



Welcome to  
The Convalescent Home of Winnipeg  
**Resident Information  
Guide**

Last revised January, 2023



## Welcome to The Home

We are pleased to welcome you to The Convalescent Home of Winnipeg.

Here at “The Home,” we follow the philosophy that **we are all one “family,” and we are happy to welcome the Resident, family and/or designate (legal representative) into our family!** Every Resident who resides at The Home is unique and brings with them their own special gifts.

The Convalescent Home of Winnipeg is a non-profit personal care home governed by a volunteer Board of Directors dedicated to providing quality care to all our Residents.

The Home aims to create a safe, friendly, and caring atmosphere for all who enter our doors. We strive to be a leader in health care through our dedication to best practices with a personal flavor. Our strength is in our attention to detail provided by our warm and welcoming staff who go the extra mile to ensure that all Residents are comfortable and well-attended. Our small size ensures we get to know each Resident personally. We strive every day to ensure dignity and sense of worth are maintained. Of utmost importance to us is meeting each Resident’s physical, emotional, psychosocial, and spiritual needs.

We aim to make the Resident’s move and transition as smooth as possible; and we will take the time to assess their needs and interests. We encourage family and friends to visit and to participate with us in scheduled activities/programs.

We have developed this guide as a general source of information for the Resident, family or designate providing an overview of the services available, and as a point of future reference responding to some of the more frequently asked questions. All Residents, families or designates are encouraged to approach staff with specific questions, comments or to seek clarification that may not be addressed in this guide. Additional informational brochures are available on the main floor Information Centre bulletin board (located beside our Business office) regarding diverse topics that may also be of interest.



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## The Home

The Convalescent Home of Winnipeg is an 84-bed, fully accredited personal care home in a residential setting in the Corydon/River Heights area of the city. (Accreditation is granted by the Canadian Council on Health Services Accreditation.)

Our main floor includes our Business office, main dining room, lounge area, tearoom, recreation space, and access to our outdoor courtyard with our lovely grounds. The courtyard is enclosed by a fenced area and allows Residents to view the houses in the community along Jessie Street. In the summer months, there is no shortage of flowers to add color to our landscape.

We have three units or floors on which our Residents reside. Each unit accommodates 28 Residents. Our rooms are mostly shared with the majority being four Residents to a room. Each unit also has two semi-private rooms (two Residents to a room) and four private rooms.

Upon admission, Residents will be admitted into a four bed room living space. The semi-private rooms and the private rooms are on an “as needed basis” and will be assessed by the nursing staff.

At times, due to unforeseen circumstances, we may have to relocate Residents to different rooms. This also applies to our semi-private and private rooms.

Each unit has a central nursing station, as well as a lounge area (small dining room) for Residents to visit and to have their meals if they are unable to partake of their meals in the main floor dining room.

Visitor parking is available on the surrounding residential streets with two-hour free parking being available Monday-Saturday from 8:30 a.m. to 5:30 p.m. There is a designated parking spot(s) on the street in front of The Home for individuals that require handicapped parking. Visitors are required to have their applicable parking permit pass on display in their vehicles should they park in the handicapped area which is available on a first-come basis.

## **Our History**

The Convalescent Home of Winnipeg, as an entity, dates back to 1906 when it was established through the visionary efforts of the Women's Hospital Aid Society to relieve overcrowding at the Winnipeg General Hospital during the long months of the severe typhoid epidemic.

The Home's history is Winnipeg's history. It has provided continuous care to members of society's most vulnerable population (our elderly) extending through the typhoid epidemic, the Spanish Flu pandemic, Winnipeg's "Strike," two World Wars, the depression, polio epidemic, Winnipeg Flood, ongoing struggles with funding shortages, and challenges with aging spaces combined with poor structural design of its many location(s).

In the 1960's, The Home's closure seemed imminent because of the untenable state of the building (built prior to 1917) and concerns for the safety of its Residents. An appeal was made directly to Premier Duff Roblin who took a keen interest in wanting to help. Just days prior to the planned closure on December 31, 1963, the Convalescent "Hospital's" Board received a letter from the Premier stating that the government would assume responsibility for the structure if it would keep its doors' open. Finally, in March, 1965, sod was turned to commence the construction of the "new" (existing) building at the corner of Hugo Street North/Jessie Avenue which, when finished, boasted of being a well-equipped, spacious, modern facility - the first Personal Care Home in Manitoba.

# Resident's Rights

## Resident's Bill of Rights

### **Every Resident has the right to respect and dignity:**

- To be treated with courtesy and respect, and in a way that fully recognizes the dignity and individuality of the Resident.
- To express their individuality and to have their personal values respected.
- To honor the way the Resident is most comfortable being addressed.
- To pursue interests: social, cultural, religious, and other interests of their choice.
- To be sheltered, fed, dressed, groomed, and cared for in a manner consistent with their needs.
- To make choices about one's personal life or to designate a responsible party and/or legal representative to act on their behalf in the event that health conditions preclude self-representation.
- To form and maintain relationships with Residents within The Home and in the general community.

### **Every Resident has the right to receive care that is:**

- Courteous, fair, respectful, and free from all forms of abuse.
- Consistent with their needs.
- Delivered in collaboration with care providers and promotes self-care/independence to the greatest extent possible.
- Delivered in a clean and safe environment.
- Free of physical or chemical restraints unless assessed as necessary for protection from personal injury or from inflicting injury upon others when alternatives have been tried and exhausted and where benefits of restraint use outweigh the burdens/risk.
- Delivered outside of The Home where medical services are not available within The Home.
- Respectful of the right to die in peace, with dignity and comfort, and in the presence of family and/or friends when possible.

