

OUR HOME

Information for Residents & Families





Providing loving, dignified quality care and enabling people to live full and abundant lives .

Please observe our scent-free policy to keep our Residents/Staff safe and healthy

TABLE OF CONTENTS

Vision, Mission & Values	6
Welcome to our Community	7
Resident's Bill of Rights	8
Protection of Persons in Care Act	9
Personal Directives Act	10
How Do I want to Live	11
Making the RK your Home	12
Welcome to our Home	13
Admission Process & Financial Information	15
Services for Residents	
Cable/Internet/Telephone	16
Foot Care	16
Hair Salon	16
Mail & email	16
General Guidelines	
Accessing the Building	17
Alcohol	17
Going Out	17
Identification of Belongings	17
Parking	17



RK MAC DONALD NURSING HOME

TABLE OF CONTENTS

Personal Electrical Appliances	18
Resident Room Decorating	18
Smoke Free	18
Scent Free	18
General Information	
Care Conference	20
CARE Van	20
Concern Process	20
Notification of Wrongdoing	20
Family Council/Resident Council	21
Family Responsibility	21
Hospitalization	22
Pets in the Home	22

TABLE OF CONTENTS

Therapeutic	r Services	for Re	sidents
THETAPEUU	r 26i Aice2	101 Ke	ะวเนษทน

Nursing Services	23
Nutritional Services	23
Walking Stick	24
Physician Services	24
Recreation Therapy	25
Spiritual Care	25
Death & Dying	
Palliative Care	26
Funeral Arrangements	27
Other Information	
Our Board of Directors	28
Our Foundation	28
Volunteers	28
Policies	29
Appendices	30

OUR VISION, MISSION & VALUES

OUR VISION

An alive and vibrant community where uniqueness of spirit and character is celebrated.

OUR MISSION

Providing loving, dignified quality care and enabling people to live full and abundant lives.

OUR VALUES

COMPASSION

We are committed to showing understanding and kindness

ACCOUNTABILITY

We are committed to honesty transparency and integrity

RESPECT

We are committed to honoring the dignity and value of all and providing a supportive living and working environment

EXCELLENCE

We are committed to providing excellent care that enhances the quality of life of those we serve

SAFETY

We are committed to a culture of safety for all while recognizing the autonomy of residents including the right to risk within an informed and collaborative decision-making process



WELCOME TO OUR COMMUNITY

HISTORY

Through the financial generosity of Roderick Kennedy MacDonald and the Congregation of the Sisters of St Martha, on the 18th day of February 1958, a seventy—two bed, two story brick seniors' home, christened as the RK MAC DONALD GUEST HOME was opened. The Congregation generously mortgaged their Motherhouse to finance the undertaking, and under the direction of Mother Ignatius, eight sisters cared for 71 residents that first year. The "RK" as it is known locally, became a mainstay institution for the elderly in the town and county of Antigonish.



By the late 1960's it was becoming clear that the Sisters of St Martha could no longer continue to operate the R.K. Through a purchase agreement in 1971, the Congregation relinquished ownership to the Town & County of Antigonish.

An additional nursing wing was approved by the ratepayers of Antigonish and construction was underway by 1972. In 1997, a new and completely modern nursing wing was built – adding 25 more people to this home which brought the total to 108. In the spring of 2011, construction for the latest addition to the Home was completed and 28 new people came to make their Home at the R.K. MacDonald Nursing Home for a grand total of 136.

While funded by the Department of Health & Wellness, Province of Nova Scotia, the RK continues to be owned by the Town and County of Antigonish. Management and operation of the facility is accountable to the Board of Directors, representing the Sisters of St Martha and the Town & County of Antigonish.



RESIDENTS BILL OF RIGHTS

- 1. To be treated with courtesy, dignity and respect.
- 2. To be properly sheltered and cared for.
- 3. To be given privacy in treatment and in caring for one's own personal needs.
- 4. To keep and display personal possessions, pictures, etc.
- 5. To be involved in any decisions affecting treatments, and to have one's condition explained in easily understood terms to oneself or Substitute Decision Maker and the right to be informed of changes in medical condition.
- 6. To have access to programs that reflect rehabilitation to enhance independence and to meet one's needs.
- 7. To communicate in confidence, to receive visitors, and to consult in private with any person without interference as long as safety of oneself and others is not compromised.
- To be able to express personal feelings and criticisms to staff or administration without fear of reprisal, discrimination or deprivation.
- 9. To manage financial affairs or have someone appointed to do so.
- 10. To pursue one's social, cultural and religious interests.
- 11. To be informed of services available as well as the charge for these services.
- 12. To be informed of room changes.
- 13. To choose your own physician.
- 14. To participate in Resident Council.
- 15. To have confidentiality respected in regards to medical, personal and financial affairs.
- 16. To know who is caring for you and who is responsible for your medical and personal care.



