or furniture in your environment.
- To protect against harmful germs, including your own, from entering your body, hands should be cleansed immediately before any procedure (such as putting in eye drops or changing a dressing).
- To protect you and the health care environment from harmful germs, hands should be cleansed immediately after an exposure to body fluids (and after glove removal).
- Hands should be cleansed when leaving your room and after touching you or after touching any objects.

**Gloves** – You will notice that members of your care team wear gloves at times. Some examples of when gloves are worn is when there is direct contact with wounds or when staff come in contact with urine, stool or other material that may contain germs.

It is important to know that wearing gloves does not prevent germs from being spread from person to person. So, once staff have finished the task, they will immediately throw the gloves away and clean their hands.

**Flu Outbreak** – An outbreak refers to illness that affects three or more people within a home that may easily be spread to others. In this situation, you may be asked to stay in your room if you are ill and to limit your visitors. You may protect yourself and others from influenza by covering your mouth and nose with a tissue when you cough or sneeze. If you don't have a tissue, cough or sneeze into the crook of your arm.

Please tell someone in your care team if you are ever feeling unwell. Visitors can also assist to minimize the spread of flu by staying home if they are sick.

**Least Restraint Program** – A restraint is “any device that is applied for the purpose of restraining you.” Saskatoon Health Region does not support the use of side rails to keep you in bed or the use of seat belts to keep you in your chair if you tell us that you do not want them. Please feel free to have a discussion with your care team about restraints.

**Adverse Events Management System** – We have a safety reporting system that staff use to record untoward events, like falls, that may happen to you or anyone else in the home. This enables us to constantly improve our homes and processes to ensure your safety.

**Transfer, Lifting and Repositioning (TLR)** – If you require assistance in getting up or walking, you may notice a TLR symbol above your bed. This is to ensure your safety in moving around. If you require a mechanical lift to get up, there will be two care team members assisting you in the lift.

### *Frequently Asked Questions*

#### **What happens if my health improves and I no longer need to live in a long term care home?**

It is important for you to know that care needs are routinely reviewed. If care needs improve, it may be determined that individuals no longer need the services provided in a long term care home. Should this happen, in the Saskatoon area, this will be discussed with you and if needed, Client Patient Access Services (CPAS) will assist with planning for options. In rural homes, the Manager of Rural Long Term Care Coordination provides a link to professionals who can help with planning for options.

#### **If I do leave a long term care home or am transferred to another home, how quickly do I need to move my belongings?**

Because we have others who are waiting for a new home within long term care as you are today, we ask that if you are discharged or no longer require your room, your belongings be moved within a 24 hour time frame.

Depending on the circumstances, we understand this may be difficult. However, your cooperation enables the long term care home community to accommodate the care of individuals who require our services and are waiting patiently for a new home.

#### **What if I had a concern about my care within my long term care home?**

It is important for residents and their families to have a means to voice and discuss concerns. It is also important to work together with care team members to find solutions to improve well-being.



Saskatoon Health Region and long term care homes are committed to respectful communication. Open and honest communication and mutual respect are cornerstones of establishing and maintaining relationships between you and your care team.

If you have a concern or question, first speak with a member of your care team. The issue often may be resolved by talking about what is bothering you.

However, if after speaking with the care provider you still have unmet needs or questions, speak to the manager or designate. This may be the quality of life manager, director of care, administrator or site manager depending on the home where you are living. Ask with whom you should discuss your concerns when you move into your new home.

By bringing your concerns forward, you are actively participating in your care or the care of your family member. Doing so establishes clear expectations and will increase trust and communication. It will also provide your care team with the opportunity to improve care and services for yourself and others.

**What if I still feel I have not resolved my concern at the home?**

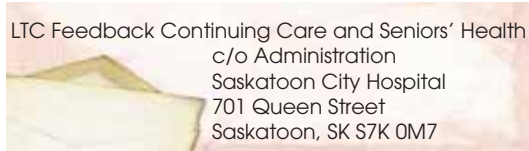
You may speak to a client representative within Saskatoon Health Region. Client representatives are available to respond to your concerns. They can help you to connect with people or information you may need if the home is unable to answer your questions.