**Every Resident has the right to information and freedom of expression:**

- To have the opportunity to participate in decisions concerning their care.
- To be informed of their medical condition and the proposed course of treatment.
- To be informed of the consequences of any decision regarding consent to, or refusal of treatment.
- To expect staff to identify themselves and the role they serve.
- To exercise the rights of a citizen.
- To raise concerns and/or to propose changes in policies and/or services in The Home.
- To self-advocate, or when requested, advocate on behalf of others, without fear of discrimination or reprisal.
- To express opinions, recommendations, and suggestions freely in the form of a Residents' Council in accordance with Human Rights Code/the rights of other Residents.
- To own and display personal property in adherence to safety requirements and the rights of other Residents.

**Every Resident has the right to privacy:**

- To have treatment and care administered with sensitivity and respect for privacy.
- To expect that personal, financial, and medical records will be kept confidential.
- To communicate in private with any person without interference.
- To send and receive correspondence without any interference.
- To be alone when desired.

The Resident's Bill of Rights is reviewed annually with the Residents at our Residents' Council to ensure that all agree with the full content.



## Code of Conduct

The Convalescent Home of Winnipeg has a ZERO TOLERANCE POLICY towards abuse or harassment and is dedicated to providing a safe environment for its Residents, family members, visitors, volunteers, companions, and employees. The Convalescent Home of Winnipeg DOES NOT TOLERATE any negative behavior or conduct (actions, comments or displays) by a family member, visitor, volunteer, companion, or employee through verbal, physical, sexual, or psychological means that is directed towards a Resident, family member, visitor, volunteer, companion, or employee and causes physical injury and/or psychological trauma.

Everyone is entitled to safe living and working conditions and an abuse free environment. The following guidelines must be adhered to while on the premises of The Convalescent Home of Winnipeg:

- Be respectful.
- Show common courtesy and respect to all. No one has the right to control another person by threat, coercion, physical intimidation, or any other misuse of power.
- Demonstrate that abusive language and aggressive behavior are unacceptable at all times.
- Respect personal property.
- Behave respectfully to all regardless of race, religion, gender, age, or sexual orientation.
- Treat all individuals fairly and consistently.
- Respect the confidential nature of information concerning Residents and their families.
- Maintain open communication by addressing concerns through the proper lines of communication.
- Act appropriately in The Convalescent Home of Winnipeg and at its meetings and functions.

The Convalescent Home of Winnipeg expects all individuals to comply with this Code of Conduct.

## **Code of Ethics**

The Convalescent Home of Winnipeg adheres to a Code of Ethics which defines the relationship between The Home and each Resident and their families.

The Home's relationship with the Resident and their families is directed by the following:

- Our Mission and Philosophy.
- The Resident's Bill of Rights.
- The Standards for long term care organizations, developed by the Canadian Council on Health Services Accreditation.
- The Standards specified by the Home's Board of Directors.
- A commitment to address all ethical issues related to the individual needs of each Resident.
- A commitment to confidentiality.
- A commitment to be available to the Resident and their families to address any concerns.
- A commitment to be available to and to address any concerns brought forward by caregivers on behalf of the Resident.
- A commitment to keep current through relevant educational resources and community contacts.
- A commitment to non-discriminatory treatment and fair practice to the Resident and their families.

## **Privacy Matters**

### **Our Commitment to Your Privacy**

The Home is committed to protecting all Residents' privacy as it pertains to their personal health information and undertake to maintain security and confidentiality of all such information.

### **Collection of Personal Health Information**

The Home collects personal health information from you (the Resident), your family/designate acting on your behalf, in order for us to provide you with the care, programs and services needed.

On occasion, we collect personal health information about you from other sources, such as medical facilities you have visited, if we have your consent and as law permits.

### **Use and Disclosure of Personal Health Information**

We collect and use information about the Resident for the following purposes:

- To help plan and provide appropriate care, programs, and services;
- To inform and educate the healthcare team;
- To communicate with other service providers;
- To monitor the care and services provided through our quality management program;
- To assess the Resident's response to the services provided and validate we are meeting our commitments to you;
- To serve as a record of the services provided, including who and when the service was provided;
- For strategic planning, decision-making, and allocation of resources;
- To serve as a legal document regarding the care provided;
- To comply with legal and regulatory requirements.

### **Resident's Right to Limit the Use and Disclosure of Personal Health Information**

If a Resident has any concerns or requests to limit the use or disclosure of their personal health information, they may speak with our Social Worker. The Home will not release any confidential information about a Resident without their written consent or the written consent of their legal representative.

## **Respectful Environment for Residents and Staff**

All Residents and staff are entitled to be treated with respect, dignity, and compassion, to reside and to work in a respectful environment free of abuse. All incidents of alleged abuse will be reported and investigated in a timely fashion. Appropriate action will be taken based on the outcome of the investigation.

## **The Protection for Persons in Care Act**

The Protection for Persons in Care Act is a Manitoba law which was implemented to help protect adults from abuse when receiving care in a personal care home, hospital, or other such health care facility.

Abuse as defined by the Protection for Persons in Care Act (2004) includes physical, sexual, mental, emotional, and financial mistreatment. Any of these, alone or in combination is considered "abuse" if the mistreatment is reasonably likely to cause death, serious harm, or significant property loss. The Protection for Persons in Care legislation creates a formal process for reporting, investigating, and resolving allegations and suspicions of abuse in health care settings.

It is mandatory to promptly report any suspected abuse to the Protection for Persons in Care office at 204-788-6366 or toll free at 1-866-440-6366.

## Resident Admission

### **Eligibility for Admission to The Home**

Eligibility for admission to a personal care home (PCH) is determined after an application is made to the Winnipeg Regional Health Authority Long Term Care Access Centre. If a person meets the criteria for a PCH, their application will be forwarded to the PCH of their choice. At times, if their first choice has no room/bed availability, the application may be sent to another PCH where there is a vacancy.