PROTECTION OF PERSONS IN CARE

The Protection of Persons in Care Act came into force on October 1, 2007. This Act is an extra safe guard for patients and residents 16 years of age and older who are receiving care from Nova Scotia's hospitals, residential care facilities, nursing homes, homes for the aged or disabled persons under the Homes for Special Care Act, or group homes or residential centres under the Children and Family Services Act.

Under this Act, abuse may be physical, psychological, emotional, sexual, neglect, theft or medical abuse. It requires health facility administrators and service providers (including all staff and volunteers) to promptly report all allegations or instances of abuse. However, anyone can report abuse under this Act by calling:

1-800-225-7225.

UNDER THE PROTECTION OF PERSON IN CARE ACT 'ABUSE' MEANS:

- the use of physical force resulting in pain, discomfort or injury, including slapping, hitting, beating, burning, rough handling, tying up or binding;
- mistreatment causing emotional harm, including threatening, intimidating, humiliating, harassing, coercing or restricting from appropriate social contact;
- the administration, withholding or prescribing of medication for inappropriate purposes;
- sexual contact, activity or behavior between a service provider and a patient or resident;
- non-consensual sexual contact, activity or behavior between patients or residents:
- the misappropriation or improper or illegal conversion of money or other valuable possessions;
- failure to provide adequate nutrition, care, medical attention, or necessities of life without valid consent.

PERSONAL DIRECTIVES ACT

This Act enables Nova Scotians to document their wishes in a form know as **PERSONAL DIRECTIVE** regarding what personal care decisions are made for them, and/or who makes them, in the event that they are incapacitated and are unable to make these decisions themselves. Personal care decisions include those related to health care, nutrition, hydration, shelter, residence, clothing, hygiene, safety, comfort, recreation, social activities and support services.

The Act enables three things:

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

During the admission to the nursing home, all families will be asked to identify a primary contact. This person will be the contact person between the Nursing home and the family concerning the resident. In the case of an emergency the Home will contact the next of kin or designate only. It is up to them to share the information with other family members.

The resident (if able) and/or the family will also have to designate someone as the **SUBSTITUTE DECISION MAKER**. This may or may not be the next of kin.

The Resident and the family will also be asked to complete a **Personal CARE DIRECTIVE** that indicates a resident's wish for care in the event their health status changes.

HOW DO I WANT TO LIVE

OUR PHILOSOPHY OF CARE

In 2006, the Nova Scotia Department of Health & Wellness committed to a Long Term Care vision of *living well in a place you can call home*. Fundamental to this vision are concepts of choice, empowerment, community, flexibility and independence.

These concepts are incorporated into the care delivered at the RK. We believe that each person is an individual and that they are the center of all decision making and care—in other words "PERSON CENTERED CARE".

PERSON-CENTERED CARE DECISION MAKING

The RK has embraced a person-centered philosophy of care where residents and/or their substitute decision makers take the lead in making health care, right to risk and quality of life decisions in defining how they wish to live while here at the RK.

ALL ABOUT ME

It really is all about the resident. A resident is much more than a medical file. As part of our "MOVE IN" process residents & their families will help us gather information about the "real" you— who are you when no one's looking.

What are your likes and dislikes, what do you like to do—in short – your HISTORY, HOB-BIES and INTERESTS.

MAKING THE RK YOUR HOME

MOVING IN

Moving to a new home is always difficult but moving to a long term care facility is more so. The move does not involve just the individual—it involves the entire family. This move signifies a change in life as you know it and often involves many conflicting emotions. We are here to assist our residents and their families in moving in and getting to know us as easily as possible.

When a new resident is moving into the RK there is a lot of information staff will need to ensure that care continues as smoothly as possible. You will be contacted several days prior to admission to arrange a meeting with RN Supervisors a day before admission if possible.

RESIDENT ACCOMODATIONS

Our facility has both private and semi-private accommodations. Rooms are assigned based on availability and need. Each room is furnished with a bed, bureau, over-bed table, a side table, curtains & linens. Residents are encourage to personalize their room as much as possible. Large items and electrical items need to be reviewed by our staff to ensure that we are meeting safety & fire regulations.

ROOM CHANGES

At times we may need to move a resident to another room. We ask for your understanding when medical conditions and/or gender require us to move a resident to another room.

ROOM REQUESTS

To request a private room please see the Director of Clinical Services.

FAMILY ACCOMODATIONS AT THE RK

From time to time family may wish to be closer to their loved one. When a resident is sick, we have a suite available, free of charge. If you need this service, talk to the Director of Clinical Services

WELCOME TO OUR HOME

Our two storey home is divided into 5 communities. **1st FLOOR**

TANGLEWOOD

Constructed in 1972, Tanglewood is home to 39 residents. There are 13 private resident rooms, 13 semi-private rooms and a private room reserved for palliative care. Bathrooms are shared between some of the rooms. Tanglewood has a central dining area, a TV lounge, a tub room and a hair wash room.