Phone (306) 655-3284, toll free 1-866-655-5066, fax 655-3373 or email [client.rep@saskatoonhealthregion.ca](mailto:client.rep@saskatoonhealthregion.ca).

There may be times that you feel Regional Administration needs to be directly involved.

You may contact the Director of Continuing Care and Seniors' Health for the following Saskatoon area homes: Bethany Pioneer Village, Central Haven Special Care Home, Circle Drive Special Care Home, Extendicare Special Care Home, Goodwill Manor, Lakeview Pioneer Lodge, Langham Senior Citizen Home, Luther Special Care Home, Oliver Lodge, Parkridge Centre, Porteous Lodge, Saskatoon Convalescent Home, Sherbrooke Community Centre, Spruce Manor, Stensrud Lodge, St. Ann's Home, St. Joseph's Home, Sunnyside Adventist Care Centre and Warman Mennonite Special Care Home.


Phone (306) 655-8216, fax (306) 655-8269 or email [lfcfeedback@saskatoonhealthregion.ca](mailto:lfcfeedback@saskatoonhealthregion.ca).



LTC Feedback Continuing Care and Seniors' Health  
c/o Administration  
Saskatoon City Hospital  
701 Queen Street  
Saskatoon, SK S7K 0M7

For long term care homes outside Saskatoon such as Cudworth Nursing Home, St. Mary's Villa, Quill Plains Centennial Lodge, Pleasant View Care Home, Central Parkland Lodge, Golden Acres, Manitou Lodge, Last Mountain Pioneer Home and Nokomis Health Centre, you may contact the Directors of Rural Health.

Phone (306) 682-5526, fax (306) 682-3595 or email [ruralhealth@saskatoonhealthregion.ca](mailto:ruralhealth@saskatoonhealthregion.ca).



Rural Health Services  
Box 1930  
Humboldt, SK S0K 2A0

If you do contact the Region's administration with a concern, administrators will work to resolve your concern and will be guided by your direction. Your involvement is crucial.

### What do I do if I have an ethical issue?

People residing and working in long term care homes may have ethical issues which concern them. Ethical issues may include but are not limited to questions about Advance Care Directives, concerns about the morality of end of life care options, questions about who makes the decisions for patients without capacity, questions about behaviours associated with particular medical conditions and questions about treatment decisions.

Saskatoon Health Region has an ethics consultation service which is available to any patient, resident, proxy, legal substitute decision maker or staff member. An ethics consultant may sometimes facilitate meetings between staff, patients and family members who are struggling with ethical concerns in a particular situation. As a resident or substitute decision-maker, you are able to access a Saskatoon Health Region ethics consultant through your long term care home. Please ask your care team if you would like to speak to an ethics consultant.

### Where can I find more information about long term care?



For more information on Saskatoon Health Region, including programs and services, visit [www.saskatoonhealthregion.ca](http://www.saskatoonhealthregion.ca).

For more general information on long term care homes, visit <http://www.health.gov.sk.ca/special-care-homes>.

For more information on rates, visit <http://www.qp.gov.sk.ca/documents/English/Regulations/Regulations/H13R2.pdf>.

### *Additional Financial Questions*

#### **I am a senior and I have a limited income. What programs are available to help me?**

There are a few programs to assist with low-income seniors.

#### ***Guaranteed Income Supplement (GIS)***

Guaranteed Income Supplement is a federal program that provides additional monthly income on top of the [Old Age Security pension](#) to low-income seniors living in Canada. To be eligible for the GIS benefit, you must be receiving the Old Age Security pension and meet the income requirements.

You must apply for the Guaranteed Income Supplement (GIS). If you are a couple your spouse's income must be reported as well.

