

# ***WELCOME TO RANGIURA***



*The management and staff of Rangiuira would like to extend a very warm welcome to Rangiuira Resthome.*

*We pride ourselves in offering you an ongoing commitment for the very best of residential care and we assure you of our constant aim to provide a safe and supportive environment during your stay with us.*

*In this folder we have set out information that you and your family may find helpful in assisting you with your queries.*

*If there is something that we have not covered, in our booklet please do not hesitate to ask.*

*It is extremely important to us that you are aware of our facilities and services offered for your care, and that you are secure in the knowledge that your comfort and satisfaction are of paramount importance to us.*

*Please feel free to contact our management team for further information at the contact details listed*



To provide a home environment where our Residents continue to grow and live with the dignity and respect they deserve.

To be cared for at all times by competent and committed staff who will provide ongoing holistic care appropriate to our resident's individual needs and desires.

### **HOME PHILOSOPHY**

To embrace the philosophies of the Eden Alternative, to help ensure our residents are living in a human habitat that encourages continued growth and purpose by-

- ✚ Eliminating the plagues of loneliness, helplessness and boredom for our residents.
- ✚ Excelling in all aspects of care, by creating and supporting a team of dedicated, proactive and professional staff.

- ✚ Providing our residents with ongoing opportunities for meaningful activity and responsibilities, loving companionship, spontaneity and variety.
- ✚ Respecting and nurturing our residents, their families and each other.
- ✚ Encouraging and supporting community involvement.
- ✚ Innovating and continually refining our services so that they fulfill the needs of those we care for.

## **Rangiura – An Eden Alternative Home**

We are an Edenizing facility. That means the way we treat residents is like we would a friend, or beloved family member. The Eden Alternative® is an approach to care that recognizes the importance of treating a person's heart as well as heart condition. While we do our best to heal bodies, we must feed spirits.

We encourage new ideas, spontaneous acts of kindness, thoughtfulness and consideration throughout our resident's home.

Edenizing is not so much a destination, but a journey. We travel life together, making it more worthwhile for our residents, and the staff providing the care. Edenizing focuses first on the residents, their wants, needs and wishes. Treatment is provided through this care process.





### *The Eden Alternative Ten Principles*

- 1. The three plagues of loneliness, helplessness, and boredom account for the bulk of suffering among our Elders.*
- 2. An Elder-centered community commits to creating a human habitat where life revolves around close and continuing contact with plants, animals, and children. It is these relationships that provide the young and old alike with a pathway to a life worth living.*
- 3. Loving companionship is the antidote to loneliness. Elders deserve easy access to human and animal companionship.*
- 4. An Elder-centered community creates opportunity to give as well as receive care. This is the antidote to helplessness.*

**RANGIURA RESTHOME/ HOSPITAL**  
**POLICIES & PROCEDURES**

5. *An Elder-centered community imbues daily life with variety and spontaneity by creating an environment in which unexpected and unpredictable interactions and happenings can take place. This is the antidote to boredom.*
6. *Meaningless activity corrodes the human spirit. The opportunity to do things that we find meaningful is essential to human health.*
7. *Medical treatment should be the servant of genuine human caring, never its master.*
8. *An Elder-centered community honors its Elders by de-emphasizing top-down bureaucratic authority, seeking instead to place the maximum possible decision-making authority into the hands of the Elders or into the hands of those closest to them.*
9. *Creating an Elder-centered community is a never-ending process. Human growth must never be separated from human life.*
10. *Wise leadership is the lifeblood of any struggle against the three plagues. For it, there can be no substitute.*

## **STAFF**

### **Philosophy**

Our service is not limited to physical and material things. Our aim is to help older members of the community turn their latter years into a time of fulfilment and completion. It is a time when they should integrate the joys and sorrows, hopes and anxieties of life – which the elderly feel in a particularly sensitive way.