THISTLEDOWN

Constructed in 2011, Thistledown (also known as one of the Cottages) has all private rooms and washrooms. It also has a connecting room, that when available, allows for a couple to continue to live together. Designed to be as home-like as possible, care provided in Thistledown is what we refer to as "FULL SCOPE". This means that the caregivers provide the same services (personal care, housekeeping, laundry) to the resident as they would if they were caring for them at home.

COBBLESTONE

Contsructed in 2011Cobblestone, known as one of the Cottages, is a part of our Home. It provides a pro-



also unique tected,

secure environment for those residents living with dementia who are at a very high risk of elopement. This unit is secure at all times and requires a code number to open the doors. The design of the area is the same as Thistledown. It has private rooms, a central dining and living area as well as laundry facilities.

WELCOME TO OUR HOME

2nd FLOOR

MARTHA'S INN

This section of our Home was added on in 1996. It has 25 private rooms all with their own bathroom. As with all areas of our Home, it has a community dining and living area.

MAPLERIDGE/BRAMBLEBERRY

Part of the original building, (1957) this 44 bed unit has both private and semi-private rooms. Bathrooms are often shared between two rooms. Although staffed and managed as one area, the large area occupied by Mapleridge/Brambleberry is artificially divided into two spaces, each with their own dining/living area. Mapleridge also has a room for palliative care and a room for Respite Care

RESPITE CARE

Respite care is a support service offered to families/care givers who provide care for a loved one at home. This temporary placement provides caregivers a temporary rest from care giving while providing your loved one with continued care. Using respite care can support and strengthen your ability to continue to care for your loved one at home. Respite accommodations are in a private room.

Cost & Access to Respite Beds

Respite services are available for a weekend, a week or up to a month with 60 days/year considered the maximum utilization for an individual. Depending on individual circumstances, extension may be considered.

To discuss or access Respite Services please call a Community Care Coordinator at 1-800-225-7225. The Care Coordinator will discuss costs and eligibility for financial assistance with you.

Please ask us for a pamphlet with additional details including what to bring. All information, policies, practices etc, that apply to permanent admissions apply for respite admissions.

Page 14

ADMISSION PROCESS

WHAT TO BRING

Please bring sufficient and suitable clothing for your loved one (we recommend 7-10 changes of clothing). It is important for all residents to have non-slip shoes and slippers. Bring any personal assistive devices such as walkers, canes and wheelchairs (as well as other assistive devices such as dentures or hearing aids. Personal assistive devices and furniture/chair our Walking Stick (Rehab) Staff will assess to make sure it is safe for use in the Home. If coming from home please bring your NS health care card as well as all medications with you. Please bring an electric razor, brush, comb, makeup or any special personal products remembering that we are scent free.

FINANCIAL INFORMATION

Residents in long term care are not required to pay for the medical portion of their care costs. These are paid for by the Department of Health & Wellness. However, residents are required to pay a predetermined accommodation (room & board) cost, as well as personal expenses including the co-share costs associated with medications. The Department of Health and Wellness sets standard accommodation charges annually. Those who are able to pay the full standard accommodation charge are not required to complete a financial assessment. Those who cannot pay the standard accommodation charge can apply to have their rate reduced through an income based financial assessment.

The Canadian Red Cross administers the specialized equipment loan program for residents in long-term care. Depending on income and type of equipment, a resident may be required to pay a monthly rental fee.

During the family visit prior to the admission of the resident, the family will meet with the Resident Finance Clerk to have a confidential discussion regarding finances. At any time a resident or family has questions about costs please make an appointment to see the Resident Finance Clerk. Additional information is also available on the NS Government LTC website.

Page 15

SERVICES FOR RESIDENTS

CABLE/TELEPHONE/WI-FI

Cable & telephone services are available for eachResident for a monthly, recurring charge. The TV or telephone must be provided by the family. Connections of cable & telephone services are arranged through the Resident Clerk. Free Wi-Fi services are available throughout the Home.

NOTE: Password for WiFi is guest 123.

FOOT CARE

Routine foot care is provided free of charge but advanced care has a fee for service. If you are required or are advised to seek specialized foot services for your loved one, please contact the RN in your loved one's area. An LPN trained in advanced foot care visits the RK weekly.

HAIR SALON

In-house hair salon services are available for Residents. Charges for these services are the individual's responsibility and can be billed to their resident account.

MAIL & EMAIL

Send mail to the Resident in their name using the address of the RK. Mail is delivered to the residents daily. If you choose to send an email, visit our website and send it to the Administrative Assistant. It will be delivered that day. As emails are not private, do not include any personal information.