The Convalescent Home of Winnipeg is presently unable to provide care for the following medical needs/Residents requiring such types of care: Tube Feeding, Dialysis, Bariatric.

### **Pre-admission Process**

Upon receiving an application for admission to The Home, the Social Worker and/or designate will review the details and obtain supporting information from the hospital/community to determine suitability.

At times, a preadmission visit may be required.

Once a bed offer has been made, the Resident (if able), family and/or designate will be offered a tour of The Home.

### **Admission**

To help assist in the transition to The Home, it is recommended (if at all possible) that a family or designate accompany/meet the Resident on the first day.

During the admission process, we will have the opportunity to get to know the Resident, as well as their needs. It is also a time to become familiar with The Home and the services available.

## **Advanced Care Plan**

Upon admission, the Resident, family or designate will meet with the Clinical Coordinator/nurse to express their preferred medical treatments/wishes.

Should the need arise to provide acute care, hospitalization may be required, if this is the Resident's, or their family's/designate's decision to pursue.

If there is a Living Will or a Health Care Directive, please advise and provide a copy of the document to the Clinical Coordinator/nurse.

In situations where a Resident has a completely obstructed airway, 911 will be called and trained staff will initiate the Obstructed Airway maneuver. It is important to note that CPR is not provided by any of The Home's staff.

## **Primary and Secondary Contacts**

As well, at the time of admission, a primary and secondary contact will be asked to be identified and recorded on the Resident's chart. It is important to ensure The Home consistently has the most recent contact information.

It is expected that the identified primary contact will connect with all other family members/friends, as appropriate, when information is passed to them by The Home regarding the health status of the Resident.

If there is an assigned Power of Attorney or Committee, please inform The Home's staff (i.e., Social Worker, Controller (regarding financial information), or nursing staff). A copy of the Power of Attorney or Committee papers is required.

If there is an assigned Health Care Proxy, please also inform staff and provide a copy of this document for completion of the Resident's chart.

## **Accommodations/Furniture/Personalization of Room**

The majority of accommodations at The Home are shared (four Residents to a room) with most having a large window allowing natural daylight to brighten the space.

Each room has a washroom that is equipped with a sink.

All rooms are furnished with a single bed, a closet, and a bedside dresser. At each bedside is a call button to summon staff when assistance is needed, as well as an overhead light.

The Resident may wish to bring their own comforter/quilt for their bed (single or twin-bed size only); together with pictures/photographs. Any pictures/photos that are intended to be wall-hung must be managed by our Maintenance Department. All photos/pictures (either table-top or wall-hung) must have plastic cover/protection versus glass for safety reasons. **Prior to bringing items to be wall-hung, please discuss with the Resident's nurse or our Social Worker to ensure appropriateness and suitability.** We encourage and support personalization of each Resident's designated space to make them feel more at ease with their own recognizable possessions. However, size of accommodations is limited in each room and "less is more," and, too much clutter can present safety risks to the Resident and staff.

Each floor has a communal television, located in the common/main area, for the shared usage of the Unit's Residents. An individual television and/or phone may also be able to be accommodated in the Resident's room. **Before bringing in a television for a Resident's personal use, please contact our Maintenance Manager to discuss suitability for both the size of the room and room layout – in some cases, the room arrangement may not be conducive for the placement of a television.** If found appropriate – the television must be a flat screen with a screen size no larger than 30 inches. Residents may be asked to use a headphone/headset to be respectful of our shared living space. For further details on these topics, refer to the "Cable Television" and "Phones" content in the pages that follow in this section.

**For safety reasons, all electrical appliances (televisions, phones, radios, lamps and so forth) must be checked by our Maintenance Department prior to being used. If being brought in on admission day, kindly leave such items with our Social Worker. If brought in after admission day, please advise the nurse so that the necessary safety checks can be completed on a timely basis.**

**Items NOT permitted** include (but are not limited to): personal lounging chairs (i.e., La-Z-Boy recliners), electric blankets, heating pads, refrigerators (in shared rooms), hot water bottles, heaters/humidifiers, and sharp objects. If unsure about any item, please do ask our staff (i.e., our Social Worker, Resident's nurse, our Maintenance team). We would be pleased to discuss with you and advise.

Once a Resident is settled in their room, we suggest that rather than bringing in additional items (such as new books/magazines, puzzles, decorative items), that family/ friends/designates **exchange/replace** existing possessions rather than adding to those already in place. This helps prevent an overwhelming accumulation of clutter.

## **Personal Belongings**

### **Clothing/Footwear**

The following are suggested items to be brought in on the day of admission or shortly thereafter:

- Seven outfits (pants/tops) - wash and wear style type clothing. Handwash and/or dry-cleanable items are **NOT** recommended as we are unable to provide dry cleaning or handwashing services. We do **NOT** provide mending/alteration services.
- Seven changes of undergarments, socks
- Four changes of pajamas/night gowns
- Shoes with a firm and supportive sole
- Jacket (appropriate for the season)

**DUE TO LIMITED DRAWER AND CLOSET SPACE, THE FAMILY/RESIDENT DESIGNATE IS RESPONSIBLE FOR SWITCHING OUT CLOTHING AND REPLACING WITH APPROPRIATE SEASONAL WEAR.**

If you have specific questions related to you family member's clothing and what is suitable, please speak directly with the unit nurse (for example: verifying whether open-back clothing would be beneficial based on the Residents' care needs).