Look at the treasure of humanity and wisdom that is yours in your elderly folk

Love them and be grateful to them

All of the staff at Rangiura are competent in Rest Home care requirements. We practice a policy of ongoing in-house education and training to ensure staff are fully capable of meeting your needs

*This is a residential care facility. The facility is purpose built for the care of the elderly and is certified by the Ministry of Health to accommodate residents who need this specific level of care.*

*This facility is licensed and staffed to provide care to the residents assessed as needing this level of care.*

In the case of an illness, we will seek assistance and advice from a Doctor. If that illness is beyond our capabilities and facilities then we will discuss with you and your relatives about making alternative arrangements appropriate to your needs. It is your responsibility to inform Management fully re. Relevant medical history and current health status. Care for your own health and well being as much as possible

This is a safe facility in which residents can feel secure. In order to gain admission it is necessary to ring the bell to be let in after hours however residents who are safe to go out are encouraged and able to do so.



*A Welcome Letter to Our Home*  
Rangiura Home and Village, Putaruru

Eden in our home means, that we make our own Rules  
according to how we desire to live!

Please introduce yourself to us!!!  
and be patient!

You may find you need to repeat yourself - do so, many times.  
we may be hard of hearing, visually impaired etc.

Please ask each one of us how we would like to be addressed or called!

Please always explain what you are going to do and remember to ask  
permission when you come to offer to help us in any way with our  
daily activities

Please encourage and support us to continue being independent by finding out what we can do for ourselves and being patient whilst we do these tasks

Please remember to knock on the toilet, activity and bedroom doors before entering – this is our home

Please find out if we need help when using a wheelchair, as we may be able to wheel ourselves

For those that are wheelchair users and need assistance, we ask you every time you wheel the chair – please inform us to where we are going

At meal times ask us what support we want and need,  
Each one of us is very different!!!

*Thank you for reading our welcome letter  
Residents of the Rangiura Home and Village*  
**WHO ARE ELIGIBLE FOR ADMISSION?**

*We are certified to provide residents who are assessed as needing this level of care level care.*

*36 Rest Home Beds 18 Hospital Beds 16 Dementia Beds*

*We cater for permanent care of both privately paying as well as subsidised clients. We also cater for Carer Relief Stays.*

### **Hospital Care**

We offer specialised care for residents who require 24/7 registered nursing care due to age related problems.

Special care needs are professionally managed and we undertake to meet age related physical, intellectual, emotional and social needs. Resident's safety is promoted.

Care is delivered and supervised by RN's who are trained, experienced and competent in delivering these special services.

Staffing numbers reflect good practice guidelines and our skill mix is relevant to the resident's care needs.

Staff receive ongoing training through our in-service education sessions and training programmes.

### **Dementia care**

## **RANGIURA RESTHOME/ HOSPITAL** **POLICIES & PROCEDURES**

People who have been assessed by a psychogeriatrician to have dementia, who are ambulant and have such disorders of behaviour that it is not possible for them to be accommodated elsewhere.

Our greenhouse *will* be a specialist dementia unit

We *will soon* provide specialist care for older people who have been assessed for needing dementia specialised care/interventions. Staff (supervised by RN's,) receive appropriate training and have competency's tested ensuring that care is delivered in a safe and timely manner.

Training includes:

- Dementia/age related psychiatric disabilities-types, causes, symptoms, effects. Addressing the issues relating to dementia/age related psychiatric disabilities including: Communication, challenging behaviours, sexuality and dementia, continence, safe environment, grief and loss associated with dementia.
- Appropriate activities and therapies.

Activities Coordinator responsible for the daily programme is appropriate experienced and receives ongoing training relevant to size and setting of our facility.

- The activities for our residents promote quality of life and minimises difficult behaviours.
- Each resident is assessed to determine their individual requirements.
- Each resident's 24 hour care plan has a description of the activities that meet their needs in relation to diversional, motivational and recreational therapy. These activities reflect the resident's former routines and activities that are still familiar to the resident.
- Each staff member who provides care to the resident is informed about the resident's care plan in relation to diversional, motivational and recreational therapy.
- There is a quiet, low stimulus room provided for the resident when privacy is required, in some cases the resident's bedroom can be used.
- There are additional nutritious snacks available over a 24 hour period for the resident to eat "on the run".