GENERAL GUIDELINES

ACCESSING THE BUILDING

Main Entrance:5:30 am-9:30pm Staff Doors::5:30am-7:15pm Delivery Doors: 5:30am-5:00pm

Outside of these hours please ring the doorbell and intercom sys-

tem and you will be "buzzed" in.

ALCOHOL

Alcohol is a drug that influences the reaction, judgment and stability of individuals. For safety reasons and potential drug interactions, 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 doctor. All alcohol is kept locked in the medication room and is dispensed by nursing staff. The costs of alcoholic purchases are the responsibility of the resident or family.

GOING OUT

Residents who are independent (physically and cognitively) are asked to let the nursing staff know when they leave the premises. If a family members plans to take a resident out for any period of time, they must notify the RN/LPN and sign resident out.

If the resident is leaving the facility for an extended period of time (overnight or longer), we require enoughnotice so we can ensure that medications are prepared to accompany them on their leave.

IDENTIFICATION OF BELONGINGS

All clothing coming into the Home will be sent to our Laundry Services (9 am –4pm) to be labeled. Other personal items such as dentures, rosaries, and glasses will be labeled by nursing staff. Hearing aids will have the serial number recorded.

PARKING

Family/visitors have access to two hour free parking on Pleasant St (in front of the Home), in a public parking lot entering off St Mary's St and the staff parking lot off Victoria Street.

Page 17

GENERAL GUIDELINES

PERSONAL ELECTRICAL APPLIANCES

For safety and capacity reasons, all electrical appliances must be inspected, approved and labeled by our Maintenance Staff prior to being used in the facility. Due to fire regulations, no appliances (other than a small fridge) are permitted in rooms. No magic bags, heating pads or extension cords are permitted in resident rooms.

RESIDENT ROOM DECORATING

As room assignments may change, decorating with wallpaper, borders, paint etc. is not permitted. Residents and families are encouraged to personalize rooms with pictures, quilts, etc. Our Maintenance Service will hang pictures for residents.

SMOKE FREE ENVIRONMENT

Effective February 12, 2007 all property of the RK Mac Donald Nursing Home became smoke-free with the exception of an approved resident only smoking room. As the risks of second hand smoke are well documented, Residents are permitted in the designated smoking room **ONLY if they can smoke safely and independently**. If this ability to smoke safely and independently declines, a care conference will be held with the resident, family and staff, including the Challenging Behavioral Consultant, to develop a smoking cessation plan.

SCENT FREE ENVIRONMENT

The RK MacDonald Nursing Home is a scent aware facility. Scented products contain chemicals which can cause migraines, nausea and even breathing problems for people with asthma, allergies, and environmental illness. We have both residents and staff who are negatively affected by scented products. Please refrain from wearing perfume, scented hairspray, cologne, scented deodorant, aftershave or any other scented products when you come to the RK MacDonald Nursing Home. If you are purchasing personal care items for your loved one, there are usually a variety of products available at retail stores and pharmacies.

GENERAL GUIDELINES

VALUABLES/LOSS OF PERSONAL BE-LONGING

The RK does not assume responsibility for loss of money or valuables (including dentures, hearing aids, glasses) Residents are encouraged to leave valuables in safekeeping with family. If items are lost or misplaced please notify staff immediately.

INFECTION PREVENTION AND CONTROL

Infection prevention and control (IPAC) is crucial to protect residents, staff, and visitors from the spread of infectious diseases. Best practices include but not limited to; Hand Hygiene, use of Personal Protective Equipment, Monitoring and Surveillance, Training and Vaccination. If any changes or additional guidelines are put in place, residents, staff, families, and visitors will be informed. Additionally, communication and collaboration with Public Health authorities is an essential component of an effective infection prevention and control program at The RK MacDonald Nursing Home.

GENERAL INFORMATION

CARE CONFERENCE

In our pursuit of excellence in care, it is essential that we take time to stop and look at where we are. On admission we will begin to formulate our care based on input from the resident and family as well as other members of the care team. On a bi-annual basis we invite all members of the care team to meet with the resident and/or family to review resident care and to revise plans based on new or additional information. You will receive notification of these scheduled case conferences from the Nursing Administration Assistant.

CARE VAN

Since 1991 a non-profit volunteer organization, the Antigonish Care Van Society, has been serving the residents in Antigonish Town & County. This van is available to assist families in transporting residents to appointments within the town & county. The CARE van is also used to transport residents on recreational outings. Staff members accompany residents on recreation outings. Family members are required to accompany residents for other purposes. The van can be booked by calling the RK at 863-1885 between 8-4 Monday to Friday. There is a cost associated with this service that is charged to the resident account. Please see the front office Administration Assistant for more information.