### **Personal Aids/Toiletries: (if applicable)**

- Eyeglasses, hearing aids and batteries, and dentures (if required)
- Shampoo/conditioner, deodorant, lotions (scent-free), toothpaste; ultra or extra-soft toothbrush. For dentures: toothpaste needs to be specific for dentures as abrasives in regular toothpaste can damage dentures. (The Home will provide a denture cup. Denture cleaning tablets are **NOT** recommended.)
- Hair comb/brush
- Electric razor (straight razors or Bic style are **NOT** permitted).

### **Equipment**

- Wheelchair and/or walker, if required

The Home does **NOT** provide wheelchairs or walkers.

Canes are **NOT** allowed (due to safety risk).

Electric Scooters are NOT allowed (again, due to safety risk).

### **Food Storage/Snacks**

A communal refrigerator is available on each floor for the safe storage of any perishable foods brought in. Please ensure items placed in the fridge are dated and have the Resident's name on the item. Non-perishable foods such as cookies and candies may be stored in closed containers at the Resident's bedside.

Communal microwave ovens are available on each floor.

### **Cable Television**

If desired and presuming the Resident's room is able to logistically accommodate, a Resident-owned television may be installed.

**Reminder: Before bringing in a television for a Resident's use, please contact our Maintenance Manager to discuss suitability – in some cases,**

**the room arrangement may not be conducive for the placement of a personal television.**

It is the responsibility of the Resident, family or designate to purchase/provide the television, to contact the service provider for the applicable hook-up, and to cover all costs (including one-time installation and ongoing fees). When speaking with the service provider (i.e., Shaw or Bell MTS), should they need to attend at The Home, please advise them that their appointment must be scheduled for Monday to Friday, between 9 a.m. and 3 p.m.

## **Phones**

If desired, a Resident may have their own phone\* installed in their room. The cost and acquisition/installation of the phone is the responsibility of the Resident or their family/designate. Kindly ensure that the phone company attends at The Home during business hours (9a.m. – 3p.m.) Monday-Friday.

If the Resident's phone number from when they had resided in the community is still available, it may be possible to transfer this number to The Home; otherwise, the service provider will assign a new number.

Kindly also advise the Business office once the phone has been installed.

\*If selecting a mobile/cell phone, obtaining the phone and all applicable costs are, again, the responsibility of the Resident, family or designate. Please label the phone with the Resident's name, as well as label the charging cable/plug adapter. Should a mobile phone be chosen, it is recommended that a very simple-to-use phone be selected with very few apps.

## **Mail**

Mail is delivered to Residents' rooms Monday to Friday. Staff would be pleased to assist in opening or reading letters to a Resident at any time. The Business office can assist in mailing letters. Postage may be purchased from the Business office (located on the main floor of The Home).

## **Newspapers**

A Resident may wish to have a newspaper delivered to The Home. Ordering of the subscription and the ongoing cost are the responsibilities of the Resident, family or their designate.

Should a subscription be put into effect, please inform The Home's Business office (at (204) 453-4663) to ensure that the newspaper is appropriately delivered to the Resident. If a future decision is made to cancel the newspaper, this again is the responsibility of the Resident, family or designate.

## **Valuables**

To avoid the breakage or loss of possessions, valuables/family heirlooms, etc. should be entrusted to a family member or designate. This includes such items as: bank debit cards, credit cards, personal identification and so forth.

Carrying of personal money is discouraged, unless limited to small amounts (under \$20.00).

### **The Home is not responsible for lost, damaged or stolen items.**

This includes, but is not limited to personal belongings, dentures, eyeglasses, or hearing aids. If you choose to have items of value brought/left at The Home, private insurance should be obtained for these items.

## Resident Finances

### **Daily Residential Charge**

All Residents in long-term care are charged a per diem rate (referred to as a “Residential Charge”) which is established by Manitoba Health. The daily rate is based on the Resident's previous year’s income (confirmed by the Notice of Assessment). A rate adjustment occurs annually on August 1<sup>st</sup> and a copy of the most recently issued Notice of Assessment is required in order to accurately determine the ongoing per diem charge. Should a current copy of the Notice of Assessment not be provided, we are obligated to charge the maximum per diem rate until such time as the Notice is submitted. The Resident, their family or designate are responsible for payment of the assessed charge.

Upon admission, our Controller is available to assist in the completion of the necessary forms and to respond to finance-related questions pertaining to the costs of care. We highly recommend pre-authorized debit for payment of the Residential Charge because of its convenience and ability to securely ensure payment is made on time. (A void cheque is required to establish the monthly bank account debit for the applicable Residential Charge.)

Should Power of Attorney papers be available, these should be provided either to our Controller or Social Worker.

### **Resident’s Trust Account**

It is recommended that a “Trust Account” be established and maintained (for a nominal monthly fee) by The Home. A sum of money (depending on estimated expense requirements) to a maximum of \$400.00 may be deposited into the Trust Account. It is recommended that a minimum balance of \$100.00 be maintained.

With signed authorization provided, The Home, on the Resident’s behalf, will utilize the Trust Account funds to pay for specific items, such as name labels, hairdressing, pull-ups (incontinent products), podiatrist fees, medications not covered by Manitoba Health/Pharmacare, medical procedures (lab/EKG fees), annual wheelchair inspections, slings for usage on a Hoyer lift, hip protectors,

personal transportation to appointments, facial tissues, lotions, etc. (Please consult with the Controller for a complete list of items (subject to change) that may be charged to the Trust Account.) Small sums of cash to be used at the Resident's discretion may also be withdrawn.

The Resident or their family/designate are responsible for purchase (and the associated costs) of personal items including but not limited to clothing, toiletries, hearing aids/batteries, eyewear, dentures, newspaper subscriptions, private insurance, companions (for socialization), television/ cable and phone fees, etc.

The Home maintains records of all transactions which are available for review, upon request.

### **Additional Insurance**

Upon admission, please advise your nurse of any additional private health care plans the Resident may have in place (e.g., Blue Cross).