### **Resident's areas inside and outside are:**

- homelike and, assists with the management of difficult behaviours
- We work towards minimising the risk of confusion of the resident. The safety of the residents who are likely to wander is promoted
- There are appropriate spaces that are conducive to individual activities and group activities.
- We offer sufficient freedom of movement both indoors and outdoors to enhance the management of ambulant restless and/or agitated behaviours.
- The outside area is kept secure ensuring resident's safety but still allowing freedom of movement.
- We aim to provide maximum freedom of movement but also ensure there is no unsupervised access to areas outside of the safe environment that may endanger the safety of residents.

### **Management of Disturbed Behaviours**

There is a written and implemented policy for the management of disturbed behaviours.

The policy includes the principles of protection of all residents, visitors, and staff.

An assessment process is defined and staff receive ongoing appropriate training to allow them to identify behaviours and triggers and how to manage challenging behaviours.

Each resident's care plan includes:

- A record of the resident's assessments
- Guidance for staff of how the resident's behaviours are best managed over the twenty four hour period as documented in the Care Plan.
- A record of the resident's responses to the care plan which is evaluated by the registered nurse.

### **Refusing entry**

If at any time the CSM/ Registered nurse feels that a visiting applicant or existing resident is not suitable, family and referral agency will be officially informed with reasons stated and we will do our best to offer an alternative.

### **Reasons for refusal can be if:**

- We can not cater for the care level that the applicant is assessed for.
- The applicant has serious psychiatric problems.
- The applicant requires 24 hour registered nursing care.
- The applicant shows ongoing behaviour that could disrupt the other residents.
- At any level of refusal, the CSM/ RN will clearly document in resident progress notes as appropriate.

## **LEVEL OF CARE**

We are certified and staffed appropriately as per legislation and good practice guidelines relevant to the level of care we are certified for.

In the case of illness while living here, we will seek assistance and advice from a doctor. If the illness is beyond our capabilities and facilities then we will discuss with the Resident's representative about making alternative arrangements appropriate to the Resident's needs.

## **THE RESIDENT'S REPRESENTATIVE**

We care for people who sometimes are not capable of organising their own affairs and require another person to do this on their behalf. In respect of the Resident's financial affairs, this person may be a Property Manager or Enduring Power of Attorney holder. If the Resident does not have a Property Manager or Enduring Power of Attorney we require that an application appointing a Property Manager for the Resident be made as a matter of urgency.

If the resident does not have an agent or relatives to appoint one, management in conjunction with the social worker, will help and advise the resident to appoint an agent either from Aged Concern, Public Trust, solicitor, local minister etc. as soon as possible after admission. If money is necessary before an agent is found invoices will be kept to hand over after agent is appointed.

## **MEDICAL SERVICES**

### **Doctor**

## **RANGIURA RESTHOME/ HOSPITAL** **POLICIES & PROCEDURES**

A General Practitioner (GP) attends regularly and the cost of the doctor's visits is included in the fee for subsidised residents. Should, however, the Resident prefer his or her own doctor, then extra costs shall be met by the Resident directly. If the Resident retains his or her own doctor, then that doctor should be prepared to attend in the case of an emergency.

Our General practitioner visits regularly and, if the GP approves, you will be seen at least every three months but more often when required.

Should urgent medical attention be required at night or during the weekend, then the on call doctor from House Call Services will attend.

If relatives have something to discuss regarding the care of their family member please arrange an appointment through the registered nurse or CSM

### **Specialist Appointments**

On occasion it may be necessary for the Resident to attend specialist, x-ray, medical centre, dentist, hospital and other appointments.

We encourage families to continue to take their relatives to these appointments. If no one is available we will organise supervision of resident.

A cost of Staffing service may be appropriate and will be discussed on an individual basis to ensure recovery cost of service is met.

### **Nurses**

The nursing care is overseen by our Registered Nurse who is qualified and has extensive experience. She/he co ordinates the holistic care of the resident between all parties.

### **Medication**

Medications are controlled by nursing staff and kept to a minimum through consultation with our doctors, pharmacist , specialist services and as appropriate, Resident and family.

They are strictly monitored to ensure that medication is dispensed safely and correctly.

### **Social Workers**

Should any resident require the services of a social worker, this can be arranged by liaising with our SSM during Monday- Wednesday business hours.