CONCERN PROCESS

Feedback presents us with an opportunity to examine what we are doing and often gives us an opportunity for improvement. All feedback whether a concern, complaint, an issue or a compliment shall be taken seriously and shall be addressed in a consistent manner. Forms for submission of a concern are located in the front entry or on our website. When completed, please place in the feedback box located in the Main Lobby by the elevatorand it will be forwarded to the appropriate Director for follow-up. You can expect an acknowledgement of your concern within 48 working hours with follow-up every week until resolved. If you feel your concern cannot be managed through the concern process please visit our HR Coordinator for assistance.

GENERAL INFORMATION

FAMILY RESPONSIBILITIES

The RK recognizes the importance of the continued involvement of family as Residents made the RK their home. It is our expectation that families will continue to provide support to the resident. Families are encouraged to play an active role in the development of care plans and are invited to participate in all activities.

Families are responsible to accompany the resident to external appointments and social events in the community.

While the RK does provide the basic personal items such as soap and toothpaste, residents are required to pay for other items such as: transportation (including ambulances), fan, specific brands of personal care items other than those provided, special bedding (beyond that supplied), medications not covered by pharmacare, repair/cleaning of personal furnishing, dry-cleaning, as well as cable and telephone services.

For safety reasons, residents are not permitted to keep household cleaning supplies, medications or chemicals in their rooms.

GENERAL INFORMATION

HOSPITALIZATION

When a resident requires treatment that can only be provided in a hospital setting, the resident will be transferred. Their room/bed at the RK will be held for 30 days. If the hospital stay extends beyond that time, application will be made to the Department of Health & Wellness to continue to hold the room/bed.

PETS IN THE HOME

Recognizing the beneficial effects of pet therapy, the RK has two pet programs on site. One is our in-house program that allows us to have cats and birds living in the home with all of us. These animals are cared for by the staff and residents and are examined annually by a veterinarian.

We also have a visiting pet program that sees several therapy dogs visiting the residents on a regular basis.

Family are welcome to take personal pets in for a visit (providing they are healthy and kept on a leash at all times). Several of our staff also participate in pet therapy by taking their personal pets in to visit the residents. Pets cannot visit in care areas where a resident of staff members experiences allergies and /or where a resident or staff member experiences ailurophobia(fear of cats) or cynophobia(fear of dogs).

Personal pets are welcome for visits but unfortunately, they cannot live here with us. All personal pets must be on a leash at all time while in the Home.

THERAPEUTIC SERVICES

NURSING SERVICES

The Nursing Department provides a full range of care services. Under the administration of the Director of Clinical Services, supported by an Assistant Director of Clinical services and Supervising RN's that is responsible for the overall care delivery in the Home With a team of RN, LPN and CCA's, care is coordinated and delivered to meet the individual psycho-social-physical-spiritual care of each resident. All care is focused on meeting people where they are and providing services based on individual needs.

Based on the information collected during the admission assessment, including medical conditions of the Resident and any other information shared by family, every resident has an individualized care plan developed. This care plan guides the care delivered. And is updated regularly with Resident and family input.

Multidisciplinary Care Conernce is held withing 6 weeks of admission and every 6-9 months thereafter. Care conferences can be arranged at the request of the family at any time.

NUTRITIONAL SERVICES

Under the direction of our Director of Environmental& Food Services and our Dieticians, meals based on Canada's Food Guide, are served to those who choose to make the RK their home. To ensure safe and quality dining experiences, residents eat their meals in the dining area of their house or in the main dining room. Our Dietician provides clinical assessment on admission and whenever a change in conditions occurs. They are available to discuss any food concerns you may have.

Our meal times :Breakfast 8:30am Lunch 12:15 pm Supper 4:45pm

If you would like to join your family member for a meal in the main dining room, please notify Nursing staff at least half an hour prior to meal times. Cost of meals is posted in Main Dining Room and

THERAPEUTIC SERVICES

WALKING STICK

Our Walking Stick provides services focused on assisting our residents to live their lives as fully as they can. They focus on abilities and work to facilitate independence. Rehabilitation and maintenance of function continues to be a very strong focus of our care.

While our Walking Stick Team functions as one unit, our Occupational Therapist focuses on enhancing residents skills for activities of daily living—self-care tasks such as eating or dressing. Occupational Therapists provide equipment to assist with these activities, modify the person's environment to maximize independence, and facilitate participation in the daily, meaningful activities. Our Physiotherapist focuses on the mechanics of movement needed for safety and mobility. Our Rehab Aides assist the professional staff in supporting the delivery of both services.

Operating Monday to Friday, staff of the Walking Stick includes a physiotherapist, an occupational therapist and two Rehabilitative Aides. Services offered include safe and fun group and individual exercises programs, 1:1 treatment sessions, seating assessments, adaptive equipment, cognitive assessments, fall prevention, feeding/swallowing assessments, as well as several "feel good" therapies such as a water bed massage and paraffin wax baths.

As a part of our care team, the Walking Stick staff participates in case conferences and offers detailed assessments for accessing the Red Cross Specialized Equipment Program.

