

APRIL

2019

Villa Wide  
Programs



**Every Tuesday**

2:00pm Bingo (A)

**Every Thursday**

10:30am Knit & Chat (CnL)

**4<sup>th</sup> & 18<sup>th</sup>** – 2:15pm Pottery (A)

**10<sup>th</sup>** – 2:00pm Residents' Council (A)

**22<sup>nd</sup>** – 2:25pm Easter Craft Party (A)

A – Auditorium

CnL – Conservatory Lounge

*Please refer to home area calendars for more opportunities to get involved!*



Family members want to give loved ones the best, most compassionate care possible. Please consider joining the Family Council to advocate for changes and recommendations that will help better serve you and your family. Members meet monthly to support each other and discuss topics that are important to St. Joseph's Villa residents' quality of life. If you are interested in attending the next meeting is **April 15, 2019 at 7:00 p.m. to 9:00 p.m. in the Villa**

**Boardroom, Ground Floor. If you have any questions, you can contact the Chair, Eda Cipolla at [edacipolla@gmail.com](mailto:edacipolla@gmail.com).**



### ***Easter at the Villa***

**Join the Spiritual Care Department as we embark on the Easter journey from Palm Sunday through Easter Sunday.**

**We've included a schedule of Easter services below.**

**All are welcome!**

**Palm Sunday - April 14<sup>th</sup> - Rosary at 9:30 a.m.**

Mass at 10:00 a.m.

**Maundy Thursday – April 18<sup>th</sup> - Rosary at 3:00 p.m.**

Mass at 3:30 p.m. (no 9:30 a.m. mass)

**Good Friday – April 19<sup>th</sup> - Service at 3:00 p.m.**

(There will be no regular 10:30 a.m. service)

**Holy Saturday – April 20<sup>th</sup> - No service**

**Easter Sunday - April 21<sup>st</sup> - Rosary at 9:30 a.m.**

Mass at 10:00 a.m.

***We wish you the hope and joy of the resurrected Christ this Easter season and always.***

## **New Temporary Licence for the Convalescent Care Program**

Great news! The Villa has had the Temporary Licence for the Convalescent Care Unit renewed until February 2024.

Located on the 5<sup>th</sup> level of St. Joseph's Villa, in Dundas, our convalescent care program offers 24 hour round the clock care, supervision and accommodations for 35 patients.

With the support and expert guidance of our team of nurses, occupational and physiotherapists and assistants, social workers, therapeutic recreation specialists, individuals return successfully to an independent lifestyle at home. We focus on providing the best rehabilitation care and services to help our clients reintegrate into the community feeling healthier, happier and stronger.

Convalescent Care at St. Joseph's Villa involves:

- Short-term stay (90 days) at St. Joseph's Villa for recovery of strength, endurance and functional independence
- Full participation in engaging, effective program activities and services
- Health education to learn & re-learn skills for independence and self-care
- A safe and suitable location in the community upon completion of the program

Convalescent Care is funded by the Ministry of Health and Long-term Care. Patients must meet regulatory criteria for admission. Referrals for CCU programs are managed by the Local Health Integrated Network and partner hospitals.

## **New Furniture**

We are very excited to share that new furniture has arrived on some of the RHAs. As flooring is replaced, we are trying to also add some new furniture to the common areas. We are sure you will enjoy this enhancement to the space.

**MEMO**

TO: All Residents, Families and Staff

RE: Flooring Project

FROM: St. Joseph's Villa Management Team

DATE: March 26, 2019

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The carpet replacement project will be happening on your Resident Home Area (RHA) for the next couple of weeks. We want to make sure that this project goes as smoothly as possible for our residents, staff and visitors. Wendy Randall, Manager of Housekeeping and Linen services is the first contact for this project.

If you should have any questions or concerns throughout the project at you can contact Wendy at 289-237-3069. Members of the Nurse Management team are also available to assist as well if needed.

The Kosco flooring team will be on site Monday-Friday working on your RHA. The crew is aware of the safety expectations they are to have in place and will communicate any concerns to Wendy or the nursing team. The affected area is to have a barrier in place and the fire doors closed, as well as fans and windows may be used if needed for dust or odor and masks are available to any person wishing to wear one.

There will be a housekeeping project person on the floor daily from 11-7 to assist with cleaning, moving, packing and ensuring safety measures are in place throughout the day.

Nursing staff are reminded to ensure residents are not in the work area behind the barriers whenever possible. If a resident needs to stay in their room staff must conduct frequent checks. If a resident wants to rest please ensure that an alternative is put in place recliner chairs are available upon request or perhaps available in the opposite TV area that resident could go to.

Thanks for your co-operation.