## **GENERAL INFORMATION**

### **Settling in Period**

New residents can have a one month assessment period to ensure suitable placement. If in our opinion the Resident is not happy or suitably placed, then we will discuss alternative arrangements with the Resident's representative-

### **Additional Services** (*see later in this information for more specific details.*)

From time to time we arrange additional services for the Resident, such as hair dressing, podiatry and outings. Where the cost of these additional services is not included in the fee it shall be met by the Resident directly. An indemnity will need to be signed for the Resident to participate in outings.

### **Resident Meetings**

## **RANGIURA RESTHOME/ HOSPITAL** **POLICIES & PROCEDURES**

We encourage all residents to participate in these meetings and have their say regarding facility matters. The meetings will be announced and minutes of these meetings displayed on the residents information board.

### **Telephone**

You may have your own telephone connected in your room (at your cost). Otherwise there are phones available in the home for your use. Please advise reception if you make a toll call.

### **Television**

is situated in the main lounge and residents may have a television in their rooms. If residents have hearing problems head phones are encouraged so TV can be enjoyed without upsetting other residents if sound has to be turned up.

### **Staffing**

Is provided for 24 hours and there is a Registered Nurse on call for emergencies at all times. 24 hour medical care is also provided as required. Caregivers have been chosen not only for their professionalism and clinical expertise but also their approach to the residents

### **Mail.**

Your mail will be delivered to you each day. Posting of mail can be done for you by leaving it at the main reception desk.

### **Spiritual and cultural needs**

We will assist residents who wish to attend church services. Church volunteers are invited to visit residents and bring in communion for residents who wish to receive. Kaumatua are welcome to conduct a prayer meeting for interested residents.

### **Podiatry**

A podiatrist attends to any podiatry needs of the residents at our local Pharmacy. Ask the RN to arrange an appointment for you. This will incur a cost to be paid directly to the Podiatrist at the time of consultation.

### **Physiotherapists**

As part of our team we have a registered physiotherapist who provide a large range of services including rehabilitation, mobility, pain management, exercise classes etc. If you have any need for mobility aids they will assess/arrange this.

### **Hairdresser**

By appointment. Staff will make your appointment if you are unable to. Salon expenses are not included in your fee. Charges are very reasonable

### **Client advocacy**

All client/family/whanau who wish to obtain the services of an advocate at any time will be referred to the Health Advocacy Service or local Age Concern.

### **Interpreter**

## **RANGIURA RESTHOME/ HOSPITAL** **POLICIES & PROCEDURES**

If you have difficulties understanding any written documents or verbal conversation, we will be happy to arrange an interpreter.

### **Security of Personal Possessions**

The management recommends that money is not left with residents. While we do not wish to take away the individuals independence and ability to deal with their money, we will not be responsible for any money that may go missing.

People with dementia or some level of memory loss often hide money in a "safe" place, they might forget where they hid it and then could accuse others of stealing it.

Articles of value, such as jewellery should not be left with residents who may not be able to look after such items. We will not be responsible for any articles of value that go missing.

Articles of value should be kept by family/whanau or the clients advocate.

The facility and its staff shall not be liable for any theft, loss or damage to the Resident's property. All items should be clearly labelled.

We can keep small amounts of money at reception for Residents personal use for items such as shampoo, soap, sweets anything that the shop ladies might buy for them at the residents request.

This money can also be used to pay for Hair Dressing if the resident or their family/Whanau requests this.

### **Shopping**

We have a shop at the home every Wednesday morning at 9.15 where you can purchase toiletries, fruit etc. The ladies will also go to the Supermarket for you.

### **Laundry**

We wash all residents clothing but prior to entry we ask that all clothing is clearly named. Laundry Marker pens for marking clothes can be purchased at most stationery shops but printed labels sewn on is a far more satisfactory method.

### **Recreational Activities Programme**

We believe that by keeping the mind and body active, a better quality of life is maintained. Entertainment, recreation and activities based on ability are facilitated for that purpose. A wide range of activities are provided.

Weather permitting, outings are organised to local shops, parks, beaches and attractions. For many residents we provide the opportunity to pick up on interests long forgotten but still enjoyable.

It is the choice of the Resident whether or not they participate in the activities. We have an Activity Co-ordinator directing a diversional therapy programme.