The Resident, their family or designate may first have to pay for the service, and then seek reimbursement by completion and submission of the appropriate forms to the private health care provider.

# Resident Care

## The Care Team

### Nursing

Skilled nursing staff are on duty 24/7 providing all Residents with the specific care needed to ensure their individual Care Plan needs are met.

Our Nursing Team consists of the Director of Care, Assistant Director of Care, Clinical Coordinators, Staff Development Manager, nurses, and health care aides. We encourage all Residents to direct any concerns immediately to their unit's nurse and, if further assistance is required, to speak with the Assistant Director of Care or Director of Care.

Medications are dispensed by our nursing staff. **Medications of any type are not allowed to be kept in the Resident's room.**

The Home often has health care aid and nursing students in attendance completing the practical component of their education. Students are supervised by The Home's staff, as well as their own fully qualified instructors from the applicable accredited educational institution.

### Physician

The Home provides medical care to Residents from attending physicians. Physicians conduct regular onsite weekly visits to The Home to assess/discuss the status of the Residents under their care. There is also a physician on call at all times and our nursing team will reach out for a consult, as needed.

Should it be applicable, a Resident may continue to receive care for a specific medical condition by a specialist in the community.

If a Resident, their family/designate wishes to continue the use of the services of their private physician, please consult with the Assistant Director of Care or Social Worker, as there are specific guidelines that must be followed.

## **Pharmacy**

The Home uses the services of a team of pharmacists who are consulted on a regular basis. In the best interest of all Residents, medications and nutritional supplements are prescribed by the attending physician, administered by the nursing team, and are closely monitored.

## **Dietician/Dietary**

The Home has a dietician who visits on a weekly basis. Within the first weeks of being admitted, the dietician will visit the Resident to determine dietary preferences and any specific requirements/supplements. Should there be any swallowing concerns, a referral consultation with a Speech Language Pathologist will be made by our nursing team.

The goal of the Dietary Department is to provide high quality, nutritional meals to Residents, guests, and staff. All meals are prepared fresh in-house with an alternative option always available. The menu board provides the daily choices for all meals. We have a monthly Resident's choice meal, determined by vote at Residents' Council. The menu rotates on a 4-week cycle to ensure variety. Meals are served to the Residents by the Dietary staff in the dining room for breakfast, lunch, and supper. If the Resident is unable to partake of their meals in the dining room, the meals will be brought to the applicable floor where the Resident will eat with fellow Residents in the tearoom area. Snacks/beverages are available/offered between meals.

Family and friends are welcome to join the Resident for a meal in the main floor tearoom; however, seating is limited, and we require 24 hour's advance notice to book the space (subject to availability). Booking of the tearoom is accomplished by speaking with any member of the Dietary team or calling the Kitchen at (204) 453-3664 ext. 208. There is a cost for meals served to family/friends, etc. and the Dietary team will be able to advise accordingly. Meal tickets may be purchased Monday to Friday from 8:00 a.m. to 3:00 p.m. from our Business office.

For large group/private function gatherings, it may be possible to reserve the Recreation room when available (i.e., not in use by the Recreation staff for Resident programs). We will always do our best to accommodate an ask; however, we cannot guarantee availability. A request to book the Recreation room can be made by calling our Social Worker at (204) 453-4663 ext. 205.

During the busy holiday season/special occasions (i.e., Mother's Day, Father's Day, Easter, Christmas, New Year's, etc.), due to the "cozy size" of The Home, we do not accept reservation requests in order to be fair to all families/friends who wish to visit their loved ones.

### **Occupational Therapist**

An Occupational Therapist visits The Home on a weekly basis to assess the Residents' mobility needs. With the Therapist's guidance, walking programs are implemented and conducted by the nursing staff throughout the week.

Physical therapy consultations are available as required.

### *Medical Aids/Equipment/Cane/Wheelchair/Walker*

An Occupational Therapist assesses all Residents for suitable equipment that may be needed for mobility and seating. All recommendations are reviewed with the Resident, their family/designate before any purchases are made.

The Resident, their family/designate may also independently purchase the identified items and/or according to the Therapist's recommendations.

Once the equipment is determined to be appropriate, payment is required to be made to the supplier by the Resident, their family/designate.

Annual preventive maintenance is undertaken in order to ensure safety and reliability of wheelchairs and walkers, with costs incurred paid for by the Resident, their family/designate.

### **Podiatry (Foot Care)**

If the services of a Podiatrist (foot care doctor) are required, a referral will be made by the nursing team after appropriate consultation with the Resident, their family/designate. Podiatrists who attend at The Home are provided through an outside agency. Payment for services is the responsibility of the Resident, their family/designate. If a Resident is enrolled with a medical insurance plan, coverage for this service may be available. Completion and submission of the applicable form(s) is the responsibility of the Resident, their family member/designate.

### **Recreation**

Our Recreation team works diligently to provide a wide range of activities and programming to Residents in small and large group settings, as well as on a one-to-one basis. Activities are conducted during the daytime Monday to Friday, some evenings, and Saturdays, as scheduled (with the only exception/interruption being on statutory holidays). Further Recreation details are located in the **Resident Lifestyle** section of this guide.

### **Social Worker**

Our Social Worker is available to meet with Residents, their family/designate. As Resident advocate, our Social Worker can help address concerns as they arise. As a member of the care team, our Social Worker also helps identify social and emotional care needs, and promotes a Resident oriented environment through Residents' Council. Short term counseling for the Resident and their family is part of this service.

Our Social Worker can also assist with a tour of The Home, decision-making regarding aspects of care needs, placement, and adjustment to long-term care. Community referral services for the Resident and their family are also available through our Social Worker.

