

Non-Arms Length Relationships

Not applicable at this time.

Zero Tolerance of Abuse/Neglect

There is a **zero-tolerance** of any type or pathway of abuse/neglect and aggression. Any deviation from the Ministry of Health's standards will be dealt with promptly and appropriately. Each incident will be thoroughly, promptly, fairly, sensitively and confidentially investigated and documented. To review the full policy please see "Policy: Resident Abuse" sections in this handbook.

(Extendicare. (2017). Resident Care Manual: RC—02-01-01 to 03)

Least Restraint Policy

Extendicare is committed to a restraint free living environment for residents. Our goal is to minimize the restraining of residents and to ensure that any restraining that is necessary is done in accordance with the *Long-Term Care Homes Act, 2007* for the safety of a resident or others at risk.

Restraint definitions:

Physical/Mechanical: any manual method or any physical or mechanical device, material or equipment that is attached or adjacent to the resident body, that the resident can not remove easily and that restricts the resident's freedom of movement or normal access to his or her body. Examples of this include: bedrails, tilt wheelchairs, table tops for wheelchairs, seat belts, etc.

Environmental: use of physical barriers or other means of confining the resident within a limited space, eg. locked doors, door alarms, Watchmate. Environmental restraints are often used in place of physical restraints.

Chemical: any medication that is given for the sole purpose of altering a person's behaviors, movements or physical actions.

The Home has a written policy that can be reviewed by contacting the Director of Care or the Assistant Director of Care.

Whistle-Blowing Protection

The *Long-Term Care Homes Act, 2007* offers protection against retaliation to any person who discloses information to an inspector or to the Director of the Ministry of Health and Long-Term Care, or who gives evidence in legal proceedings. This protection is known as the "whistle-blowing" protection (Resident Care Manual – Whistleblower Protection (April 2017) - 02-01-05).

Specifically, the whistle-blowing protection requires that the Home (or the Licensee) and its staff will not retaliate against any person, whether by action or omission, or threaten to do so because anything has been disclosed to an inspector or to the Director. This includes, but is not limited to, disclosure of: (i) improper or incompetent treatment or care of a resident that resulted in harm or a risk of harm to the resident; (ii) abuse of a resident by anyone or neglect of a resident by the Home or its staff that resulted in harm or a risk of harm to the resident; (iii) unlawful conduct that resulted in harm or a risk of harm to a resident; (iv) misuse or misappropriation of a resident's money; (v) misuse or misappropriation of government funding provided to the Home;

(vi) a breach of a requirement under the *Long-Term Care Homes Act, 2007*; or (vii) any other matter concerning the care of a resident or the operation of the Home that the person advising believes ought to be reported to the Director.

In addition, no person will encounter retaliation because evidence has been or may be given in a proceeding, including a proceeding in respect of the *Long-Term Care Homes Act, 2007* or its regulations, or in an inquest under the *Coroners Act*.

The Home (or Licensee) or its staff will not do anything that discourages, is aimed at discouraging or that has the effect of discouraging a person from doing anything mentioned above. Nor will the Home (or Licensee) or its staff do anything to encourage a person to fail to do anything mentioned above.

For the purposes of the whistle-blowing protection, “retaliation” includes, but is not limited to, disciplining or dismissing a staff member, imposing a penalty upon any person, or intimidating, coercing or harassing any person. A resident shall not be discharged from the Home, threatened with discharge, or in any way be subjected to discriminatory treatment (e.g. any change or discontinuation of any service to or care of a resident or the threat of any such change or discontinuation) because of anything mentioned above, even if the resident or another person acted maliciously or in bad faith. Further, no family member of a resident, substitute decision-maker of a resident, or person of importance to a resident shall be threatened with the possibility of any of those being done to the resident.

Mandatory Reporting

Regulated health professionals who have reasonable grounds to suspect that any of the following has occurred or may occur must immediately report that suspicion and the information upon which the suspicion is based to the Director appointed by the Minister of Health and Long-Term Care:

Note: Residents and families have the option to report. Regulated health professionals are required by law to report however staff and volunteers are expected to do so as well.

- (a) Improper or incompetent treatment or care of a resident that resulted in harm or a risk of harm to the resident;
- (b) Abuse of a resident by anyone, or neglect of a resident by the Home or its staff, that resulted in harm or a risk of harm to the resident;
- (c) Unlawful conduct that resulted in harm or a risk of harm to a resident;
- (d) Misuse or misappropriation of a resident’s money; or
- (e) Misuse or misappropriation of funding provided to the Home under the *Long-Term Care Homes Act, 2007*.

Safety and Security

General Safety: We provide safe and secure units for all residents.

ID Bracelets: All residents are required to wear an identification bracelet. Plastic bracelets are supplied by the home.

Building Security: All exterior doors are alarmed to prevent unauthorized entry or exit for the security of our residents. Coded alarm systems are mounted at the entrance to the home for the safety of our residents.

Fire Regulations: As a fire safety precaution, all electrical items must be cleared through the Maintenance Department.

Evacuation: Emergency evacuation training is done at orientation and annually for all staff. Emergency evacuation plans are reviewed annually and any changes are communicated to all staff in the home. Practice fire drills are held once per month on each shift. This is when staff can practice and participate in emergency evacuation. Fire exits are clearly indicated within the home.

The home also conducts mock evacuation every year where the staff can practice both vertical and horizontal evacuation procedures. During these mock evacuations outside agencies, (local police and fire department) attend and give the home feedback on how we do and offer suggestions for improvement.

Location and Operation of Call Bells: Each resident's room and bathroom is equipped with a call bell located at the head of the bed. Lounges, dining rooms, and balconies are also equipped with call bells.

Valuables: The long-term care home does not accept responsibility for a resident's personal belongings or valuables.

Notification of Next-of-Kin/Representative: Name and phone numbers of the Next-of-Kin/Representative are listed on the front of the resident's chart. Every effort is made to notify this person in the event of a change in the resident's status, illness or misadventure. NOTE: A primary contact must be designated by the resident/representative.

Smoking: Smoking is not allowed in the home. Smoking is permitted outside the front of the building in the designated smoking area. Residents who smoke must be able to transport themselves to and from the designated smoking area. All cigarettes and lighters must be kept locked up in the nursing station, and not in resident's rooms. Southlake property is smoke-free, thus, only residents are permitted to smoke in the designated smoking area. A copy of the policy can be read in this handbook.

Bringing Food into the Home: If you are considering bringing food and beverages into the long-term care home at any time, please consult with the charge nurse prior to your visit.

Scent Free Environment: Resident's, visitors and staff should refrain from wearing or bringing scented products into the home. Please also adopt scent-free practices by avoiding the use of scented products.

Latex Free Environment: Latex balloons, elastic bands, duct tape, poinsettias and other products containing latex should not be brought into the home.