Some of the activities:

Bus trips	Carpet bowls	Reading
Housie	Shopping	
Collage	Painting	
Gardening		

### **Buddy System**

## **RANGIURA RESTHOME/ HOSPITAL** **POLICIES & PROCEDURES**

At Rangiura we have a Resident/ staff buddy system where residents are teamed with a staff Member/Buddy who can visit with them and do small things to assist the resident.

### **Spiritual Support**

Your own spiritual advisor is welcome to visit you at your convenience.

Transport can be arranged to any Church/Fellowship in town. A church service is held at Rangiura on the 1<sup>st</sup>, 3<sup>rd</sup> and 4<sup>th</sup> Thursdays at 10.15 in the Hall.

### **Maori Residents**

We are supported by Raukawa Trust Board to assist us to meet the cultural needs of our Maori residents. Please feel free to approach us if you wish to use this service.

### **Dry Cleaning**

Dry cleaning is picked up and delivered every Tuesday at reception. Costs are at your own expense.

### **Outings**

We have an 11 seater van (with hoist) which we utilize both as a courtesy coach and for fortnightly outings to local places of interest. We also have a courtesy car which we use to transport residents to appointments/clinics, outings and special visits.

### **Celebrations**

We will make available areas where birthdays or other special events can be celebrated with family and friends. Talk to your Care Staff and they will arrange it for you.

### **Quality Assurance**

We have an on going Quality Assurance Programme to ensure we maintain the highest standard of care possible. If you have any suggestion or comments you wish to make about our service, please let us know, by advising staff or with SSM directly.

### **Management**

This facility is owned by:

#### **Rangiura Trust Board**

Rangiura was established in 1981 as a Charitable Trust on donated land and is surrounded by large picturesque grounds. Its 'wide-open' situation in a quiet location within walking distance of the main centre make it suitable for access to the wider community in safety.

We pride ourselves with being able to provide a caring environment where the residents are treated with dignity and respect.

The care facility currently comprises of 54 Rest Home beds, 20 of these with ensuites.

A 71-unit Retirement Village complements the Home, with half of the units surrounding the complex, whilst the remainder are situated in the town centre. A further 14 Retirement Villas are currently under construction adjacent to the main Rest Home in Rangiura Place.

## **RANGIURA RESTHOME/ HOSPITAL**

### **POLICIES & PROCEDURES**

Rangiura is a 24-hour Residential Stage 2 Care facility catering for high dependency residents up to SN Level 4.

We are at present in the process of converting 18 of our beds to Hospital level care and hope to be licensed to provide level 5 (continuing care) by August 2010. Also under construction, is our purpose-built 'Greenhouse Memory Support Unit'. This will be a 16-bed home catering for people requiring

Level 3 - secure residential care. This facility, situated to the rear of the home, (the first of its kind in Australasia) is based on the Eden Alternative model of care and due to open its doors to the community in Nov/Dec 2010.

Rangiura is also licensed to cater for young disabled (Under 65's) with comprehensive physiotherapy back up. Depending on bed availability we also cater for respite care and our day care programme is well established.

Our Clinical Services Manager or Support Services Manager are available to assess information from a referring agency prior to a resident/consumer being deemed eligible for entry to our facility, and assist you with all your inquiries prior to coming in for care.

The General Manager: Juliette Bell  
The Support services Manager: Jeri Rose  
The Clinical services Manager: Jill Gaskin

### **DIETARY REQUIREMENTS**

**Breakfast:** From 7.00am

Breakfast is usually served in the residents bedrooms.

Breakfast can be any of the following: bran flakes, porridge, weetbix, Cornflakes, muesli, toast with marmalade, honey etc. Tea, coffee and milo.

**Morning tea:** 9.30 am- 10.00am

Held in the dining room and main lounge.

**Dinner:** 11.45 midday

This is the main meal of the day. It includes a main, dessert and drink

**Afternoon tea:** 2.30pm

In the dining room and main lounge

**Tea:** 4.45pm

In the dining room. A light meal consisting of a savoury dish or sandwiches with soup, fresh fruit dessert, tea or coffee.

**Supper:** 7.30pm

Tea or coffee or Milo, which is served in the dining room or bedroom as desired.