## **Volunteers**

Volunteers are an important part of “The Home.” The majority of volunteer opportunities are with the Recreation Department.

All volunteers are screened through a formal process that includes an application, interview, reference checks and a criminal reference check. More information can be obtained from the Recreation Manager.

## **Resident Lifestyle/Everyday Living**

### **Therapeutic Recreation**

The Recreation Department completes an in-depth assessment form and care plan for each Resident. Three goals are developed based on the Resident's social, emotional, cognitive, physical, and spiritual needs. All our programs are developed around the community of Residents' identified needs, interests, and preferences.

### **Monthly Recreation Calendar**

A monthly recreation calendar is posted on each floor and personal copies are made available. The calendar depicts special events, small and large group programming, and seasonal activities.

### **Pet Visitation/Program**

The Home recognizes and appreciates the positive therapeutic value of pets. However, because of the small size of The Home, we reserve the right to limit the number of pet visitors present at any one time.

For the safety and well-being of our Residents and all visitors, we have a pet policy in place. All pets must be obedient, good tempered and leashed/supervised at all times. In addition, we ask that the following points be respected:

- Vaccinations must be current, and the pet must be in good health;
- Pets must be walked on "city" property and utilize the boulevards (and not The Home's greenspace) for "bathroom purposes" (the pet owner is responsible for all clean-up and disposal of pet waste – in outdoor receptacles);
- Pets are not allowed in the dining/food preparation areas, except where law permits – such as for certified guide dogs.

We also have ongoing pet visits scheduled with the St. John's Ambulance Pet Therapy Program.

## **Large Group Activities**

The Recreation Department provides a variety of large group activities and events held in the Recreation room or the dining room. Events are based on Residents' interests and seasonal celebrations. Programs include music/sing-alongs, baking, entertainment, Birthday Parties, exercises, bocce ball, shuffle bowl, movie night (and more).

## **Small Group Activities**

Recreation consistently offers small group programs. These programs are developed to suit the specific needs of the Residents attending and may include music, crafts, exercises, reminiscing, news and views, balloon volleyball, crosswords, just for laughs, brain teasers, and many more.

## **1-1 Activities**

One-to-one time is offered by Recreation staff to Residents with specific recreational needs. As well, in order to get to know a Resident and their preferences, members of the Recreation team will spend dedicated time in personal conversation with individual Residents.

## **Care Conferences**

A care conference is scheduled shortly after a Resident's admission (6-8 weeks) and annually thereafter. The Interdisciplinary Care Team, including the Resident, their family/designate meet to ensure that the care being provided is meeting the Resident's needs. Nursing, Occupational Therapy, Dietician, Recreation and Social Work will be present to comment (or a report will be given) and discuss options for providing the best quality of care. Our Pharmacist will also provide a written report of the prescribed medications.

Family or the Resident's designate will be mailed an invitation to participate in the care conference in advance of the scheduled date.

We ask that any questions or concerns be raised on a prompt basis with the appropriate member of The Home's staff (based on the nature of the inquiry or

issue at hand) and not to wait for the care conference. We value open lines of communication and encourage respectful dialogue at all times.

For more information regarding care conferences, please speak with the Resident's nurse or our Social Worker.

## **Residents' Council**

All Residents of The Home are invited to participate in our Residents' Council which meets every second month or a minimum of five times a year to review/discuss issues that are relevant to the attendees.

Department managers are welcomed as guest speakers.

The Social Worker facilitates the meetings to help Residents address concerns, decisions or issues that contribute to the overall quality of life at The Convalescent Home of Winnipeg.

The Residents are asked to speak openly to management and staff about their issues in a positive and safe environment.

Minutes are taken and posted in a designated area on every floor. The perspective departments are advised of any concerns if they are not in attendance at the meeting.

## **Resident/Family Info Evenings**

Resident/Family information meetings are held in order to maintain open communication between The Home, Residents, and families/designates. Dates of meetings and agendas are posted in advance of the scheduled timing.

## **Resident Voting**

Polls are set up within The Home at election times exclusively for Residents. Staff are available to assist with transport to and from the "voting stations," and all Residents who are interested, are encouraged to exercise their right to vote.

## Salon Services (Hair Care)

A hairdresser is available on a regular basis at The Home. Services such as haircuts, shampoos and sets, permanents and so forth are available. The Resident, their family/designate may make an appointment through the nurse. These services are charged to the Resident's Trust account or alternative arrangements may be made for direct payment.

## Spiritual Care

The Home hosts a weekly Anglican Service on Tuesday mornings conducted by volunteer clergy from St. Michael's and All Angels Anglican Church.

The Home offers other programs that encompass spirituality which include weekly Bible Study, Hymn sings, Christmas Candle Lighting Service, World Day of Prayer, and a Celebration of Life to honor those Residents that have passed away.

If the Resident wishes to have someone visit from their parish, they are most welcome in their new home.

## Visiting Hours

Within the scope of our efforts to nurture a "homelike" atmosphere, we recognize the key role that families and friends play in the lives of the Residents.

Unless otherwise stipulated (i.e., due to a viral or other type of outbreak within The Home), a Resident has the right to have visitors and visiting can take place on the floor of their room as well as on the main floor where there are seating options conducive to visiting.

Although we are a 24-hour facility, in order to accommodate care, visits are recommended to be planned for the latter part of the morning, afternoons, and early evenings.

All visitors require a **mandatory swipe card** to access The Home via our front doors (off of Hugo Street North).

If need arises to visit past 11:00 p.m., you will be required to connect with the floor/unit that you will be visiting. The Home's front doors are locked in the later evening hours and overnight for the safety and security of the Residents and staff.