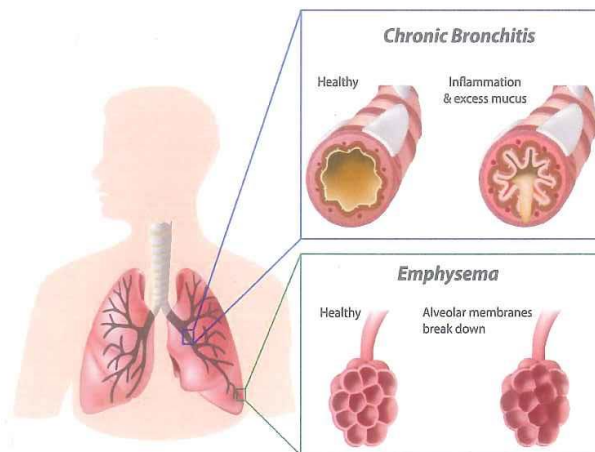


Topic of the month:

**COPD Awareness**

**WHAT IS COPD?**

COPD means Chronic Obstructive Pulmonary Disease. COPD is the name for two breathing diseases (chronic bronchitis and emphysema) that cause airways to become "obstructed" or blocked.



Chronic Obstructive Pulmonary Disease (COPD)

**HOW DO I KNOW IF I HAVE COPD?**

If you are over 40 and smoke or used to smoke, you may have COPD. Some non-smokers may also get COPD.

**TAKE THIS 30-SECOND LUNG HEALTH QUIZ TO SCREEN SYMPTOMS OF COPD**

- Do you cough regularly?
- Do you cough up phlegm regularly?
- Do even simple chores make you short of breath?
- Do you wheeze when you exert yourself (exercise, go up the stairs)?
- Do you get many colds and does it usually last longer than your friends' colds?

If you answered "Yes" to one or more of these questions, you may have symptoms of COPD. See your doctor to find out what is causing your symptoms.

**Note:** This test is for information purposes only. It should not replace a complete medical examination by a doctor. If you think you may have COPD or are worried about your health, please see your doctor.

**I HAVE BEEN DIAGNOSED WITH COPD, HOW CAN I MANAGE MY SYMPTOMS?**

COPD can't be cured, but it can be treated.



Consider quitting or avoiding smoking.



Take your COPD medications.



Stay active. Consult your physician for exercises that would be safe for you.



Stay protected and get the Influenza and Pneumonia vaccines.

**References:**

1. Living well with a Chronic Obstructive Pulmonary Disease - COPD. [online] Available at: <https://www.livingwellwithcopd.com/> [Accessed 8 Mar. 2019].

Brought to you  
by the S.I.M  
GYM

Bring your  
Lunch and  
Learn

Talk takes  
place in the  
auditorium of  
St. Joseph's  
Villa from  
11:30-1pm

56 Governor's  
road, Dundas  
Call  
905-627-3541  
ext 2109  
or email  
s.i.m.gym@  
sjv.on.ca  
to reserve  
your spot  
55 and older  
please



## Lunch and Learn May 9th, 2019



Join Avi Singh, Physiotherapist  
as he discusses rotator cuff  
and shoulder pain.

Here's what you'll learn  
during the workshop:

- Know which rotator cuff muscle is affected and the grade of the tear
- Correct the cause of your pain and speed up the healing process
- Prevent your shoulder from getting worse, and avoid the single biggest mistake shoulder pain sufferers make

## **Residents' Bill of Rights cont'd from March Bulletin**

### **2. No abuse**

**"Every resident has the right to be protected from abuse."**

#### **In other words...**

No one is allowed to abuse you physically, financially, sexually, verbally, or emotionally.

- Physical abuse is when someone assaults you, handles you roughly, or slaps, pushes, or beats you. It is also physical abuse when someone refuses to give you medicine that you should take, or gives you medicine that you should not be taking.
- Financial abuse is when someone takes your money or property by fraud, theft, force, or by tricking you. If anybody forces you to sell or give away your property, or takes your money or possessions without your permission, what they are doing is financial abuse.
- Sexual abuse is when someone forces upon you any type of sexual activity that you do not want. It may be inappropriate touching, sexual exploitation, or comments. Sexual abuse happens if, for example, a staff member or other person in authority has a sexual relationship with you, shows you pornographic materials, or looks at your naked body when that is not part of their job.
- Verbal abuse is when someone calls you names, yells at you, or speaks to you in a way that scares, belittles, or threatens you.
- Emotional abuse is when someone threatens, insults, or frightens you, or says or does something that humiliates you. This kind of abuse may make you feel lonely, ignored, or as if you are being treated like a child.

### **3. No neglect**

**"Every resident has the right not to be neglected by the licensee or staff."**

#### **In other words...**

The owner and the staff at the home are not allowed to neglect you. Neglect is when the home fails to give you the treatment, care, services, or help that you need for your health, safety, or well-being. Neglect also

happens when someone, by not taking action, puts your health, safety, or well-being at risk.

For example, you have the right to get medication that is prescribed for you. If you need help getting to the toilet, you should be taken to the washroom instead of being forced to use incontinence products such as diapers, pads, or plastic pants.

#### **4. Proper care**

**"Every resident has the right to be properly sheltered, fed, clothed, groomed and cared for in a manner consistent with his or her needs."**

#### **In other words...**

You have the right to receive the care you need. Your care should include:

- a proper place to live,
- enough good food to eat,
- clean clothes to wear, and
- help with looking clean and tidy.