PHYSICIAN SERVICES

When residents move into out Home, they keep their personal physician. if from the area If a resident does not have a physician who can provide medical care in our facility, we have a Medical Director who will become their physician. If you have concerns about medical

coverage, please talk these over with the Director of Clinical Services



THERAPEUTIC SERVICES

RECREATIONAL THERAPY

Our recreation department provides a wide range of services to enhance the lives of our residents. Programs are designed for individuals or groups. Some of the benefits residents may experience from participation in programs include maintenance of long and short term memory, socialization, physical activity and stress reduction. The Recreation Department strives to provide meaningful and therapeutic activities and encourages family participation in all events. Popular activities include musical entertainment, singalongs, art and painting, gardening, card playing, BBO's, crafts as well as several one-to one activities. A monthly calendar is posted throughout the Home as well as on our website so that residents and families can plan their activity time.

SPIRITUAL CARE

Non-denominational spiritual care services and supports are available to all residents in our Home. Clergy from various religions in the Community visit and offer services that include weekly mass, pastoral visits, sacrament of the sick, memorial services, as well as comfort and guidance to residents and their families.

In addition to visiting clergy, we have an in-house strong team of volunteers led by Recreation Services, that support the spiritual needs of our residents on a daily basis.

St Martha's Chapel, located on the first floor of our Home, and with a balcony accessible on the second floor, offers a comforting, quiet space for meditation, prayer and reflection. Accessible at all times, residents and families are encouraged to visit.





END OF LIFE CARE

PALLIATIVE CARE:

Palliative Care is a type of care that enhances the quality of life of people with life- limiting illness by preventing and relieving suffering. In addition to helping the patient, palliative care helps a family cope during a family member's illness and death, and during the grief process.

Palliative care is an approach that is helpful early in an illness, not only near death. This type of care provides relief from pain and other symptoms. It includes emotional and spiritual care. End- of- life care is an important part of palliative care.

It is important to know that palliative care neither hurried nor delays death. Rather, it helps people live as actively as possible until their death.



What is the Butterfly you sometimes see in the entrance or outside resident's rooms?"

At the time a resident begins receiving palliative care or a sudden death occurs, care staff post a Butterfly at the resident's door. The Administration Assistant or Ward Clerk will post another Butterfly at the Main and side entrances to the Home as a method of communicating to staff, volunteers, residents, and family members entering the Home.

The Butterfly symbol alerts staff, families and visitors that a resident is either receiving palliative care or has passed on.

When you see the Butterfly outside a resident's room, please help us maintain a respectful environment of comfort and support for those affected. Thank you."

END OF LIFE CARE

END OF LIFE CARE:

End of Life Is the days or weeks leading up to the moment of death. Your family member will become weaker, sleeping more, and unable to eat or drink. Medications taken by mouth are stopped. Injectable medications are used to keep your loved one comfortable, relaxed and pain free.

This can be a difficult time and will be full of emotions and grief. This can also be a time of reminiscing and sharing memories of your time together. It is important that you seek clarification about questions and concerns you may have during this time. Our staff are available to discuss end of life care and direct you to other resources if necessary.

FUNERAL ARRANGEMENTS

It is very important to have a plan for when death occurs. Thinking of having to make funeral arrangements is very often difficult and sometimes perceived as "giving up" but as with many things in life, making decisions in a supportive environment helps. Needing to make final arrangements after a death has occurred often adds to the stress so we encourage you to think about making arrangements in advance. Our Palliative Care team is available to offer support and information on making such arrangements.

OTHER INFORMATION

BOARD OF DIRECTORS

The R K MacDonald Nursing Home Corporation and its facilities are under the management of a Board of Directors which consists of twelve members as follows: four members are appointed by the County Council of the Municipality of the County of Antigonish, four members are appointed by the Town Council of the Town of Antigonish, and four members are appointed by the Sisters of Saint Martha.

THE RK FOUNDATION

The Foundation was formed to raise funds and manage all money by pledge, gift, planned giving, fund raising activities, memorial donations, etc... The Foundation provides funds that assist capital expenditures, equipment expenditures, and other non-operating needs of the Home, all of which enrich the lives of the Residents. In the spirit in which the Sisters of St. Martha built and ran the "Guest House", your generosity will help to provide for the care of the residents. You are invited to participate in planned giving as a means of providing services and programs for the R.K. Nursing Home that are not covered by government funding. Planned giving involves a decision to make a charitable donation that combines charitable giving with tax advantages. Planned gifts can be immediate or deferred. Deferred gifts are usually included in the donor's will.

VOLUNTEERS

The R.K. MacDonald Nursing Home strives to provide an environment that enables Residents to live full and abundant lives. Volunteers are essential in providing Residents with personal interactions and opportunities to alleviate loneliness, helplessness, and boredom. Maintaining community contact is vital to well-being. Volunteering can be as little or as much as you wish. Please talk to our Director of Recreation about participating in our volunteer program.