When applying, you must report the following income:

- Canada Pension Plan or Québec Pension Plan benefits;
- Private pension income and superannuation;
- Foreign pension income;
- RRSPs that you cashed;
- Employment Insurance benefits;
- Interest on any savings;
- Any capital gains or dividends;
- Income from any rental properties;
- Any employment income;
- Income from other sources such as workers' compensation payments, alimony, etc.



*GIS Involuntary Separation Provisions* - If you had applied for GIS as a couple and didn't qualify in the past, you may be eligible for GIS or an increase if one of the couple must move to a long term care home.

To apply for GIS, use the following contact information: Service Canada  
P.O. Box 818  
Station Main  
Winnipeg, Manitoba  
R3C 2N4  
Call: 1-800-277-9914

**Do I have to renew the Guaranteed Income Supplement every year?**

Yes. The Guaranteed Income Supplement is based on your annual income, or the combined annual income of you and your spouse or common-law partner. Since your annual income can change from year to year, you must renew your GIS each year.

Most seniors automatically renew their GIS simply by filing their income tax return by April 30. If you are eligible for the GIS benefit, it will be added to your Old Age Security pension payment each month.

**Seniors Income Plan**

Seniors Income Plan is a provincial program that provides senior citizens with the financial assistance required to meet their basic needs. A monthly supplement is provided to seniors who have little or no income other than the federal Old Age Security pension and Guaranteed Income Supplement.

You are eligible to receive the Seniors Income Plan benefits if:

- You are 65 years of age or older;
- You are a permanent resident of Saskatchewan;
- You receive full or partial Old Age Security pension and Guaranteed Income Supplement; and
- You have annual income below a specified level.

No application is necessary for this program. You will automatically receive SIP benefits if you qualify. The income that you report on your GIS application and/or previous year's income tax return determines your eligibility.

For more information, contact the Ministry of Social Services.

Ministry of Social Services  
Seniors Income Plan  
2nd Floor - 2151 Scarth Street  
Regina, Saskatchewan S4P 2H8

In Regina, call: 787-2681  
Outside Regina, call 1-800-667-7161

**I am a senior and need help covering my health-care costs. What programs are available?**

Residents qualifying for the federal Guaranteed Income Supplements (GIS) and provincial Seniors' Income Plan also receive health benefits.

For seniors qualifying for Guaranteed Income Supplement, the following health benefits are available:

- If residing in a long term care home, the semi-annual deductible is \$100 for prescription drugs with a 35 % co-payment thereafter; and
- Residents may be eligible for additional drug coverage through the Special Support Program.

For seniors' qualifying for Seniors' Income Plan, the following health benefits are available:

- One free eye examination each year;
- Free chiropractic services;
- Reduced deductible on prescription drugs;
- Home care subsidy;
- Loan of some low-cost devices through Saskatchewan Abilities Council;
- And Supplementary health benefits for Seniors' Income Plan recipients living in long term care homes.

For more information on health benefits, including prescriptions drugs call 1-800-667-7581.

For eye exams and chiropractic coverage, call (306) 787-3475.

**What if I am under 65 years of age and am concerned about paying for long term care?**

You can contact the Income Assistance Division of the Ministry of Social Services to explain your circumstances and inquire about eligibility for financial assistance.

The phone number is 1-866-221-5200.

### I can't afford my prescription drugs. What do I do?

Under the Seniors' Drug Plan, eligible seniors 65 years and older will pay only \$15 per prescription for drugs listed on the Saskatchewan Formulary and those approved under Exception Drug Status.

For more information, visit <http://formulary.drugplan.health.gov.sk.ca/>.

There is another program designed to help those of any age to help with drugs costs that are high in comparison to their income.

The provincial program is called the Special Support Program.

Based on the information provided on the application form along with Drug Plan records, the Drug Plan determines the amount of benefit you are eligible for.