**RANGIURA RESTHOME/ HOSPITAL**  
**POLICIES & PROCEDURES**

- **Likes and Dislikes** – Some of this information is collected on admission. Please let us know of any allergies or incompatibilities.
- **Cultural Preferences** may influence the sort of food you prefer. Let us know your special needs and we will find ways of meeting them.
- **Visitors** are always welcome and can be catered for with a small charge for main or tea meals – ask your Care Staff how to arrange this.
- **Going Out** – It is a requirement that Staff are advised if you will be out for a meal.

Diabetic, weight reduction, low salt and high calcium diets are provided if required. A nutritional review of the menu is conducted annually by a Registered Dietician. We try very hard to cater for all likes and dislikes!

## **DEMENTIA FACILITY**

This facility set in a large secure garden which enables people to wander freely at their leisure. Visitors must ring a bell to be let in (afterhours) and residents who are capable to go out are encouraged to do so with family and friends.

There is large lounge for the residents. Toilets and showers are adjoining all the bedrooms. There is good access to the garden and surrounding area. There are no steps to contend with and there is plenty of car parking space for visitors.

## **RESTHOME & HOSPITAL**

### **The Building**

This facility set in a large garden which enables people to wander freely at their leisure. Visitors are welcome at any time residents who are capable to go out are encouraged to do so with family and friends.

There is large lounge for the residents.

There is good access to the garden and surrounding area. There are no steps to contend with and there is plenty of car parking for visitors.

Toilets and showers are near to all the bedrooms

## **SAFETY**

There is easy access from the inside to outside areas therefore the likelihood of falls and accidents are greatly reduced. Showers, toilets and bathrooms all have handrails to assist clients and to make them feel secure. It is impossible however to totally prevent falls or accidents and still live with our philosophy of care.

We comply with the Health and Safety Act and have identified hazards in and around the facility that could occur. (please ask for a copy if you like to know which hazards we have identified) We have procedures in place to minimise any risks.

Our staff are well trained in the use of all equipment in relationship to residents with disabilities or compromised mobility/ deteriorating health. Staff are given on going training in all aspects of supporting elderly residents to provide a safe and secure environment,

All electric equipment **MUST** be tested prior to being used in the facility.  
This may include TV, DVD, Hairdryers, electrical shavers, electric chairs.

## **Essential, Emergency and Security Systems**

### **Fire Safety**

We have an evacuation scheme which has been approved by the NZ Fire Service. Every 6 months a trial evacuation is carried out and recorded for audit purposes.

In the event of a real fire, a debrief and analysis of the evacuation would take place as per our continuous improvement philosophy. Minutes of the debrief and analysis would be recorded and any outcomes linked to our Risk Management Plan.

We have in place a sprinkler system and smoke detection system. Adequate fire extinguishers and fire proof doors where appropriate to comply with all standards.

All of our staff are trained in emergency preparedness as part of their orientation and on an ongoing basis. In the event of a fire, they know to ring 111 and carry out an evacuation as planned. Laminated instructions of Communications to Emergency Services are clearly visible beside the main phones to assist the person dialling 111. Signs are mounted on the back of each resident's door in their room explaining what to do in the event of a fire.

Our existing fire risk has been analysed and is documented in our Risk Management Plan and all steps are taken to minimise the risk.

### **Civil Emergency**

In the event of a civil emergency such as an earthquake, flood or volcanic eruption we have on site supplies of water, food, torches, blankets medical equipment and medicines for residents and staff. An inventory of equipment and supplies is kept in the civil emergency cupboard and replenished annually if not used.

Staff receive training in what to do in a civil emergency. Key considerations are communication with residents' and staff families, personal ablutions, hygiene and infection control, potential loss of electricity and medicine management.

### **Call system**

In order to maximise resident independence and safety, we have an easily accessible call bell system within our facility. The call bell system is explained to all residents on entry into the facility and shown to staff as part of the orientation programme.

### **Smoking**

For the health and safety of both residents and staff, we have a NO SMOKING policy within the grounds and building.

### **Security**

At night all external doors are locked as required for staff and residents safety.

## **FINANCIAL ARRANGEMENTS**

We have a current contract and are certified by the Ministry of Health and if your relative meets the criteria for a Subsidy then the majority of the expenses will be met. Their superannuation will be diverted to assist in paying for their care at Rangiura.