NOTE:

We feel the information in this booklet is the most pertinent, however the operations of the Home are guided by the policies informed by best practices,LTC Program requirements and Accreditation Standards.

PERTINENT POLICIES:

Some policies can be found on our website as well as a comprehensive list of policies is available upon request.

Alcohol Consumption	Policy # 2-60-16
Concern Process/Feedback	Policy # 1-20-60
Decorating	Policy # 1-30-20
Life Care Directive	Policy # 2-60-15
Private Living Area Request	Policy # 2-20-90
Resident Billing System	Policy # 2-30-70
Resident Transfer(Within Building)	Policy # 2-70-100
Scent Free	Policy # 1-30-40
Smoke Free	Policy # 1-20-430
Valuables(Dentures, etc)	Policy # 2-60-110

APPENDICES

Pharmacy Contract	31
Medications Supplied	32
Providing Feedback	33
Resident& Family Council	34
Family Council Welcome Letter	35
Visiting	36
Contact Information	37

PHARMACY CONTRACT

While families are responsible for the charges incurred with the purchase of prescription medications, to facilitate the management of these medications, the RK MacDonald Nursing Home tenders a contract with one local pharmacy.

Every five years an RFP (request for proposals) is sent out and interested pharmacies submit a proposal for services for consideration to the Board of Directors.

Based on costs, supports and benefits to the residents and the organization, an internal sub-committee consisting of the CEO, Director of Clinical Services and Medical Director selects a pharmacy to provide us with services for the next five years.

As of November 2019 Shoppers Drug Mart is the Pharmacy provider This contract will expire in 2024.

During the admission process, you will be asked to complete a Resident Charge Account with the Resident Account Clerk. At this time you will also be offered the opportunity to collect points with you r current PC Optimum Card. If you do not have one a card can be issued.

Payments for accounts can be managed in one of two ways – through pre-authorized credit card payments or as a monthly charge to your account. If a resident has PSHCP (Public Service Health Care Plan) and wishes for the pharmacy to submit prescription claims on their behalf, you must contact the pharmacy directly to arrange for this service.

MEDICATIONS SUPPLIED

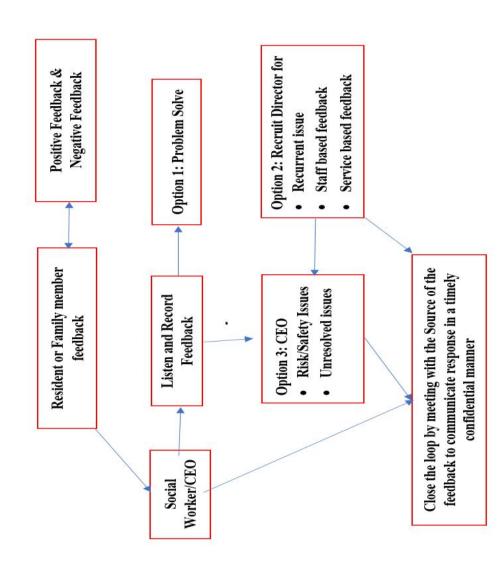
Over the counter Medications supplied by the R.K.MacDonald Nursing Home

ASA(ec) 81mg
Abenol Supp
Acetominophen(325mg)
Acetaminophen(500mg)
Anusol Supp
Baby ASA(80mg)
Biscodyl (10mg)
Calcium Carbonate(500mg)
Cascara(100ml)
Cepacol Lozengers
Dipherydramine(25mg)
Ferrous Gluconate
Anusol Ung (30 gram)

Glycerine Supp
Multivitamins
Lactulose
Maalox (350ml)
Magnolax(500ml)
Metamucil(300 gram)
Fleet Enema(130ml)
Microlax Enema(5ml)
Vitamin D 1000 IU
Vitamin D 400 IU
Ibuprophen (200mg
Ferrous Sulfate (300 mg)



FEEDBACK PROCESS



RESIDENT & FAMILY COUNCIL

RESIDENT COUNCIL is a direct opportunity for Residents to express a collective voice about the way they would like to see things in their home. Welcoming every resident, the Resident Council meets monthly to share information and to discuss problems or concerns that residents wish to raise.

If a resident would like to have a family member accompany them, they are more than welcome. To facilitate the flow of information, one or two staff members are members of this Council. Meetings are scheduled and noted in the monthly calendar and are open to every resident of the Home.

FAMILY COUNCIL is a volunteer group of family members who offer the Home a unique perspective on life at the RK. While not focused on individual concerns, this Council provides insight and offers recommendations to the Home in the quest for Excellence in Care.

All families are encouraged to participate in Family Council meetings. To become active with this Council or for more information please see our Front Office Administrative Assistant.