Contact the Ministry of Health at 1-800-667-7581 to request an application form or visit <http://www.health.gov.sk.ca/special-support-program>. Forms are also available at community pharmacies.

### Can I claim my Monthly Resident Fee as medical expense on my tax return?

The Monthly Resident Fees (attendant care expense) may be eligible as medical expenses (line 330 and line 331) on your tax return. Generally, you can claim the entire amount paid for full-time attendant care in a long term care home.

If you want to claim attendant care expenses in a long term care facility, then you should complete Form T2201 – *Disability Tax Credit Certificate* to be eligible for the Disability Tax Credit.

The **Disability Tax Credit** (usually called the disability amount) reduces the income tax that a person with a disability has to pay. If you don't need to use some or all of the tax credit because you have little or no income, you may be able to transfer all or part of it to your spouse, common-law partner or other supporting person.

To get the credit:

- Determine whether the eligibility criteria for the credit are met;
- Complete Part A of application Form T2201 – Disability Tax Credit Certificate. Have Part B of the form completed by a physician or, depending on the basic activity of daily living that is affected, by an optometrist, a speech-language therapist, an audiologist, an occupational therapist or a psychologist, who is familiar with the medical impairments. Instructions for completion are detailed on Form T2201.

Submit completed Form T2201 in advance of or with your annual income tax return to Canada Revenue Agency.

For individuals who are eligible for the disability tax credit, Monthly Resident Fees (attendant care expenses) paid to a long term care facility may be claimed as a medical expense.

When the expenses are for full-time care in a long term care home, there is no limit on the total expenses that can be claimed as medical expenses for yourself or your spouse or common-law partner, but the disability tax credit cannot be claimed.

Talk to an accountant for advice on whether you are eligible and how these expenses can be claimed on your income tax return.

You can also call the Canada Revenue Agency at 1-800-959-8281. For more information, visit [www.cra-arc.gc.ca/disability/](http://www.cra-arc.gc.ca/disability/).

*It is not about age. It is about the wisdom. An Elder is a person who is still growing, still a learner, still with potential, and whose life continues to have within it, promise for and connection to the future. Barry Barkan, Live Oak Institute*

### Questions to Ask About My New Home

Who do I contact if I have concerns?

Contact Name	Phone Number

What is my monthly resident fee? \_\_\_\_\_

Are personal hygiene items provided? YES / NO

If so what is provided and what are the charges?

Personal Hygiene Item	Cost

How much space do I have in my new room and what can I bring?

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Visitors – Will the doors be locked at a certain time? YES / NO

If so, when? \_\_\_\_\_

May my family or visitors join me at meal times? YES / NO

How do I arrange this? Who do I ask?

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Do you have a room for family gatherings (birthdays or other special events)? YES / NO

If so, where is it and who do I contact to book it?

\_\_\_\_\_

Does this home have a Resident/Family Council? YES / NO

Who do I contact about it? \_\_\_\_\_

What activities, programs and outings are available?

Activity/Program/Outing	When

What other resources and services are available? (Hairdressers?)

Service	Where	When

What religious services are available and when?

\_\_\_\_\_

What is your smoking policy?

\_\_\_\_\_

\_\_\_\_\_

What is your policy regarding scents such as perfume?

\_\_\_\_\_

### Questions To Ask About My Care in My New Home

Which therapies are provided at the home? When are they available?

Therapy	When Available

What are the names and phone numbers of doctors visiting this home and who are willing to accept new residents?

Doctor	Phone Number

I have specific needs and concerns. How will these be handled (i.e. pain, risk of falls, sleep disturbances)?

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What will my typical day be like considering my particular needs?

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*Our Vision*

*Healthiest people,  
Healthiest communities,  
Exceptional service.*

***Other Questions or Concerns?***

Please talk with your care providers. They are committed to caring for you. If they cannot answer your questions, they will help you find someone who can.

*[www.saskatoonhealthregion.ca](http://www.saskatoonhealthregion.ca)*

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