The staff at your long-term care home should look after any special needs you have.

#### **5. Safe and clean home**

**"Every resident has the right to live in a safe and clean environment."**

#### **In other words...**

You have the right to have a clean and safe place to live in.

The long-term care home must be safe and everything should work properly. Smoke alarms must work, fire exits must be clearly marked, and stairways must be clear. The building must be clean. Garbage should be taken out regularly. There should be no bad smells and the building must have a good air supply.



## Tips for assisting People with physical disabilities

**Only some people with physical disabilities use a wheelchair. Someone with a spinal cord injury may use crutches while someone with severe arthritis or a heart condition may have difficulty walking longer distances.**

### **Tips:**

- if you need to have a lengthy conversation with someone who uses a wheelchair or scooter, consider sitting so you can make eye contact at the same level
- don't touch items or equipment (e.g., canes, wheelchairs) without permission
- if you have permission to move a person's wheelchair, don't leave them in an awkward, dangerous or undignified position, such as facing a wall or in the path of opening doors

**People with vision loss: Vision loss can restrict someone's ability to read, locate landmarks or see hazards. Some customers may use a guide dog or a white cane, while others may not.**

### **Tips:**

- when you know someone has vision loss, don't assume the individual can't see you; many people who have low vision still have some sight
- identify yourself when you approach and speak directly to the customer
- ask if they would like you to read any printed material out loud to them (e.g., a menu or schedule of fees)
- when providing directions or instructions, be precise and descriptive
- offer your elbow to guide them if needed

**People with hearing loss -People who have hearing loss may be deaf, deafened or hard of hearing. They may also be oral deaf – unable to hear, but prefer to talk instead of using sign language. These terms are used to describe different levels of hearing and/or the way a person's hearing was diminished or lost.**

### **Tips:**

- once a customer has identified themselves as having hearing loss, make sure you are in a well-lit area where they can see your face and read your lips
- as needed, attract the customer's attention before speaking; try a gentle touch on the shoulder or wave of your hand
- if your customer uses a hearing aid, reduce background noise or move to a quieter area

- if necessary, ask if another method of communicating would be easier (e.g., using a pen and paper)

**People who are deaf blind-** A person who is deaf blind may have some degree of both hearing and vision loss. Many people who are deaf blind will be accompanied by an intervenor, a professional support person who helps with communication.

**Tips:**

- a customer who is deafblind is likely to explain to you how to communicate with them, perhaps with an assistance card or a note
- speak directly to your customer, not to the intervenor

**People with speech or language impairments-** Cerebral palsy, hearing loss or other conditions may make it difficult for a person to pronounce words or may cause slurring. Some people who have severe difficulties may use a communication board or other assistive devices.

**Tips:**

- don't assume that a person with a speech impairment also has another disability
- whenever possible, ask questions that can be answered with "yes" or a "no"
- be patient; don't interrupt or finish your customer's sentences

**People who have learning disabilities-** The term "learning disabilities" refers to a variety of disorders. One example is dyslexia, which affects how a person takes in or retains information. This disability may become apparent when a person has difficulty reading material or understanding the information you are providing.

**Tips:**

- be patient – people with some learning disabilities may take a little longer to process information, to understand and to respond
- try to provide information in a way that takes into account the customer's disability; for example, some people with learning disabilities find written words difficult to understand, while others may have problems with numbers and math

# **Villa Lifemark Therapy Team –** **Physiotherapy Services and Occupational** **Therapy Services**

## **Jeparaj Palayyan Reg. Physiotherapist**

Juravinski (North) Tower: All Resident Home Areas (RHA's)

McArthur (South) Tower: Oak, Cherry, Primrose

Hours: Full time Mon-Fri

[j.palayyan@sjv.on.ca](mailto:j.palayyan@sjv.on.ca)

## **Deepa Balasundaram Reg. Physiotherapist**

McArthur (South) Tower: Pine, Willow, Maple, Trillium, Cedar

Hours: Tues, Thurs

[Deepa.balasundaram@sjv.on.ca](mailto:Deepa.balasundaram@sjv.on.ca)

## **Marissa Lasby Occupational Therapist Assistant**

Juravinski (North): All RHA's

McArthur (South): All RHA's

Hours: Mon-Fri 8-4

[Marissa.lasby@sjv.on.ca](mailto:Marissa.lasby@sjv.on.ca)

## **Anita Basarke Reg Occupational Therapist**

Juravinski (North): All RHA's

McArthur (South): All RHA's

Hours: Tues, Thurs mornings

Contact OTA for any questions or concerns regarding Occupational therapy.

Office Location: Centre (East) Tower Ground Floor behind elevators

**Please note: Family wishing to connect with a Lifemark therapy Team Member, please leave a voicemail to book an appointment or permission given to send the above named staff an email, we will get back to you at our earliest convenience.**

Physiotherapy Voicemail: ext 2401

Occupational Therapy Voicemail ext. 2402