### **Handicap Parking (Hugo Street)**

The City of Winnipeg has designated two handicap parking spaces in front of The Home on Hugo Street. A handicap parking permit is required to park in these spaces and must be clearly displayed to avoid being ticketed.

### **Handicap Parking Permit**

The Home has two handicap parking permits available for families or designates. These parking permits are available for family outings, doctor appointments, etc., and allow the ability to park in handicap parking spaces throughout the city.

Handicap parking permits are available on a first come, first served basis, and are signed out at the Business office (Monday-Friday 8:00am-3:00pm).

### **Room Transfer**

Occasionally, in the interest of best quality care, it becomes necessary to transfer Residents from one room to another within The Home. This may require a request being made to move a Resident from a private room/semi-private to a four bed room. Any such move is done to enhance the quality of life for all Residents involved.

We ask your cooperation and understanding should a room transfer be needed. The transfer will always be discussed with the Resident, family, or designate prior to proceeding.

### **Social Leaves/Bed Extensions**

Residents are able to leave The Home for family outings, holidays, etc., up to a maximum of 21 days annually. For safety and planning reasons, we ask that nursing staff be made aware well in advance of all social leaves from The Home and that family/designate sign a Release of Responsibility form prior to the

leave. Medications will be prepared and provided by The Home for the duration of the leave.

Should a Resident require hospitalization for more than 21 days, a bed extension reserving the Resident's room at The Home can be arranged.

### **Transfer/Discharge**

Should there be the desire to transfer to another personal care home at any time, please request assistance from the Resident's nurse or Social Worker. They will be happy to provide you with advice on the appropriate steps to follow.

Personal belongings will be released only to the Resident, family or designate and are to be packed/picked-up on the day of transfer/discharge.

Due to lack of space, The Home is unable to store personal items for Residents/ on their behalf after having been transferred/discharged.

## Immunizations

### **Influenza Vaccine**

Health Canada advises that the most effective way to be protected from influenza (the flu) is to be vaccinated each year, usually in the Fall season.

Presuming that the required consent is given and there are no known allergies, the Influenza vaccine will be prescribed by the attending physician and administered to the Resident by their nurse.

### **Pneumococcal Pneumonia Vaccine**

Another vaccine offered free of charge at The Home to all Residents is the pneumococcal vaccine. Similar to the influenza vaccine, if consent is given, the vaccine will be prescribed by the attending physician and administered to the Resident by their nurse. The pneumococcal vaccine is only required once, as opposed to the Influenza vaccine which is provided annually.

# The Home's Services

## **Housekeeping**

The Home's Housekeeping Department is responsible for maintaining high standards of cleanliness providing for a safe, clean, and comfortable environment throughout.

Housekeeping staff will visit a Resident's room/washroom regularly to clean and empty wastebaskets.

## **Infection Control**

Infection control is extremely important in any environment, but imperative in a communal environment where the population is vulnerable due to health care issues.

One of the simplest, yet single most important way to stop the spread of infection is through proper hand hygiene (washing of hands via soap and water or hand sanitizers).

Hand sanitizers are located throughout The Home.

Residents are also strongly encouraged to get the annual flu vaccine.

As a family or friend visiting, we ask that if you are ill to stay home until recovered.

If there is an outbreak at The Home, proper signage will be posted, with the understanding that visits should be postponed until the outbreak has been declared over.

If you have any questions, please speak with the Resident's nurse or our designated Infection Control Nurse.

## **Integrated Quality Improvement**

The Home maintains an active Quality Assurance Program in our efforts to continuously provide the best care and services to Residents and their families/designates.

We may request participation from the Resident, family/designate to gather opinions on your experiences with the care and services delivered by The Home/its staff. This may be accomplished through surveys, Resident and Family Information sessions, Residents' Council, etc. Residents and families/designates may also come forward at any time with suggestions for improvement(s) by submitting in writing to our CEO/Director of Care or Assistant Director of Care.

## **Lab and Radiology**

Laboratory services are provided within The Home. A mobile x-ray service is also available to do basic x-rays at The Home. Any costs not covered by Manitoba Health are the responsibility of the Resident, their family or designate.

## **Laundry**

The Home provides on-site laundry services taking care of:

- Bedding and linens
- Resident personal wearing apparel provided that items are "wash and wear" and labeled with the Resident's name.

Labeling is done by The Home for a nominal fee. Should family prefer to do a Resident's laundry, please advise a member of the nursing team.

The Home does not have the capability to mend/repair clothing.

## **Maintenance**

The Maintenance Department is responsible for maintaining and ensuring the building safety of The Home. If there are any concerns with the Resident's room, please notify the Maintenance Department or the Resident's nurse.

When bringing in any electric items (lamps, televisions, phone, etc.), please advise the nursing staff, so that the Maintenance Department can perform a safety check of the item.

Maintenance is also responsible for hanging any pictures/photos in the Residents' rooms.

### **Transportation/Escort**

Ambulance/stretcher service, both emergency and non-emergency, is available.

Transportation costs occurring when there is a transfer to the hospital and back to The Home within a 24-hour period is covered by Manitoba Health. Otherwise, the costs are the responsibility of the Resident, family, or designate.

Private transportation arrangements (at the expense of the Resident, or family or designate) can be made for outings such as for shopping or medical appointments. The Resident's family or designate is required to accompany the Resident to their appointments. Should this not be possible, companions may be provided with the fee being the responsibility of the Resident, family, or designate.

## Special Mention

### **Alcohol Consumption by Residents**

For those Residents wishing to consume alcoholic beverages, approval must be given by their physician. All such beverages must be provided by the family/designate and will be stored at the nursing station and administered by nursing staff.

Alcoholic beverages cannot be shared with other Residents.

The Home does not have a license to serve alcoholic beverages; therefore, no alcoholic beverages can be served at/during family functions.