### **Subsidy**

Rangiura has Residents who are receiving a subsidy and those who are privately paying. These matters are confidential. All residents are treated the same.

If a non-Subsidised Resident wishes to become a Subsidised Resident, he or she must satisfy the Eligible Person criteria, which includes an assessment by a Needs Assessment and Service Co-ordination Service and a financial means assessment under section 69F of the Social Security Act 1964.

Assessments may require some time to arrange, and the conclusion of such assessments may be that the Non-Subsidised Resident is not an Eligible Person.

Subsidised residents are covered under the contractual requirements.

All accepted applicants are expected to sign an admission agreement. (QAN 6.1)

Private residents are asked to sign the relevant pages on or prior to admission.

### **The services provided by us: (*What is included in the fees*)**

- 24-hour nursing care
- activity programmes
- all meals
- all personal laundry (but not dry-cleaning)
- support for relatives and friends
- Registered Nurse input and supervision + 24 hour on call.
- GP visits 1-3 monthly and when clinically required in consult with (RN/ GP).
- 24 hour doctor on call. Extra visits requested by residents/relatives.\*
- 24 hour nursing care
- Physiotherapist 5 days a week
- Activity Coordinators/ Diversional Therapist
- Access to religious personnel
- Supervision and transport to appointments as necessary
- Personal shopping for those whose family are unable.
- Dressings and supplies used in treatments. These will be of an appropriate standard.
- Continence management products that are of an appropriate standard to meet the assessed needs of each Subsidised Resident, as set out in the Care Plan.

### ***Activities offered include:***

- Activity Coordinator
- Handcrafts, games, music, supervised walk/outings
- Magazines, Books and photo albums
- Visiting singer/entertainers
- Concerts\*
- Celebrations, I.e. Birthdays, Christmas etc.

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- Bus trips\*
- Church and other community facilities.
- Listening to music
- Watching TV and videos

***\*At resident's cost***

**The following services are not covered by the fees:**

- a. Specialised assessment and rehabilitation services – including specialist assessment for, and advice on, rehabilitation and specialised assessment (by accredited assessors) for individual customised equipment via ACC or Ministry funded Environmental Support Services provider.
  - b. Customised equipment, accessed through services funded by the relevant DHB or through specialised accredited assessors, such as wheelchairs modified for an individual's use, seating systems for postural support, specialised communication equipment and other customised and personal care and mobility equipment.
  - c. The provision of equipment, aids, medical supplies or services that relate to conditions covered by separate funding from us, another DHB, or the Ministry except where these have been specified in Section D or Section E as forming part of the Services.
  - d. Services such as those provided by dentists, opticians, podiatrists, audiologists, chaplains, hairdressers, dry cleaners, and solicitors.
  - e. Clothing and personal toiletries, other than ordinary household supplies.
  - f. Charges for personal toll calls made by the Subsidised Residents.
  - g. Insurance of the Subsidised Resident's personal belongings.
- Non-subsidised medication – many medicines are free but there are some which are not covered by any government subsidy – where there is a availability of a same generic medication we will seek a substituted through our contracted Pharmacist, where there is not, the client will need to pay the part charge on a monthly account.
  - Alternative medicines
  - Interpreter services
  - Doctors visits for private Residents

## **THE HELP WE NEED FROM YOU**

### **CLOTHING**

- Supply and upkeep of appropriate, machine-washable clothing, remembering that incontinence increases the number of changes of clothing needed each day.
- Marking of all clothes (preferably with sewn-in labels) as this is essential to prevent loss and confusion.

You can expect to be contacted when it is noticed that a resident's wardrobe no longer meets requirements or when repairs are needed. It is important to realise, too, that requirements do change – for example, through a resident's change in weight or an alteration in his or her functioning.