Family Council is "owned and run by families". When available, contact information will be posted on the FAMILY Bulletin Board

FAMILY COUNCIL WELCOME

Dear Family Member

Welcome to the R.K. MacDonald Nursing Home community.

The R. K. Family Council is a council of family members who meet regularly to discuss ways in which we can enhance the R.K. MacDonald Nursing Home community. The mission of the Family Council is to work collaboratively with Residents & their family members, friends, and advocates; the residents' council; and the administration and staff of the RK to enhance the quality of care and life experienced by residents of the RK. As a Council, we function as an independent committee.

The Council meets quarterly with additional meetings as needed .Meeting dates and times will be conveyed to CEO & executive Administrative Assistant to post on Care QA and Family Council bulletin board 2 weeks in advance of meeting.

If you would like more information about the Council, please feel free to reach out to any of the following for more information:

CEO Terry MacIntyre -Terry.MacIntyre@rkmacdonald.ca

Executive administrative assistant-Cathy.Brouwer@rkmacdonald.ca

VISITING THE RK

- Our main doors are open between the hours of 5:30am and 9pm, outside these hours please ring the doorbell / intercom system and care staff will open the doors.
- Visitors must report to the nearest nursing station in the event of an emergency
- Each Resident care area has doors that can be closed in the event of an emergency or to prevent elopement, as needed, to meet the unique needs of our Residents.
- We ask visitors to check with a nursing care staff team member before bringing food or beverages to a Resident. Some Resident require specific food textures, may have food allergies or difficulties with chewing or swallowing certain foods and / or liquids. Also staff in the care area may have allergies.
- Visitors must notify nursing care staff team member prior to assisting resident on an outing. Please ensure the Resident is signed out and if they will be gone for overnight/extended visit please notify Nursing staff 24hrs in advance to allow time to gather necessary medications.
- Please remember this is our resident's home, be respectful of their privacy.
- Visitor parking spaces are located at the front entrance and side of the building. Wheelchair accessible parking is also available.

Fire

EMERGENCY CODES

Code Green
Code Yellow
Code Black
Code Brown
Code Grey
Code White
Code Silver
Code Nurse
Stat

Code **Red**

Controlled Evacuation
Missing Resident
Bomb Threat
Chemical Spill
External Air Exclusion
Violent Person
Building Lockdown
Nurse required
immediately

Page 36

Lee Kelly

Michelle

Jennifer I

Erica

Maple Ri

Bramble

RN

Fax

Supervisi Melissa A

Schedulii

Maggie C

Martha's

RN

Fax

Tanglewo

RN

Fax
Thistledo

Cobblesto

Cobblesto

RN

Fax

Kim Mac

Rhubarb

Mary Par

Miles To

	Health Services			
,	Lee.Kelly@rkmacdonald.ca	Director Clinical Service	2	<u>'</u>
Tinio	Michelle.Tiniorkmacdonald.ca	Asisstant Director of Clinical Service	2	2:
ayes	Jennifer.Layes@rkmacdonald.ca	Care Services Adminstrative Assistant	2	2
		Scheduling	2	23
dge/2nd Floor		Wellness Den (Maple)	2	2,4
		Med Room	2	2.2
Berry		Wellness Den (Bramble)	2	2
		902-870-1238		
		902-863-3069		
ng RN		902-714-5656	2	29
Arnott		Social Worker 902-870-4484		
ıg Cell		902-870-5661		
illis		Nurse Practioner 902-870-2339		
rk		902-870-7907		
Inn/2nd Floor		Wellness Den/Med Rm.	2	,_
		Back Lounge	2	
		902-870-4019		
		902-863-5288		
ood		Wellness Den	2	,,
		Med Room	2	
		902-870-5024		
		902-863-1912		
wn Cottage			2	1.4
one Cottage			2	.(
one Wellness I	Den		2	4
		902-338-0010		
	Recreation&Spiritual	902-863-6621		
D 11	-	P (: /0 : / 1/V 1 / P)		
Donald	Kim.MacDonald@rkmacdonald.ca	Recreation/Spiritual/Volunteer Director	2	
Patch			2	
tirdge		Volunteer Coordinator	2	(
	Rehabilitation Services	rage 37		
mkins PT	Miles.Tomkins@rkmacdonald.ca		2)



ADMISSION TO NURSING HOMES IN NOVA SCOTIA

Admissions to Nursing Homes in Nova Scotia is managed by a Care Coordinator with the Department of Health & Wellness. When placement is being considered as an option for care, the family and/or a care provider will contact the Department and a Care Coordinator will guide them through the eligibility, assessment and admission processes. Please contact 1-800-225-7225 if you have any questions

RK MAC DONALD NURSING HOME REVISED JULY ,2023

64 Pleasant Street Antigonish, NS, B2G 1W7 www.rkmacdonald.ca

Phone: 902-863-2578 Fax: 902-863-4478 email: rk.adminassistant@rkmacdonald.ca