### **Non-Smoking**

As per The Home's policy, Residents, staff, family, volunteers, visitors, companions, and service providers are subject to The City of Winnipeg Smoking By-Law #88/2003 in that smoking is prohibited within The Convalescent Home of Winnipeg, or on its property/grounds.

### **Gift Giving to Residents**

We ask that the nursing team be advised of any gifts given to a Resident. If clothing is gifted, please ensure that the nursing staff are aware in order to have the clothing labelled.

Gifts of food should be discussed with the nurse to ensure that these adhere to possible dietary restrictions in place for the Resident, as well as to ensure safe storage of the items.

### **Gift Giving to Staff**

Staff are employed and paid by The Home to provide a service. We ask that gifts not be given to individual staff members; however, should you feel so led, donations may be made to The Home (payable to The Convalescent Home of Winnipeg) so that all staff may benefit.

## Photographs

A photo will be taken by staff of the Resident and placed on their medication pouch for safety reasons (to clearly identify the Resident).

Photographs (with the consent of the Resident, family or legal designate) may be taken of the Resident during activities and displayed on our “Recreation Fun” bulletin board on the main floor and/or in our Newsletter/related publications.

During the admission process, the Social Worker will request consent for the taking/posting of pictures.

Due to respecting Resident privacy and confidentiality, family/friends must restrict taking photos/videos to that of **their own family member**. Taking pictures/videos of other Residents is **NOT** permitted.

Again, due to respecting the privacy of Residents at The Home, no information or photos regarding The Home or the Residents are to be posted on social media.

## Safety and Security

### **Restraints**

The Home adheres to a minimum restraint policy with Residents.

The usage of restraints may be considered only when the care team assesses that a particular act, behavior, or response is placing the Resident or others at risk of serious injury. This practice is in keeping with Manitoba Health and Winnipeg Regional Health Authority Standards. Implementation of any restraint is done following a full assessment and consultation with the Resident or their family/designate. Once discussed, the Resident or their family/designate will be requested to provide verbal or written consent to the restraint being used.

### **Fire Drills**

Fire drills are conducted monthly. All employees are thoroughly trained as to their roles in the event of an emergency situation. When the alarm sounds, Residents, family/designates, and visitors are requested to stay where they are, unless directed otherwise by a staff member.

### **Swipe Card**

Entrance to The Home is by swipe card or access granted by our Business office Administrator through our intercom system. As a matter of convenience and ease in “coming and going,” all regular visitors to our Home are highly encouraged to obtain a swipe card. A \$25.00 (subject to change) refundable deposit is required. The Home is also equipped with a closed-circuit camera system at various key entry/exit locations.

## End of Life Care

### **Palliative Care**

At the end of life, it is our honor to continue to support and care for the Resident at The Home unless their care needs, from a medical perspective, exceed that which we can provide, and/or the Resident, their family/designate requests hospitalization/transfer to another location.

Palliative care involves the delivery of health care for patients (Residents) who are facing life-limiting illness, and ensures the Resident is treated with dignity, comfort and care while being supported in their current environment at The Home. Our staff is trained to provide compassionate care throughout a Resident's life's journey with us.

### **Funeral Arrangements**

As end-of-life decisions are often difficult, upon admission or shortly thereafter, the Resident, family/designate are requested to identify their funeral home of choice.

If no funeral home of choice is listed, or the family or designate cannot be reached, a funeral home will be determined by The Home.

A Resident's personal belongings will only be released to the family (or designate) and are to be packed/picked-up within one to two days of the Resident's passing. Due to lack of space, The Home is unable to store personal items for families/on behalf of the Resident.

### **Farewell Tribute/Celebration of Life**

To pay our respects to the Residents who have passed away, Farewell Tributes/ Celebrations of Life are memorial services that are held at The Home.

These services are held a few times a year and provide a means for Residents, families, friends, and staff to come together to honor and remember those Residents who have passed away.

Families/friends will be provided with an invite to the memorial service.

## Contact Us

### **Concerns/Issues**

The Convalescent Home of Winnipeg will address all concerns and issues submitted by Residents, their families/designates related to the care and services provided, and/or environment. All parties are encouraged to advise the Unit/Charge Nurse and/or Administration team of any concerns by phone call (main line: (204) 453-4663) or in writing (placing your letter in the mailbox/mail slot, located by our Business office).

Concerns received by the Board of Directors will be reviewed/responded to by the Chief Executive Officer/Director of Care on a timely basis.

### **Suggestion Mailbox**

A mailbox/mail slot is available immediately in front of the Business office. Feedback on our service is important to us.

Should a member of the leadership team be unavailable to meet with you immediately, please place your letter in the mail slot ensuring your contact particulars are provided in the content of the letter. Based on the nature of your inquiry/concern, the appropriate leader will respond as promptly as possible.

## Afterword

Once again, we welcome you to The Home. We hope that this guide has been helpful in addressing some of your questions.

Please feel confident that our staff is readily available should you require any assistance or have any questions.

Home is where Love resides;  
Where Memories are created;  
Friends are always welcomed;  
And Laughter never ends.

- Author unknown -

# The Convalescent Home Of Winnipeg Directory

**TELEPHONE NUMBER: 204-453-4663  
(EXTENSIONS AS FOLLOW)**

Administration Office (Business office)	200
Controller (Finance)	202
CEO/Director of Care	203
Assistant Director of Care	204
Social Worker	205
Staffing Development Manager	206
Dietary & Housekeeping Manager	207
Kitchen	208
Recreation & Volunteer Manager	209
Building Service Manager (Maintenance)	211
2 <sup>nd</sup> Floor Nursing Station	212
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**The Convalescent Home of Winnipeg  
276 Hugo Street North  
Winnipeg, MB R3M 2N6**