### **Here are some suggestions on what to provide:**

- The style of clothing that they have worn for the past 40 years. If they are used to leather shoes don't buy them sneakers.
- comfortable easy care clothing
- dresses that button or zip down the front or back are preferable for ease of dressing and undressing
- half-slips, camisoles and singlets. Nighties with elastic necklines or several buttons (so that they can be slipped down rather than lifted over the head)
- track-suit pants or 'permanent press' trousers
- shoes with flat soles
- at least one good outfit to be worn on outings and special occasions
- clothes made from knit or interlock so that fabrics wash and wear well without ironing
- socks that do not have a tight binding at the top which restricts circulation
- electric razor

*On admission an inventory of clothing is taken. People with incontinence feel embarrassed with accidents and often hide wet and soiled clothing in rubbish bins, in the garden etc. As a result underwear usage may be higher than family normally expect. Also incontinence leads to extra laundering and hence quicker wearing out of clothes that got wet or soiled. If family are concerned with the amount of underwear being asked for, please discuss this with the registered nurse*

### **TOILETRIES**

Basic toiletries are available for purchase, but you can add to them if you wish i.e:

- toilet bag
- moisturiser vitamin E for the face, arms and legs
- perfume/after shave
- make-up
- hair spray
- Toothpaste

We ask that soap, talcum powder not be purchased as we use a soap/ moisturiser substitute called Aqueous Cream that is great for cleaning and after moisturiser.

## **GLASSES AND DENTURES**

It is helpful if these are named in a permanent way.

## **MISCELLANEOUS**

- At the time of a resident's admission, residents or if appropriate their relatives will be asked to sign an admission agreement, consent forms and resuscitation form.
- When a resident is distressed or agitated, sometimes a phone call to a loved one can be a great comfort. Staff may request your permission to arrange this.
- Relatives and friends are of course very welcome to take the resident out for day trips or for weekends, by arrangement with staff.
- We also welcome family and friends to take a cup of tea with residents.

## **YOUR INVOLVEMENT**

How much you involve yourself with Rangitura and your relative is entirely up to you, and indeed what is desirable varies from one situation to another. For some people it is entirely appropriate to continue with a high level of involvement, and we very much welcome you as a major contributor to the caring team. For others it might seem more appropriate not to visit too often. Some who have become exhausted in the struggle to maintain their loved one at home might feel the need of a rest or holiday before becoming very much involved again. You may like to discuss with the Manager how much you would like to be involved, but we do appreciate that circumstances change and you might wish to change the level of involvement (to either more or less) as time goes by.

If you are the primary carer or next-of-kin, please also indicate how much you wish to be informed on minor changes that occur in the resident and changes in medication and routine.

You, of course, have the right to be involved in decisions about medication and to know what is going on.

## **COUNSELLING FOR CARERS**

We also recognise that most people experience some very difficult emotions when they first place their loved one in a facility. Some feel guilty because they have had to give up the unequal struggle of continuing to manage at home. Others have a feeling of relief – but then feel guilty that they feel relieved. Others again feel a great sense of loss. All these feelings are quite normal, but sometimes it is helpful to talk about them. Please feel free to do so if you wish, and contact the Registered nurse or the manager.

## **PRIVACY**

We abide with all aspects of the Privacy Act 1993 and the Health Information Code 1994.

Clients have the right to access their medical and nursing notes at any time. Client's representatives are given a copy of the Code of Rights and Responsibilities on admission to the facility.

The staff respects the privacy of all clients with regard to their physical privacy and privacy of information

All information regarding medical history, health status, personal information, etc. are collected by management and are stored for the period as prescribed by respective regulation.

You or your representative has the right to access the information. All such information is kept in a secure place.

You or your representative will be expected to sign consent forms for various requirements as per regulation

## **SUGGESTIONS AND COMPLAINTS, FEEDBACK**

We aim to provide a superior service in a warm and caring environment, but nobody is perfect, so we are always looking for suggestions to improve conditions for our residents. Suggestions for improvements could be given to the Manager or the Registered nurse. All feedback will be welcomed and passed on to staff.

Likewise, although we hope there will not be serious complaints, it is important that you should feel free to air them either to us or to an appropriate body. You could discuss them or put them in writing on our Complaint Form.

Your complaints will be thoroughly investigated and results reported back to you within 14 days of receiving the form.

You may make an anonymous complaint if you prefer to:

Health and Disability Commissioner (09) 3733556

We will ask your feedback from time to time through a satisfaction survey and will appreciate your comments.

Please don't hesitate to contact the manager or RN should you require more information or if you like to discuss anything in more depth.